Nigeria: Children and Young People with Disabilities

October 2021
Acknowledgements

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Explanatory note

This report presents Country of Origin Information (COI) on the situation of children and young people with disabilities in Nigeria. For the purposes of this report a child is any human being under the age of 18. Where possible we have also included information on young people (18-21 years), as this is often a gap in COI evidence. Its desk-based research draws from a wide range of written sources published between 1 January 2019 and 31 August 2021\(^1\). The report also includes information from interviews and written correspondence with eight sources with specific expertise on persons with disabilities (pwds) and child protection in Nigeria between June and August 2021.

This explanatory note briefly introduces our use of the term ‘persons with disabilities’ for this report. It draws attention to how the visibility of pwds in Nigeria has helped shape the development and substantive content of the report and then offers a brief introduction to its structure. It ends with a few outstanding comments on its appropriate use.

When the term persons with disabilities (pwds) is used within COI, it is rarely accompanied by a working definition or comprehensive explanations of its meanings within specific societal contexts. This reflects the lack of a universally agreed definition or understanding of the term as the meanings of, and responses to, disability differ considerably within and across contexts. The closest to universal agreement on the definition and understanding of disability at the international level is found in the Convention on the Rights of Persons with Disabilities (CRPD)\(^2\), ratified at the time of writing by 182 State Parties including the UK (on 8\(^{th}\) June 2009) and Nigeria (on 24\(^{th}\) September 2010). Our use of the term persons with disabilities for the purposes of this report is, therefore, drawn from the CRPD, specifically its Article 1. This asserts:

‘Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.’\(^3\)

This definition draws attention to the heterogeneity of pwds and the impact of aspects of their individual identity, as well as barriers to participation, that shape their life experiences. In addition to the form of impairment, aspects of individual identity may include age, ethnicity, socio-economic background, sexual orientation, gender identity or expression, religion and geographic and temporal location, as well as political opinion or status as a migrant, indigenous, or internally displaced person or returnee. Inherent in this definition is the critical role of intersectionality in understanding the situation of pwds, adult or child, with each experience of intersectionality being unique and dynamic.

It is this heterogeneity of pwds that makes it challenging to produce a generic report such as this, as it is not possible to provide information to cover every potential permutation of a pwds identity or situation. Accordingly, the report spotlights and provides non-exhaustive but illustrative information on pressing issues common to pwds in Nigeria and relevant to protection claims. In this way it can stand as a solid baseline from which individualised case specific research can begin. The list of sources and databases consulted for and provided in this report, will assist users to conduct such further research.

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1. With the exception of one source with publication date in September 2021 that was brought to our attention and was included in this report as it contained relevant information on the COVID-19 context
The issue of visibility of pwds is a recurrent theme within the report, influencing its inception, development, structure and substantive content. Its inception, for instance, was prompted by lawyers in the UK representing Nigerians with dependent children with disabilities (cwds) and unaccompanied cwds seeking asylum, who identified the information gap in Home Office Nigeria COI. A subsequent review of the Country Policy and Information Notes (CPINs) available on Nigeria on Islamist extremist groups in North East Nigeria (July 2021), Medical and healthcare issues (January 2020), Female genital mutilation, (August 2019), Trafficking of women (July 2019), Sexual orientation and gender identity or expressions (April 2019), Actors of protection (March 2019) and Internal relocation (March 2019) and Country Background Note (January 2020, now withdrawn), confirmed the absence of the word ‘disability’ within the text of the documents. The CPIN on Trafficking of women (July 2019) referred briefly to the vulnerability to trafficking of women with mental health conditions (para. 2.3.16) and to limited rehabilitation options for returned ‘mentally handicapped’ victims (para. 9.4.9).

Of note is the approach taken in the CPIN Medical and healthcare issues (January 2020). Within this, multiple references are made to specific medical conditions and the availability of and general accessibility to treatment, with minimal additional information. The report cites a country report on Nigeria from The Department of Foreign Affairs and Trade of Australia (DFAT), but it is a conspicuous exception:

‘...Mental health issues remain highly stigmatised in Nigeria, with many families hiding conditions or blaming family members’ mental illness on curses or witchcraft.’ (para. 6.9.3)

Further information on the implications of this stigma is not provided.

COI informs decision makers of the political, social, cultural, economic, security, humanitarian and human rights situations in the home country of an individual who seeks asylum, and the risk that individual faces should they be returned. Current Home Office COI on Nigeria fails to provide such information on children and young people with disabilities. This risks the refusal of cases involving children and young people with disabilities as the direct result of a lack of objective evidence that might support their protection claim.

The visibility of pwds, including children and young people with disabilities, was similarly limited in the sources identified in our initial desk research, with three notable effects for the development of this research. First, substantial reliance is placed on a couple of sources including the 2020 paper from the World Health Organisation, Disability Inclusion in Nigeria: A rapid review, and a 2018 report from Grassroots Researchers Association, They Called us Senseless Beggars, both of which are based on a range of quantitative and qualitative information, including interviews with persons with disabilities. Second, to further corroborate and update information within these reports, and where possible, to fill outstanding information gaps, this report includes recent and extensive interview transcripts with sources who have expertise on disability issues in Nigeria. Five out of eight of these sources identified as disabled. However, it is not entirely uncommon in COI to see elements of potentially biased opinion and advocacy. This report is no exception despite its researchers strictly following a methodology that seeks neutrality and impartiality. Third, despite lengthy desk research and interviews, critical information gaps remain. The most pressing of these include the situation of children and young people with intellectual and invisible disabilities, and the situation of children and young people with disabilities who are returned to Nigeria.

4 CPINs are available on the HM Government website where they are described as ‘Country policy and information notes (previously known as country information and guidance reports) are used by UK Visas and Immigration officials to make decisions in asylum and human rights applications.’
Disability pertinent information gaps should not be taken as evidence that a protection issue does not exist. Instead, they may reflect the extent and form of visibility of pwds within and beyond Nigeria or a possible lack of awareness and understanding of the ways in which disability intersects with different identities. In addition, or alternatively, they could indicate an issue being so commonplace and normalised that it fails to attract notice or attention.

The substantive body of the report is divided into nine core sections. Each spotlights pressing issues relevant to protection claims from children and young people with disabilities. These include risks from non-State and State actors alike. The sections cover, in order: common responses to pwds by non-state actors and their impact; relevant legal and policy frameworks (and their implementation) including insights into tensions arising from legal plurality and also the visibility of pwds within the State justice system; the visibility of, and consequent impact on pwds, in data collation practices; State discrimination of pwds and sufficiency of, and barriers to State protection; the availability of and access to health services for pwds, with brief details on the impact of Covid; the availability of and their access to education; specific focus on protection of children with disabilities (cwds); the prevalence and diverse forms of institutionalisation and conditions of institutionalisation they potentially face; and finally information on children and young people with disabilities who are returned to Nigeria.

The situation of children and young people with disabilities cannot practically be separated from that of pwds more generally. Each section consequently includes relevant information on protection issues common to pwds, in addition to that of children and young people with disabilities more specifically. Although thematically focused, all sections interlink or overlap to different extents. The individual sections should not therefore be read or relied upon in isolation. It is in their combination that they best comprise and make available reliable and relevant information for decision makers. As noted however, individualised case-specific information in addition to that found within this report is critical. Accordingly, this document should not be submitted to decision-making authorities in isolation as evidence of protection needs.

We must also recognise that in failing to publish versions of this report in accessible formats (such as easy read, Braille, and audio versions) we exclude many persons with disabilities from reading it and making use of its content, which is inconsistent with the inclusive principles this research was based upon. Unfortunately, we lacked the resources to make this undertaking and came to the view that it would still be of benefit to publish it in its current form for use as evidence in refugee status determinations.

Disclaimer

Please note that as authors of this report we are not legally accredited nor ‘experts’ in the matters we research and so cannot be classified as expert witnesses. We compile primary and secondary information to address certain country-specific questions, but we do not provide an assessment or analysis of the data. Similarly, we do not provide legal advice. The report was researched, written and edited by Asylos’ and ARC Foundation’s project consultants who were supported by Asylos staff and its network of volunteer researchers.

The COI presented is illustrative, but not exhaustive of the information available in the public domain, nor is it determinative of any individual human rights or asylum claim. All sources are publicly available and a direct hyperlink has been provided for each. In addition to assisting further research, the list of sources and databases consulted and provided below will enable source assessments. For more information about our research methodology, please consult Appendix A
Methodology of this report. This document is intended to be used as a tool to help to identify relevant COI and the COI referred to in this report can be considered by decision makers in assessing protection applications and appeals.

Whilst every attempt has been made to ensure accuracy, the authors accept no responsibility for any errors included in this report.

Background on the research project

This report is the result of a joint project by Asylos and ARC Foundation to publish a series of reports that present new and innovative forms of COI, generated by conducting interviews alongside existing sources. All planned reports cover topics related to young asylum seekers, defined as under 30, in the UK for whom an absence of country information forms a barrier to protection. Previous reports include:


Acknowledgements

This report was written by Jo Pettitt and Maya Pritchard, with invaluable input provided by Sarah Green and members of our Steering Committee. Important research assistance was provided by Asylos members (Anna Magyarlaki, Francesca Pierigh, Katherine James, Lucia Linares, Marcelo Giovannetti, Michelle Owusu, Teris Wetter, Yowali Kabamba) and ARC Foundation Associate Emily Wilbourn. Design by Iris Teichmann.

Feedback and comments

Please help us track the impact of our work. It is our best reward and helps us align our work to your needs. If you have read this report, used any part of it to inform your case or decision and/or submitted it to court, whatever its outcome, please complete the feedback form found here.

For general comments or inquiries about the project, or suggestions for future report topics, please email info@asylos.eu and info@asylumresearchcentre.org directly.

Who we are

Asylos is a global network of volunteers providing free-of-charge Country of Origin Information (COI) research for legal representatives and NGOs helping asylum seekers with their claim. Asylos works to ensure that asylum seekers and their legal counsel have access to crucial sources and data to substantiate their claim. Asylos volunteers use their research and language skills to access detailed information. Next to case-specific COI research, we compile broader thematic reports such as this one and deliver COI research training to legal representatives in partnership with ARC Foundation. More information can be found here.
ARC Foundation is the charitable branch of Asylum Research Centre (ARC). ARC was set up in 2010 in order to raise standards in the refugee status determination (RSD) process, improve the realisation of asylum seekers’ and refugees’ rights and entitlements and to ensure that those in need of protection are recognised as such. It is staffed by human rights researchers and COI specialists and undertakes research, case-specific COI research, advocacy and training. More information can be found here.

List of Acronyms

AOGs armed opposition groups
ASD autistic spectrum disorder
API Africa Polling Institute
BRISIN Basic Registry and Information System in Nigeria
CCD Centre for Citizens with Disabilities
CDNC Count Disability Nigeria Coalition
NCPWD Commission for Persons with Disabilities
CRC Convention on the Rights of the Child
CRPD Convention on the Rights of Persons with Disabilities
CWD Children with disabilities
ESSPIN Education Sector Support Programme in Nigeria
FCT Federal Capital Territory
FMWASD Federal Ministry of Women Affairs and Social Development
IDPS internally displaced persons
INEC Independent National Electoral Commission
LASODA Lagos State Office for Disability Affairs
NGO non-government organisation
NSAGs non-state armed groups
OHCHR Office of the United Nations High Commissioner for Human Rights
PDP People’s Democratic Party
MDAs ministries, departments and agencies
MIPs Mentally Impaired Persons
NBS National Bureau of Statistics
NAPPTIP National Agency for the Prohibition of Trafficking
NCFRMI National Commission for Refugees Migrants and Internally Displaced Persons
NCPWD National Commission for Persons with Disabilities
NDHS Nigeria Demographic and Health Survey
NPRD Nigeria Disability Project
NIDB Nigeria Industrial Development Bank
NPC National Population Commission
OHCSF Office of the Head of the Civil Service of the Federation
OPD Organisation of People with Disabilities
PCEI Physically Challenged Empowerment Initiative
PWDs persons with disabilities
SwD students with disabilities
Sources consulted and reference period

We chose to focus on the timeframe 1 January 2019 and 31 August 2021, as The Discrimination against Persons with Disabilities (Prohibition) Act 2018 was enacted in January 2019, and so the desk-based research includes written sources published during this period.

However, for some of the issues it was relevant to include more historic information. For example, exceptions to the timeframe were made for a rigorous academic study addressing societal perceptions of disability that were unlikely to rapidly change, or where more recent information was unavailable.

All web sources were consulted between 27 December 2020 and 31st August 2021.

Not all of the sources listed here have been consulted for each issue addressed in the report.

Additional sources to those individually listed were consulted via database searches. This non-exhaustive list is intended to assist in further case-specific research.

To find out more about an organisation, view the ‘About Us’ tab of a source’s website.

International organisations

Commonwealth Disabled People’s Forum
Commonwealth & Covid
United Nations Committee Against Torture
United Nations Committee on Economic, Social and Cultural Rights
United Nations Committee on the Elimination of Discrimination Against Women
United Nations Committee on the Rights of the Child
United Nations Committee Convention on the Rights of Persons with Disability
UN Department of Economic and Social Affairs Disability
United Nations Independent Expert on sexual orientation and gender identity
United Nations Independent Expert on the enjoyment of human rights by persons with albinism
United Nations Special Rapporteur on extrajudicial, summary or arbitrary executions
United Nations Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context
United Nations Office for the Coordination of Humanitarian Affairs
United Nations Special Rapporteur on the right to education
United Nations Special Rapporteur on the situation of human rights defenders
United Nations Special Rapporteur on the Independence of Judges and Lawyers
United Nations Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression
United Nations Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment
United Nations Special Rapporteur on trafficking in persons, especially in women and children
United Nations Special Rapporteur on violence against women, its causes and consequences
United National Special Rapporteur extreme poverty and human rights
United Nations Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health
United Nations Special Envoy of the Secretary-General on Disability and Accessibility
United Nations Special Rapporteur on the rights of persons with disabilities
United Nations Children’s Fund (UNICEF)
United Nations Development Programme (UNDP)
United Nations High Commissioner for Refugees (UNHCR)
United Nations Human Rights Council
United Nations Human Settlements Programme (UNHABITAT)
UN Partnership on the Rights of Persons with Disabilities
United Nations Office of the High Commissioner for Human Rights (OHCHR) / OHCHR news
United Nations Secretary General
United Nations Women
UNHCR Comments on EASO Country Guidance: Nigeria (February 2019)
WHO
World Health Organization Disability Team, Department of Violence and Injury Prevention and Disability
WHO MINDBANK
World Bank and Disability area of focus

NGOs and thinktanks
ADD International
Africa Centre for International Law and Accountability (ACILA)
African Centre for Strategic Studies
African Disability Alliance
African Disability Forum (ADF)
African Human Rights Coalition
AFRINEAD
Amnesty International
Albino Foundations (the)
Anglo-Nigerian Welfare Association for the Blind
Atlantic Council
CBM UK: The Overseas Christian Disability Charity
Centre for Citizens with Disabilities in Nigeria
Centre for Global Mental Health [Lists recommended resources and publications]
Centre for Popular Education and Human Rights (CEPEHRG)
Centre for Strategic and International Studies
Christian Blind Mission
Commonwealth Equality Network
The Commonwealth Scholars and Fellows Alumni Association Nigeria (COSFAN)
Council on Foreign Relations
PERL
Disability Africa
Disabled People International
Disabled People International - Europe
Disability Rights Advocacy Centre
Disability Rights International
Disability Rights Promotion International
Down Syndrome International
Eldis
Equal Rights Trust
European Disability Forum
Family Centred Initiative for Challenged Persons (FACICP)
Foreign Affairs
Freedom House
Global Action on Disability
Global Campaign for Education
Global Initiative on Psychiatry
Help Age International
Hudson Institute
Humanitarian Aid Relief Trust
Humanity and Inclusion
Human Dignity Trust
Human Rights Watch
Inclusion International

Inclusive Futures
International Disability and Development Consortium
Indigenous Persons with Disabilities Global Network (IPWDGN)
Institute for Human Rights and Development in Africa
International school of disability studies Nigeria
International Committee of the Red Cross
International Crisis Group
International Disability Alliance
International Disability Alliance (Advocacy Working Group)
International Disability and Development Consortium
International Federation for Human Rights
International Federation for Spina Bifida and Hydrocephalus
International Rescue Committee
IPI Global Observatory
Ire Pearl Centre of Hope
Joint National Association of Persons with Disabilities (JONAPWD)
Leonard Cheshire Disability
Light for the World
Mental Disability Advocacy Center
Mobility Aid and Appliances Research and Development Centre
Nigerian Association for the Blind
Nigeria Watch
Overseas Development Institute
Oxfam International
Pan African Network of People with Psychosocial Disabilities
Pew Research Centre
Oakland Institute
Open Democracy
Royal College of Psychiatrists
Right to Education
Sightsavers
Southern Africa Federation of the Disabled (SAFOD)
Safe Child Africa [formerly stepping Stones Nigeria]
United States Institute for Peace
Validity
Women Enabled International
World Blind Union
World Federation of the Deaf
World Federation of the DeafBlind
World Network of Users and Survivors of Psychiatry
World Psychiatric Association
NGOs and UN Agencies Assisting Persons with Disabilities worldwide
Media sources and blogs

Africa News
African Arguments
African Review
Agence France Press
Al Jazeera
All Africa
All Nigeria
BBC
This Day
Daily Graphic
Daily Trust
Daily Times of Nigeria
Democracy in Africa
Deutsche Welle
Edge Media Network
Global Voices
The Guardian (Nigeria)
The Herald
Inter Press Service
Jeune Afrique
The New Humanitarian
The New York Times
News Agency of Nigeria (NAN)
Nigeria Daily
Nigerian Observer
Nigeria World
Premium Times
Reuters / Reuters Africa
Thomson Reuters Foundation
United Nations News Centre
Vanguard
Viewpoint Nigeria

Selection of academic disability related journals

African Studies Centre Leiden
BJPsych International
CHR Michelsen Institute
African Journal of Disability
International Psychiatry Journal
African Journal of Disability
Disability & Society
Disability Studies Quarterly
Disability and Rehabilitation
International Journal of Disability Development and Education
Journal of Disability Policy Studies
Journal of Intellectual & Developmental Disability
Journal of Intellectual Disabilities
Journal of Learning Disabilities
Learning Disability Practice
Learning Disability Quarterly

COI Databases and Government Bodies

Australian Country Information Reports
Immigration and Refugee Board of Canada’s Responses to information requests
Foreign and Commonwealth office
UK Home Office
US Department of State Human Rights reports
DFID (PERL – Partnership to engage, reform and learn)
ECOI
Refworld
Reliefweb
EASO’s COI portal
Existing Asylos research notes

Lagos Disability Services (This is a Nigerian government body)

Basic Health Sources

Centre for Health, Ethics, Law and Development (CHELD)
Healthcare Industry Today [Health news by country]
International Committee of the Red Cross
MSF [Country Profiles]
Physicians for human rights
Relief Web
UN Special Rapporteur on the right of everyone to the enjoyment of the highest attainable
standard of physical and mental health
UNICEF [Country profiles; includes child health statistics]
US Agency for International Development
US National Library of Medicine Pub Med
WHO [Country Profiles]
WHO/European Observatory on Health Systems and Policies (EMRO) [European Country Profiles]
World Federation of Public Health Associations [contact details of national health organisations]

Basic Children’s Rights

Age of Consent [age of consent by country]
Christian Orphanages
CRIN
Consortium for Street Children
Defence for Children
Orphanages worldwide
Right to Education project [Country profiles]
Save the Children [Country profiles]
Their World
State Reports to the UN Committee on the Rights of the Child
UN Committee on the Rights of the Child
Committee on the Rights of the Child – Concluding Observations
Committee on the Rights of the Child – General Comments
Committee on the Rights of the Child – Decisions
UN Special Rapporteur on the right to education
UN Special Rapporteur on the sale of children, child prostitution and child pornography
UNICEF [Country profiles]
UNICEF’s State of the World’s Children
UNICEF’s Annual country reports and contact details UNICEF Country offices
UNICEF’s Multiple Indicator Cluster Surveys (MICS)
UNICEF Office of Research-Innocenti
U.S. Department of State
UNHCR Refworld

1. Treatment by society (including families, communities, and other non-state actors)
Societal discrimination

1.1. How are persons with disabilities viewed and treated by wider society, their family or local community members? Is there evidence of stigma or discrimination?

1.1.1. General information

A 2020 World Bank report gives detailed account of the stigma and discrimination faced by persons with disabilities in Nigeria, leading to their ostracisation and exclusion from society. This includes information that ‘many are therefore kept indoors, hidden away from neighbours and visitors, and mostly neglected’ and ‘they are rendered invisible to avoid being an embarrassment to their families’:

“Cultural Beliefs, Stigma, and Discrimination

Prejudice, social isolation, and discrimination are the greatest global barriers to disability inclusion reported by experts and persons with disabilities (Ashi, Olayi, and Ikwen 2015; Groce 1999). These factors are at the root of all of the other barriers that persons with disabilities encounter in their daily lives.

Negative Attitudes Toward Persons with Disabilities

Attitudes toward persons with disabilities vary but are most often negative. Such mind-sets emanate from inaccurate beliefs about disabilities and people with them and from the sense that persons with disabilities seem and/or behave differently than the “norm.”

“I don’t have hands. [...] So, people don’t like the way I look because I look odd. I look, you know, shapeless that’s how people see me. So people discriminate against me, people avoid me, people stigmatize me.” – a male double amputee, Lagos

Persons with disabilities experience the negative attitudes others have toward them in various ways, including rejection, neglect, loss of respect, reducing visibility to/of children with disabilities, being considered useless, and being thought unworthy of being alive.

“I offered my hand to somebody, [but] he said no, I don’t shake hands with an albino.” – a man with albinism, Abuja

“I was about a month old and still didn’t have a name because they believed I was a spirit.” – a man with albinism, Jos

“There was a woman I asked for money. She said she didn’t have any and later she sent someone to come and tell me not to waste my money on that girl, that I should just let her die.” – father of a child with cerebral palsy, Jos

A common experience reported by persons with albinism in particular is being called derogatory names that connote difference and rejection. This manifestation of negative attitudes cuts across all parts of the country.

“There are many other names like ‘anyare’- I can’t even spell that - in the Onitsha area. There are all kinds of names, you go to the Yorubas, [they say] ‘Afin,’ afin oriran osan (afin does not see in daylight). I can’t even spell that, but it is derogatory, you know. You go to the
north, they call us ‘baturen tuda,’ which is ‘fake white man’. Then, you go to Benin, they call us ebo, ebo, ebo. All those names are not complimentary, they are very derogatory, and we have to live with that” – man with albinism, Abuja.

The consequences of these negative attitudes include low self-esteem, isolation, depression, and suicide. Therefore, some persons with disabilities see themselves as inferior to people who do not have disabilities and as unacceptable to others. They may withdraw from society due to such attitudinal barriers.

“Even when you go to Jos, children gather and start singing. One of them even called me Santa Claus. You know, you are a human being, someone calling you Santa Claus is very dehumanizing.” – a man with albinism, Jos

“I started thinking of suicide, I became depressed because my friends all deserted me.” – a hearing impaired woman, Lagos

“That is why we use the name Integration, Dignity, and Economic Advancement (IDEA) intentionally, because some of us who suffer from leprosy see themselves as inferior. The self-esteem is no longer there.” – a man affected by leprosy, Benin

 [...] Family and Society

In Nigeria, persons with disabilities are discriminated against by their families and by society; many are therefore kept indoors, hidden away from neighbours and visitors, and mostly neglected (Mohammed 2017; Okafor 2003). They are rendered invisible to a void being an embarrassment to their families (Okafor 2003).

Sometimes, persons with disabilities are not allowed to participate in family decisions or are betrayed by family members. Many families have very low expectations for their family members with disabilities. And some families are extremely overprotective of their family members with disabilities, preventing them from discovering their potential.

“They often hide the person (with a disability) so that he won’t stain their image. They will hide you, keep you away from society and social organizations, and make you feel lost and lonely. They go to soothsayers, to spiritual healers, to traditional healers for solutions.” – a man with mental illness, Makurdi.

Even the family, [when they sit down] and discuss something, they will say, let us discuss it, we will let her know later.” – a hearing impaired woman, Jos

However, the family-level experience is not always negative. There are many families that take good care of their family member with a disability—most usually try their best in a “hostile” environment and without any support.

“I used to say that my father played a major role in my [upbringing] because he really trained me to be independent.” – a woman with spinal bifida, Lagos

Participants with disabilities decried their lack of participation in decision making and social activities in the community. Naturally, persons with disabilities want to take part in community life. However, they are seldom invited to participate, and if they do so, are often rejected and ridiculed, which makes them tend to withdraw. Some lose the right to their
inheritance due to their disability. Religious gatherings are no better. Persons with disabilities are usually neglected at these gatherings, reflecting the attitudes of the larger community.

“We are battling with cultural barriers. We are completely relegated out of the community. They will not even allow you to be part of any decision making, they will not allow you to get involved in a town hall meeting, they will completely keep you out of the main community.” – a woman affected by leprosy, Jos.

Beliefs around causes of disability

“Study participants with disabilities shared some common beliefs around the causes of disabilities. These include the inaccurate belief that disabilities are a punishment for the past sins of the individuals, their parents, or their families. This belief is also being reinforced by some religious practitioners across multiple faiths, who consider disability to be an affliction or sickness that befalls a person as punishment for their sins. Some believe it is a curse or bewitchment.

“Some people say the reason why I am visually impaired is because I committed a sin.” – a visually impaired woman, Jos

Some study participants expressed the belief that impairments can be acquired through close contact persons with disabilities and that women with disabilities always give birth to children with disabilities— which may be why some women with disabilities find it difficult to get married.”


Further reports reiterate that superstitious and negative cultural beliefs result in discrimination and mistreatment against persons with disabilities:

“The Inability of the parents and the society to accept their children with disabilities; it’s a big issue. These children are subjected to cruel treatment by relatives, native doctors, and religious homes.”

(Source: The Guardian, *Mofolusho Liasu: I’m teaching parents how to accept and love special kids*, 14 August 2021)

“Persons with disabilities faced social stigma, exploitation, and discrimination, and relatives often regarded them as a source of shame.”


“Discrimination against PWDs in Nigeria stems from the negative public perception of people with disabilities in communities across the country. In many communities, PWDs are commonly viewed as accursed due to misinformed cultural beliefs. This has led to poor identification, evaluation, screening, and placement of children with disabilities.”

(Source: Dataphyte, *Over 25 Million Nigerians Excluded Due to Disability*, 21 January 2020)
“PWDs routinely face social exclusion within their communities in the whole of the study area. Public attitudes and perceptions toward the group are disheartening with strong underlining superstitious/cultural beliefs that result in discrimination against PWDs. Despite advocacy by civil society groups, religious institutions and international communities on the need to support PWDs, the majority of Nigerians still assume that persons with disabilities are incapable beggars who depend on others to provide for them. In nearly half of the interviews we conducted, PWDs repeatedly stated that most people assumed they are lesser humans because of their disabilities. (pg 5-6)

[... ] Society has historically imposed barriers that subject people with disabilities to lives of unjust dependency, segregation, isolation and exclusion from mainstream society. Religion and culture promote certain beliefs and attitudes about disability and people with disabilities that lead to discriminatory practices. It is a commonly held belief within some rural areas in Nigeria that disability is a result of a “curse” and so people with disabilities are treated as being helpless and charity dependent” (pg 41)


(Source: Grassroots Researchers Association, “They Called us Senseless Beggars”: Challenges of Persons with Disabilities in North Eastern Nigeria, 2018, pg 5-41)

When interviewed by Asylos and ARC Foundation, researcher and author Timothy Ali Yohanna described some additional forms of mistreatment children with disabilities experience from their families:

“But much of the problem is in society because people tend to think that maybe the parents did something and that is why they have a child that is disabled. And that's a very strong notion. And again, the parents themselves sometimes discriminate against their children. Disabled children will not be taken to school but will be taken to a street to beg for money.

So, they turn them into an investment where people may have sympathy and empathy with them and give them a little money, and the parent takes that money every time they come home. So, they deliberately don’t put them in school to get an education to make something of themselves. That is one way that parents contribute to the way the community looks at them. The other way is parents who believe that the children they give birth to who are disabled are cursed and that they will never get rich, they will not get what they want, so they tend to abandon the children, not giving them equal rights with other children. And so, these children struggle on their own because they were abandoned and taught that they cannot be useful in the future.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Timothy Ali Yohanna also provided some examples of discrimination persons with disabilities experience from religious institutions, and the impact of this treatment:

“Some religious institutions will clearly contribute to discrimination. When people bring children with a mental disability to them and say, “Okay. Pray for them. This is the situation they have,” they turn around and say that this child is dedicated to an evil spirit, and he is a
curse to a community. An example from my direct experience is from 4 years ago in one of the northern states of Nigeria, when a woman gave birth to a baby with disability and an ‘abnormal’ face and she threw the baby away alleging that the baby is controlled with evil spirits and might end up killing her.

[...] Some religious leaders discriminate against them by not allowing them to go into a mosque to pray with others because they feel they are not hygienic, and in some instances, they feel like they might not be able to queue and pray with other people. So sometimes they leave them outside. If you look at Christians, for example, they will pray for people with disability so that they get healed and they keep on exposing them to populations of people and they keep on praying for them. And at the end of the day, they don't get healed and this becomes a stigma against them. I spoke with two or three people who were taken to prayer houses and unfortunately, they didn't get healed and then people came back and said, "Well, you were cursed, and then you went to a house for prayers, and even God rejected you." And the person experiences such stigma that it's better he kills himself."

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

1.1.2. Information relating to children and young people with intellectual impairments

In her thesis about autism in Nigeria, the author describes some of the negative perceptions made about people affected by autism spectrum disorder and the treatment that arises from it:

“[...] autism and similar conditions have negative perceptions starting from how people describe and define them. In the Yoruba culture and language, people with autism are often referred to as “didirin” or “akuri” which can be translated to idiotic and insane [...]. “Olukun” is another word that is commonly used to describe people with intellectual disabilities which roughly translates to “slow”. These names, similar to the use of “retard” in the United States, are not only damaging but are a constant reminder of how people with disabilities are seen as less than in society. These negative associations with pervasive developmental disorders guide how people interpret the disorders.

[...] The way that Nigerians label and explain autism has direct effects on the daily lives of people affected by ASD [autism spectrum disorder]. The specific social and cultural implications of raising a child with autism in Nigeria consequently leave parents grappling with damaging stigmas and shame. Children experience stigma in a way that is unique from their parents, because their experience is shaped by how their parents navigate the challenges presented by raising a child with ASD and obtaining resources for that child [...]

One of the most significant stigmas that follow families with children with autism is that the disorder is proof of damage in a family’s bloodline. Ulofoshio (2018) reported the testimonies of Nigerian mothers who are parenting children with ASD, and those mothers echoed this anxiety of being unable to maintain the reputation of their “family line”. Cultural beliefs about the significance of family lines make this stigma even more damaging. For example, in the Igbo tradition, before a man is to marry a woman, he is to seek out the lineage of her family that must be approved by the family and God [...]. Evidence that there are family members with mental illness or disabilities would be a red flag in this process, which has led many families to attempt to protect their children with ASD and their family from scrutiny. This fear of autism damaging the whole family's reputation can be explained
by the concept of courtesy stigma. Courtesy stigma can be described as the discrimination that extends to other family members and proximal loved ones”


1.1.3. Information relating to children and young people with physical impairments

These sources describe views of, and treatment experienced by, children and young people with different forms of physical impairments:

“Eight years ago, Bukola Ayinde had her perfect life shattered. Her first child, Oluwalonimi, had been diagnosed with cerebral palsy. Her initial reaction was rejection. A devout Christian, accepting the reality of her child’s medical condition challenged her faith in God. She didn’t find solace in the thoughts of friends and colleagues either.

“Someone said that my husband and I must have committed a sin and that we need to sit down and think of what we have done, then ask for forgiveness. Another told us that we’re not desperate enough for a cure because we have money for her treatment,” she explained. Ayinde felt alone in her world. When she visited malls and outdoor spaces for children, the young faces that stared back at her looked hale and hearty. The few who had disabilities didn’t suffer from cerebral palsy, a congenital disorder of movement, muscle tone, or posture usually caused by an abnormal brain development often before birth. When she finally accepted her fate, she was challenged by society’s acceptance. Doors were closed at her in schools; people stared at her child as if she was an alien in churches. During these moments of rejection, Ayinde realised the volume of misinformation about cerebral palsy in Nigeria.

[...] More research revealed the growing misinformation about the medical condition as schools and churches turned their backs at persons with disabilities as if they were outcasts. Ayinde took the onus to change the narrative. To achieve this, she targeted the younger generation, because according to her, they are the best way to create the future.”

(Source: This Day Live, “Dealing with Misinformation About Cerebral Palsy”, 18 April 2021)

“A 20-year-old physically challenged woman, Opeyemi Olatoke, locked up in a house by her parents for five years, has been rescued by Osun State government.

The father of the girl, Prophet Samson Olatoke, founder of C & S, Ileri Ayo parish in Ikirun, said the lady was locked up due to her health issues.

[...] A statement by the commissioner’s media aide, Oyedele Kehinde, said the father of the girl, Prophet Olatoke, disclosed that they decided to lock her up due to her health issue, while her mother explained: “I did not give birth to Opeyemi with a disability, it all started when she was four years old, that day she shouted from her sleep and that was how she became lame.”

(Source: Vanguard, *Osun govt rescues physically-challenged lady locked up for 5 years by parents*, 26 January 2021)
1.1.4. Information relating to children and young people with mental health impairments

The following sources describe views of, and treatment experienced by, people (including children and young people where mentioned) with different forms of mental health impairments:

“Mental healthcare is stigmatised. Often, rather than seeking medical help, issues are either ignored or seen as spiritual attacks that can be treated by turning to religion.”

(Source: Al Jazeera, After #EndSARS, community support helps Nigerians heal wounds, 5 Jan 2021)

A nationwide perception survey on mental health, produced by Africa Polling Institute (API) and EpiAFRIC, states:

“Survey results also show “Drug Abuse” as the most common cause of mental health disorder. This may be directly connected to the current increasing use of drugs among youth in developing countries. Possession by evil spirits and sickness of the mind (Brain) ranked as the second and third most common factors. In Nigeria, there are culturally accepted beliefs that link mental disorders with the activity of evil spirits in a person. Most respondents indicated a preference for proper medical care in treating a person with a mental health disorder. However, a significant number of respondents in the South-East indicated that they would take the person to a prayer house. Although this is a relatively small number, it is however interesting to note that some respondents mentioned that they would take the person to a traditional medicine healer, lock the person up or beat the disease out of the person.

Results also show that most respondents, especially female, are unwilling to go into any type of relationship with a person living with a mental health disorder. This may be because of the perception of the poor public image of a mentally ill person. Some respondents indicated a willingness to be friends with a mentally ill person, they are however unwilling to either marry or enter into a business with a mentally ill person. One of the most common reasons cited by the respondents for not being willing to enter a relationship with a mentally ill person is personal safety.

Many of the respondents are of the opinion that mental health disorders are treatable. Most common reason is that they believe “If you go to the hospital you can get the help you need”. Among the respondents who do not believe that they are treatable, the most common reason is that they “See a lot of mad people around”. Other reasons are “It is due to possession by evil spirits” and “It is a curse from God”.

One common strongly held belief about mental health disorders among the respondents is, “Mental health is people going mad”. Again, this is an indication that mental health disorder is only perceived where there is a display of disruptive behaviour that attracts public attention. A close second is the fact that people are often encouraged to check for a history of mental illness in the family of their prospective spouse before they marry. This is a common occurrence in Nigeria and often, when a mental health condition is traced in the family, the marriage plans are cancelled. Furthermore, most respondents believed that mental health disease can be prevented if first, people stop taking hard drugs and second, if they are prayerful.”
1.1.5. Information relating to children and young people with sensory impairments

These news articles and publications describe some of the views about albinism:

“The misconceptions about albinos have also placed their lives in danger in different parts of Africa, especially East Africa and even in West Africa. There are those who erroneously believe albinos have a spiritual significance (wealth, political success, and good luck). They believe albino body parts are good for rituals and this myth has led to widespread killings of albinos for body parts.

[...] There is also the discriminatory belief that albinos are products of infidelity especially when the child is from two dark-skinned parents. The mother gets the blame as she is accused of having had sexual relations with another man or with white men. Several others abound, like albinos not seeing in the afternoon, albinos being gods, albinos not dying but disappearing among several others.

[...] Families often reject marriages to albinos out of fear of the birth of another albino child, snide and hurtful comments can bring down self-esteem, among many other factors.”

(Onome adds that because she is an albino, people expect less of her but she has been able to prove time and time again that being an albino is not synonymous with being dumb.

[...] She recounts that she learned to own the “hit single” about albinos— the popular ‘oyinbo pepper, shuku shuku pepper’ – that people sing when they come in contact with albinos. Her parents taught her to take the sting, mockery, and abuse from the song by owning it, so when the other children sang it, she sang along with them and danced.

[...] “There are days when people living with albinism will walk on the streets only to go home and cry because of the discrimination and stigmatisation. (This is because) Someone somewhere has used derogatory words and we are all humans. Despite the thick skin and walls we put up, there are days you break down. There are those of us who came from amazing and loving families but there are PWAs whose parents won’t even bring them out. They are hidden in the shadows, they are not educated and learned. This is the reality of many albinos.”

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[...] “There are days when people living with albinism will walk on the streets only to go home and cry because of the discrimination and stigmatisation. (This is because) Someone somewhere has used derogatory words and we are all humans. Despite the thick skin and walls we put up, there are days you break down. There are those of us who came from amazing and loving families but there are PWAs whose parents won’t even bring them out. They are hidden in the shadows, they are not educated and learned. This is the reality of many albinos.”

(Onome adds that because she is an albino, people expect less of her but she has been able to prove time and time again that being an albino is not synonymous with being dumb.

[...] She recounts that she learned to own the “hit single” about albinos— the popular ‘oyinbo pepper, shuku shuku pepper’ – that people sing when they come in contact with albinos. Her parents taught her to take the sting, mockery, and abuse from the song by owning it, so when the other children sang it, she sang along with them and danced.
“A popular notion of albinism is that persons with it are agents of divinities (eniorisa as they are often called) sent to families who have erred against some divinity or ancestral spirit as some form of punishment or curse. They are therefore often called afin, meaning horrible beings.”


This source describes how a woman who became deaf as a child was stigmatized by classmates and society in general:

“After I became deaf, I couldn’t relate well with my peer group; I was shunned, ignored and packed to a corner like a pack of cards. The intelligent class captain Janet is now deaf, a nonentity that no one wants to get close to; I was despised, and it hurt.”


**1.2. Are there reports/evidence about families or communities discriminating against certain groups of children and young people with disabilities more than others?**

The 2020 World Bank Report states prescriptive gender norms relegate women and girls living with disabilities to an even lower social standing:

“Gender

A variety of beliefs exist around the sexuality of persons with disabilities, particularly women. Common misconceptions in Africa are that persons with disabilities are asexual (Groce 2004) and that people with intellectual disabilities are hypersexual (Aderemi 2014). Yousaafzai et al. (2004) documents that women with disabilities in southern Africa experience sexual abuse due to the false and dangerous idea that having sex with a virgin can cure HIV, coupled with the misconception that women with disabilities are asexual and therefore most likely virgins. While there are more available data on the overall prevalence of gender based violence in Nigeria (DHS, 2018), there is scant information and data on the prevalence of GBV against women living with disabilities. This is an issue that should be further looked into as anecdotal information suggests that the prevalence is high. This study’s findings indicate that it is more difficult for women with disabilities to be involved in romantic relationships or to marry than for their male counterparts. Cultural beliefs around gender roles generally favour men over women, and this is magnified for women and girls with disabilities who might not meet a culture’s norms in terms of beauty or be able to take on the expected role of wife and mother. There is also the common misconception that women with disabilities will give birth to children with disabilities or that they are asexual.

“[A]ny able-bodied man will believe that when you want to get married, a disabled woman cannot play her role very well as a homemaker, in terms of cooking, taking care of the children, and the house” – a visually impaired woman from rural area, Jos

As a result, women and girls with disabilities are more likely to suffer from low self-esteem and, in their desperation, sometimes settle for the first man that will have them. This could
partly explain the reported experience of exploitation and violence in romantic and marital relationships among women with disabilities participating in this study. When a man without disabilities sexually exploits or marries a woman (or girl) with a disability, he often later abandons her and denies her the right to raise their children.

“There are many situations where a woman with disability will get pregnant, and the man will just collect the child and send the woman away. And oftentimes, they want to experience what it is like to have sex with a girl with disability, and that is why rape is increasing even here on the Plateau. It has happened many times, and many have been reported and others left just like that.” – a female with albinism, Jos

Men who are not hearing impaired might not even consider marrying a woman who is hearing impaired or hearing impaired due to communication-related challenges, which might also explain the high rates of hearing impaired women and men marrying one another.

“There are some guys that are so called “able”, approaching them, but sometimes the families reject them and say “how will they communicate with them?”” – a hearing impaired woman from rural area, Jos

People affected by leprosy often marry one another due to their stigmatized status in society. A woman that acquires a disability after marriage is more likely to be divorced or neglected by her spouse than would a man in the same circumstance.

“If a woman develops leprosy after getting married, the man will find a way to divorce her. [...] For example, in Jigawa State, there are two couples who got married and none of them were suffering from leprosy. But the woman later developed leprosy and the man ran away from her. But in the same State, a man happened to contract leprosy and the wife did not leave him.” – a man affected by leprosy, Benin

Furthermore, female family members of persons with disabilities, particularly mothers, may experience more marginalization than the rest of the family. These mothers are at risk of losing their marriages and raising their children alone and in isolation.

“After everybody spoke and it was my mother’s turn to speak last, she said “this is my child and he has all the features of a human being, nobody will take my child away from me.”

Then the battle lines were drawn because she was left with the choice of either leaving her marriage or surrender her child to the chief priest, so she made a decision to run away with me to a distant aunt for one year, three months” – a man with albinism, Jos

Study participants opined that women and girls with disabilities have fewer opportunities than their male counterparts to participate in socioeconomic activities such as employment, education, and attending social events. Contributing factors to this inequity may include the inaccessibility of water, sanitation, and hygiene facilities; attitudinal barriers; and limited economic opportunities.

“When is [sic] comes to using toilets, rest rooms, monthly flow there are more complications. I wonder how they live. When somebody is perceived to be unkempt [...], even the women will not like to associate with her. [...] In fact, it hinders them from even attending education.” – a male double amputee, Lagos
Finally, experts on disability inclusion in Nigeria also point out the lack of opportunities for women living with disabilities to exercise leadership roles, reinforcing the fact that the barriers and needs of women with disabilities continue to be invisible and, thus, are not being addressed.”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg 20-22)

This source also states that women with disabilities ‘suffer more’ because they experience ‘two-fold discrimination’:

“While quality of life of PWDs is generally poor, it is common knowledge that women living with disability suffer more. The women are poorer and generally face barriers to full equality and advancement because of such factors as race, age, language, ethnicity, culture, tradition and religion. Persistence of certain cultural, legal and institutional barriers makes women and girls with disabilities victims of two-fold discrimination: as women and as persons with disabilities. Girls and women of all ages with any form of disability are among the more vulnerable and marginalized of society. There is therefore need to take into account and to address their concerns in all policy-making and programming. Special measures are needed at all levels to integrate them into the mainstream of development.”

(Source: Disability Rights Advocacy Centre, A Pilot Accessibility Audit on Health, Social and Criminal justice Services in the Federal Capital Territory, February 2019)

The World Bank report goes on to describe how other intersecting identity factors may affect persons with disabilities, highlighting age, religion, geopolitical zone and displacement:

“Age
Study participants shared their views on the influence that age plays in the experiences of persons with disabilities. Low knowledge levels among children with disabilities regarding the nature of their particular disability exposes them to greater risk of harm than adults with disabilities. It is therefore crucial to educate these children about the nature of their disabilities and to provide guidance on how they can manage them.

“the [albino] child may see his friends playing under the sun and will want to join, not knowing that the sun is dangerous to his skin.” – a woman with albinism, Jos

“I tell mothers and parents to allow children to be aware of the disabilities they have. When they know what they have, they will know how to manage.” – a woman with spinal bifida, Lagos

However, early intervention services in Nigeria are poorly developed. Therapists are scarce, are concentrated in major cities, and lack the necessary equipment; and their services are often unaffordable to the average family.

“I went here and there, probably until he was 15, when I learned that there was a psychiatric hospital I could take him to where he can be given speech and occupational therapy. By then, his hand had coagulated, he could barely turn his hand to do anything. But he talks, walks, he is very active.” – mother of an adult with Down syndrome
Some participants shared their belief that individuals who acquire impairments as adults carry a greater burden than children with disabilities. The adult has already experienced life without a disability, whereas a child may not yet fully understand the implications of his or her disability. However, adults and children with disabilities alike are hurt by maltreatment and stigmatization. Among other things, children with disabilities have limited access to education and recreation, which are crucial to their development, including their mental capacity.

“For the elderly, their own [stigma] is worse than that of children. Once you were using your hands, legs, and eyes, but over time you can no longer do all those things. Their own stigma is much worse than that of children.” – a visually impaired woman, Jos

“There are many differences when it comes to a child [with disability] because there are no recreation activities for development, and the mental capacity as a child is not there. As adults, some can struggle to make their way and survive.” – a visually impaired man, Gombe

Further, children likely have many more years to live with their disabilities than adults do. The degree of access they have to early intervention services is a significant determinant of meeting development milestones and skills development and impacts their futures. Children and youths with disabilities have much to contribute to society, and society should take advantage of this by making basic services more accessible to them.

“Society must recognize them [people with disabilities] and give them opportunity to contribute. Like in the case of my brother, he works with the radio station. But it is more difficult for an elderly person who has […] lived a “normal” life until he becomes disabled.” – a visually impaired man from rural area, Jos

On the other hand, a person who becomes impaired in his or her adulthood who has already accomplished a great deal and is well recognized by society tends to face less discrimination than a person who becomes impaired at a young age. In a study that included three ethnic groups from Nigeria: the Igede from North Central, the Yoruba from South West, and the Igbo from the South East, Nicholls (1993) notes that the Igede distinguish between impairments resulting from accidents or the aging process (objective causation) and those resulting from birth defects, which cannot be explained. The former group receives more favourable treatment, that is, they are less likely to experience discrimination and isolation; the latter are subject to more negative attitudes.

“Some people may lose their sight with age, but they may have the advantage of being rich and people in the community will respect them because of their wealth. There is a former Commissioner of Plateau State who is now visually impaired, but people do not despise him and accord him due respect because of his status.” – a visually impaired man, Jos (pg 22-23)

[...] Religion and Geopolitical Zones

In Nigeria, religion informs many of the beliefs and attitudes toward persons with disabilities in the northern and southern parts of Nigeria. The predominant religion in the north is Islam; in the south, it is Christianity. The Islamic religion teaches that disability is the will of Allah and should therefore be accepted.

“The Islamic religion holds that people with disabilities should seek help from others who are well-to-do in the society. Like during Ramadan, when people go to the mosque in the
evening, rich men will cook and bring food for them, or will call them to his house and provide food for free.” – a man affected by leprosy, Jos

“We are Muslims and we have taken medication from Christians and lived with Christians without problems. But since they have left, we don’t have a place to collect drugs or even treat ourselves. Missionaries were helpful to us, my leg was amputated in Mangu for free, but now we have to pay 120,000 and also go with a patient relative in Bayera in Bauchi state before they can attend to you.” – a man affected by leprosy, Jos

However, many persons with disabilities have a different experience in terms of inclusion in religious activities and leadership under the current dispensation. Despite biblical teachings against stigmatizing persons with disabilities, religious leaders and followers still reflect the larger society, which does stigmatize them. Many view persons with disabilities as miraculous rather than allowing them to actively participate in religious activities. The Islamic faith practiced in Nigeria is less discriminatory in terms of the participation and leadership of persons with disabilities in the religious sphere. (pg 24)

[...] Displacement
The Boko Haram insurgency in North East Nigeria and attacks by herdsmen in the north and south have displaced many, including persons with disabilities. Further, conflict and humanitarian contexts are known to result in impairments.

A recent review of disability inclusion in the humanitarian response in North East (CBM International and JONAPWD 2019) reveals that the efforts reported by four selected actors toward disability inclusion were inadequately systematic to have a positive impact on beneficiaries with disabilities. Disability data were not available, services and programs were not accessible to persons with disabilities, and beneficiaries with disabilities did not actively participate in making decisions that affect their lives in the camps. Identified reasons for this include a disability-inclusion capacity gap among humanitarian actors, the absence of an available coordination platform for disability inclusion, the low prioritization of disability inclusion in the face of a complex humanitarian environment, the adoption of a charity approach, and the lack of a budget allocation for disability inclusion.

Study participants reported that environmental barriers, which lead to dependence, represented their main challenge. Internally displaced persons with disabilities are cut off from the environment to which they had already adapted and where they had already mastered their livelihoods. Moving into a new environment poses great barriers to their freedom and independence. Many are traumatized by being separated from their families and friends.”


Timothy Ali Yohanna also described how persons with disabilities who had been displaced by the conflict in northern Nigeria have been treated:

“There were refugees who, because of the crisis in northern Nigeria, were in refugee camps in Cameroon. I know that when they returned, they have been discriminated against and then treated harshly compared to other people who don’t have a disability. That happened in Adamawa State of Nigeria when they came from the refugee camp in Cameroon to a place called Mubi. They were not only discriminated against, but they were falsely accused of being informants for Boko Haram insurgents because of their disability. Boko Haram don’t
kill people with disabilities easily because of their beliefs and teaching about disabled persons. Based on that notion, a community believes or assumes they are informants who spy for Boko Haram. On the other hand, Boko Haram does use some people with disabilities as informants and so people look at all disabled people living in conflict zones as Boko Haram informants.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

An anonymous source that Asylos and ARC Foundation interviewed highlighted the differences between urban and rural areas, class disparities and the high incidence of poverty that affect the lives of children in Nigeria:

“I think it is different to developed countries like the UK. In the UK, a child in London and a child in one of the remote villages in the UK enjoys the same rights. That is not possible in Nigeria. Children in urban areas are more privileged and they enjoy some basic rights. They have better access to quality education, and to a large extent, their rights are more likely to be respected and protected. Now, children in the rural areas do not have the same rights. They don't enjoy the right to education. They don’t enjoy the right to good accommodation. They don't enjoy the right to quality nutrition. So, there’s a discrepancy. And it has to do with poverty. Nigeria practices a class system. There's a big difference between the rich and the poor. So, if you're a child and you come from a poor home, definitely you are not only going to suffer as a child, but your kind of poverty is also going to be very monumental. And because children are vulnerable, this poverty has an everlasting impact in their life, even when they grow up. And that is the reason why it is so difficult for underdeveloped countries like Nigeria to be prosperous. Because the children who represent the future of tomorrow are being denied what it takes to prepare them for tomorrow. So, tomorrow is not there for children, especially the children of the poor.”

(Source: Interview with anonymous source, 3 August 2021)

1.3. How are family members of persons with disabilities viewed by local communities?

The following report describes the stigma experienced by families as a result of having a child with disabilities:

“The Executive Director of The Irede Foundation, Mrs. Crystal Chigbu, has identified stigma and discrimination as major problems facing persons living with limb loss and their families.

[...] According to Chigbu who also has a child that is disabled at a press conference in Lagos, there were a lot of disability cases in Nigeria but their parents tend to make it private because of fear of how they would be addressed in public.

She recalled that there was a lot of stigma and discrimination not even for her child but for her as people called her ‘Iya Aro’ (mother of disable) and a lot of unpleasant names. “Stigma is one thing we are still fighting and what we have done in the last eight years is public awareness on disability, even when some parents are bold enough and they are not given the opportunity but rather they are discriminated against. We are sensitising to know that disability is not the making of the person living with a disability. Disability is not taboo.”
Two of the sources interviewed by Asylos and ARC Foundation provided slightly differing views on this subject:

“[How family members of persons with disabilities are viewed] would depend on how exposed the community is. If they have been sensitised, they would not have a problem. But many families are not that well aware of disability. Thus, such families have to live with some stigma about their wards with disabilities. Thus, they may be ridiculed or made fun of or laughed at.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

“They are highly ostracized. This is because of this perception that a child with disability brings bad luck. Sometimes they target the child as a bad omen. As such the community are always hostile to them. They are always hostile to children and young people with disabilities. It's a very difficult situation here.

[...] It is widespread in Nigeria. There is no part of Nigeria that is free from this attitude. There is no part of Nigeria be it in the north, be it in the south. There is no part.”

(Source: Interview with David Anyeale, Executive Director, Centre for Citizens with Disabilities (CCD), 26 June 2021)

1.4. How visible are persons with disabilities?

Sources interviewed by Asylos and ARC Foundation confirmed reports cited earlier (such as the World Bank report under section 1.1) that state that children and young people with disabilities are often kept at home and excluded from public life as a result of stigma and discrimination. They also describe some of the consequences of this lack of visibility:

“[There is no doubt that children and young people with disabilities experience stigma and discrimination from families and communities. This is mostly where the family or community is unaware of the circumstances of disability. Many families tend to lock out children with disabilities believing that they do not belong in society. We have heard of children locked away because their parents do not want to be associated with such children. Many children without disabilities who do not understand what disability is about tend to stigmatise these children. In other words, discrimination and stigmatisation are a fact of life for children and young persons with disabilities.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

“And most times families of these children and young people with disabilities tend to buy into this narrative that they don't want the communities to see them or to notice them in order to avoid societal discrimination against the entire family or against those of them that are not or don't have disability.
There is no enabling environment for them to participate. The attitude of the community is hostile. They suffer bullying. They are exposed to denial of participation be it education, be it recreation, be it even religious services. Even most religious services do not have a place or competent people that can address their needs. So these are some of the things that sometimes parents of children with disabilities these are some of the things that compel them to keep them at home where there is no access to services. Services that can enhance their equal participation. Sometimes they keep them in their homes.

In Nigeria parents, they don't bring them out because of these challenges. Lack of tolerance of children with disability and such. They tend to hide them at home in order to reduce the shame they will suffer from the community.

Because they're not seen in this community those that see them frame negative narratives around them. Because they can't be able to increase and explore their own abilities the society don't understand them. As such, they frame them in a negative way and this has continued because state institutions line of action by not providing enabling environment for children and young people with disabilities to participate in the society on equal basis with others."

"Children with disabilities are not visible as most parents are ashamed to be identified with them.

Often times children with disabilities are hidden away by family for fear of stigmatization by the general society and consequently subject the child to isolation which in itself is also stigmatization and could be traumatizing once the child understands the reason behind his/her isolation.

Lack of visibility multiplies the discrimination faced by children with disabilities and sometimes make them miss out of interventions targeted at them.

Lack of visibility may make children with disabilities absent from the captured data needed to influence policy change or implementation."

"Well, especially in northern Nigeria, people with disability are commonly seen on the streets and it's becoming a point of concern because it's like they have been abandoned. So, because they're abandoned, they group on the streets and you don't see them anywhere other than the streets. For example, in Maiduguri, where I am now, you might see not less than 30 people with disability on the streets when you walk for one kilometre. The more people with disability come out in public, then they live a normal life. But here is my question. What kind of normal life? They are coming out in public because they are begging. You refuse to give them access to education, to hospital, to all these things, like all the other people. You see the argument here? You don't give them the opportunity to live like 'normal' people, but you give them the opportunity to live as ‘abnormal’ people. So,
they go onto the street as ‘abnormal’ people. That’s a problem for them, but if they go into public like ‘normal’ people, then it’s a positive effect because they will live like ‘normal’ people. Here is an example. In the state assembly, let’s take for example, Borno State, there’s not one disabled person. How will people with disability be considered ‘normal’? If you look at any organization, you never see a disabled person leading that organization. He is not considered ‘normal’. You’re not giving them the opportunity to live like ‘normal’ people. I know of an example of a person living with disability who says he went to a hospital to see the doctor, they were upstairs, and there was no provision for him to get upstairs, and nobody wanted to carry him there. The doctor said he had no time to come down and check him because he had other things to do. So, if people with disability are not treated like other people, then seeing them on the streets constitutes a big problem. But if you want to change the narrative, give them opportunity like other people, then it will be amazing to see a lot of people with disability living like others in the community.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Other reports also describe how children and adults with disabilities are visible as beggars on the streets of some Nigerian cities:

“Young indigent persons with disabilities begged on the streets.”


“Mr Mohammed noted that there are cultural factors that encourage people with disabilities to beg on the streets.

“The culture and the society always see them as good for begging, while the religious centres see them as people to give alms to so that prayers can be answered.

“If you walk on the street, most of them came from the northern parts of the country. The reason is that in the northern part of the country, the source of livelihood there is either farming or animal rearing. To northerners, when they have a physically challenged child, it is a burden to them because he can neither farm nor take the animals to the bush to feed.

“Quite often, they push their children to beg because they cannot do anything. Over time, some of them are made to join Almajiri schools, while others are just neglected at home. The family don’t tend for them or send them to school,” he said.

Mr Mohammed said many children, youth, and adults suffering from disabilities often move to other states where they continue with their business of begging for alms.”

(Source: Mohammed Zinna, Amidst harsh economic realities, persons with disabilities in Lagos seek survival, 27 June 2021)

1.5. How has the COVID-19 epidemic impacted upon how persons with disabilities are treated by society?
A 2021 report published, and used in decision making and is based on a number of sources, by the Immigration and Refugee Board of Canada, states that the treatment of persons with disabilities has deteriorated since the onset of the COVID-19 pandemic:

“Social exclusion, neglect, and abuse of people with disabilities has risen. Their support structures, access to services, and social networks have decreased. They are at risk of stigmatisation due to false association with COVID-19 infection, for example if they have respiratory issues.”

(Source: Immigration and Refugee Board of Canada, COVID-19 bulletin No. 303 – Nigeria, 8 March 2021)

Interviewee Timothy Ali Yohanna described how the movement restrictions and social distancing measures have impacted persons with disabilities:

“For example, during the restrictions of movement, as the livelihood of people with disability depends on being on the streets, having to stay at home impacted very, very negatively on them because they couldn’t go out to beg anymore, and nobody came to them and that really affected them. Secondly, because of COVID and social distancing it was difficult for people to access assistance. I know of a person with a visual disability who was alone in an uncompleted apartment, and it was raining. The rain began to enter his room and he was struggling to put a bucket to catch water and he fell into a latrine. I'm glad that later I spoke with him and he was fine. Another person with a physical disability was trying to get to the market to buy foodstuff during the restricted time allowed for this. He was struggling to walk along the street because the government didn't make provision of a hard shoulder on the high road where people with disability can pass. He was trying to avoid being hit by a vehicle and instead he fell into the gutter at the side of the road. COVID has also had a harsh effect on the livelihood and economic activities of people with disability. For example, businesses like making local caps and other things, unfortunately they were unable to continue with that.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Others explained that Covid-19 had compounded existing difficulties for persons with disabilities:

“Obviously, Covid-19 has heightened these various issues discussed. Covid has been a story of poverty compounding the different disabilities in place. There were no support services in place to help parents of children with disabilities.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

“The COVID-19 aggravated the stigmatization, discrimination and excluding faced by children with disabilities as they are from mostly poor families where resources are meagre. They are often time left without adequate supervision as their parents, guardians or caregivers have to go out to make a living. Some of them are even left to fend for themselves thus exposing them to harm and exploitation.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)
Exploitation and other types of harm

1.6. What are the main forms of child specific abuses and exploitation in Nigeria?

The most recent US Department of State country report on human rights practices, covering 2020, summarises the main forms of child specific abuses and exploitation in Nigeria as follows:

“Prison and Detention Center Conditions

[...] Some prisons had no facilities to care for pregnant women or nursing mothers. Although the law prohibits the imprisonment of children, minors--some of whom were born in prison--lived in the prisons.

Generally, prison officials made few efforts to provide mental health services or other accommodations to prisoners with mental disabilities (see section 6). (pg. 8)

[...] The government continued to arrest and detain women and children removed from or allegedly associated with Boko Haram and ISIS-WA. They included women and girls who had been forcibly married to or sexually enslaved by the insurgents. The government reportedly detained them for screening and their perceived intelligence value. Some children held were reportedly as young as age five. (pg. 9)

Abuses in Internal Conflict

Boko Haram continued to employ indiscriminate person-borne improvised explosive device (PIED) attacks targeting the local civilian populations. Women and children were forced to carry out many of the attacks. (pg. 16)

[...] Abductions

[...] Boko Haram conducted mass abductions of men, women, and children, often in conjunction with attacks on communities. The group forced men, women, and children to participate in military operations on its behalf. Those abducted by Boko Haram were subjected to physical and psychological abuse, forced labor, and forced religious conversions. Women and girls were subjected to forced marriage and sexual abuse, including rape and sexual slavery. Most female PIED bombers were coerced in some form and were often drugged. Boko Haram also used women and girls to lure security forces into ambushes, force payment of ransoms, and leverage prisoner exchanges. (pg. 17)

Physical Abuse, Punishment, and Torture:

There were reports that security services used excessive force in the pursuit of Boko Haram and ISIS-WA suspects, at times resulting in arbitrary arrest, detention, or torture. Arbitrary arrests reportedly continued in the Northeast, and authorities held many individuals in poor and life-threatening conditions. There were reports some of the arrested and detained included children believed to be associated with Boko Haram, some of whom may have been forcibly recruited. On May 27, Amnesty International published a report documenting the
prolonged detention of terrorism suspects, including children, in deplorable conditions in military facilities in the Northeast. According to Amnesty, the prolonged detention of children in severely overcrowded facilities without adequate sanitation, water, or food, amounted to torture or inhuman treatment. Amnesty documented cases in which children detained in the facilities died as a result of the poor conditions. (pg. 17-18)

 [...] Section 6. Discrimination, Societal Abuses, and Trafficking in Persons

Female Genital Mutilation/Cutting (FGM/C): Federal law criminalizes female circumcision or genital mutilation, but there were few reports that the government took legal action to curb the practice.

 [...] The 2018 Nigeria Demographic and Health Survey found that 20 percent of women ages 15 to 49 had undergone FGM/C. While 13 of 36 states banned FGM/C, once a state legislature had criminalized FGM/C, NGOs found they had to convince local authorities that state laws applied in their districts.

Other Harmful Traditional Practices: [...] For purposes of the law, a harmful traditional practice means all traditional behavior, attitudes, or practices that negatively affect the fundamental rights of women or girls, to include denial of inheritance or succession rights, FGM/C, forced marriage, and forced isolation from family and friends. Despite the federal law, purdah, the cultural practice of secluding women and pubescent girls from unrelated men, continued in parts of the north. (pg. 31)

 [...] Child Soldiers: There were no reports that the military used child soldiers during the year.

 [...] Children (younger than age 18) participated in Boko Haram attacks. The group paid, forcibly conscripted, or otherwise coerced young boys and girls to serve in its ranks and perpetrate attacks and raids, plant IEDs, serve as spies, and carry out PIED bombings, often under the influence of drugs. The group also subjected abducted girls to sexual and gender-based violence, including rape and forced marriage. (pg. 18-19)

 [...] Child Abuse:

 [...] In some states children accused of witchcraft were killed or suffered abuse, such as kidnapping and torture.

 [...] Media reports indicated some communities killed infants born as twins or with birth defects or albinism.

Child, Early, and Forced Marriage:

The law sets a minimum age of 18 for marriage for both boys and girls. According to UNICEF, 43 percent of women between the ages of 20 and 24 had been married before the age of 18, while 16 percent were married before age 15. The prevalence of child, early, and forced marriage varied widely among regions, with figures ranging from 76 percent in the Northwest to 10 percent in the Southeast. Only 25 state assemblies adopted the Child Rights Act of 2003, which sets the minimum marriage age, and most states, especially northern states, did not uphold the federal official minimum age for marriage.
According to an NGO, education was a key indicator of whether a girl would marry as a child—82 percent of women with no education were married before 18, as opposed to 13 percent of women who had at least finished secondary school. In the north parents complained the quality of education was so poor that schooling could not be considered a viable alternative to marriage for their daughters. Families sometimes forced young girls into marriage as early as puberty, regardless of age, to prevent “indecency” associated with premarital sex or for other cultural and religious reasons. Boko Haram subjected abducted girls to forced marriage.

Sexual Exploitation of Children:

The law prohibits child commercial sexual exploitation and sexual intercourse with a child, providing penalties for conviction from seven years’ to life imprisonment, respectively, for any adults involved. Two-thirds of states had adopted the relevant federal law. The minimum age for sexual consent varies according to state law. The constitution provides that “full age” means the age of 18, but it creates an exception for any married woman who “shall be deemed of full age.” In some states children as young as 11 can be legally married under customary or religious law. The law criminalizes child sex trafficking and prescribes a minimum penalty of seven years’ imprisonment and a substantial monetary fine.

Sexual exploitation of children remained a significant problem. Children were exploited in commercial sex, both within the country and in other countries. Girls were victims of sexual exploitation in IDP camps. There were continued reports that camp employees and members of security forces, including some military personnel, used fraudulent or forced marriages to exploit girls in sex trafficking.

Displaced Children:

As of September, UNHCR reported there were approximately 2.5 million persons displaced in the Lake Chad Basin region. According to the International Organization for Migration, children younger than age 18 constituted 56 percent of that IDP population, with 23 percent of them younger than age six. There were displaced children among IDP populations in other parts of the north as well. Many children were homeless. (pg. 34-36)

Prohibition of Forced or Compulsory Labor

The law prohibits most forms of forced or compulsory labor, including by children, except compulsory prison labor. Criminal penalties were commensurate with those for similar crimes but were seldom appropriately enforced. The government did not effectively enforce these laws in many parts of the country. The government took steps to identify or eliminate forced labor, but insufficient resources and lack of training on such laws hampered efforts.

Forced labor remained with reports of women and girls subjected to forced labor in domestic service, and boys subjected to forced labor in street vending, domestic service, mining, stone quarrying, agriculture, and begging. (pg. 44)

Prohibition of Child Labor and Minimum Age for Employment

Child labor was prevalent, especially in the informal sector.
Children engaged in the worst forms of child labor identified in the country including: commercial agriculture and hazardous farm work (cocoa, cassava); street hawking; exploitative cottage industries such as iron and other metal works; hazardous mechanical workshops; exploitative and hazardous domestic work; commercial fishing; exploitative and hazardous pastoral and herding activities; construction; transportation; mining and quarrying; prostitution and pornography; forced and compulsory labor and debt bondage; forced participation in violence, criminal activity, and ethnic, religious, and political conflicts; and involvement in drug peddling. Many children worked as beggars, street peddlers, and domestic servants in urban areas. Children also worked in the agricultural sector and in mines. Boys were forced to work as laborers on farms, in restaurants, for small businesses, and in granite mines, as well as street peddlers and beggars. Girls worked involuntarily as domestic servants and street peddlers. (pg. 44-45)"

(1.7. Are children and young people with disabilities more vulnerable to these forms of harm, and how do they experience them?)

Newly published research on child sexual abuse in Nigeria states:

“Omoworare added that women and girls with disabilities are twice as likely to experience violence of any form.”


When asked if children and young people were more vulnerable to child-specific abuses, Grace Jerry and Olawunmi Okupe from Inclusive Friends confirmed this, giving some examples and commenting on factors that increase vulnerability:

“An example of this would be an increase in reported cases of missing children with disabilities.”

“An example of this was the reported case of a deaf boy who hawks water and is not educated enough to know the exact amount he is given or change he should return to the buyer. Consumers took advantage of his disability. Another case was the story of a blind girl was raped by a guy who refused to say a word all through the act so she won’t identify him by his voice.

[...] Some of the factors will be the type of disability of the child, level of reliance on others for support or assistance, illiteracy, location, family background, age, among others.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

Interviewee David Anyeale also told Asylos and ARC Foundation that children with disabilities are more vulnerable to child-specific harm because of stigma towards persons with disabilities which families rarely report:
“They are vulnerable to exploitation and abuse especially sexual exploitation because they are at home and some of them cannot speak or see and so the chances of exposing them to sexual and other violations may be very high. And families also do not want to be noticed as families that have persons with disabilities. As such most times when these things occur family members do not report because of these issues of stigma and discrimination. In my organisation, we have a free line and we ask people to make calls or to report such issues. Regrettably, we hardly get response. But while in the community you will hear sometimes these things are happening that nobody talks about it.

[...] I was saying that due to the quest or struggle to overcome poverty these children or young people with disabilities may expose themselves to environment that may mistreat them. And due to government negligence on their part, by not taking measures to provide social protection for children with disabilities and their families there's chances of exploitation: be it sexual exploitation or otherwise against young people and people with disabilities.”

(Source: Interview with David Anyeale, Executive Director, Centre for Citizens with Disabilities (CCD), 26 June 2021)

Danlami Umaru Basharu confirmed that children with disabilities are particularly vulnerable to exploitation and harm:

“Child abuse, sexual exploitation, child trafficking, forced marriage and other abuses abound among persons with disabilities. They are made to encounter these very harmful practices because of their vulnerability.

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

He gave examples from his own experience:

“One example given to me is of a deaf girl who was neglected by her family as a result of which she was made vulnerable to human trafficking. This resulted to her being trafficked to Ghana for prostitution.

[...] I remember when I was travelling somewhere and at the motor park, while waiting for the bus to fill up, there came a man with a group of children with mental difficulties allegedly begging on their behalf. I accosted him and asked where he got the children from. Other passengers joined me and before you knew it, he disappeared.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

He also explained the reasons for this additional vulnerability:

“This can only be explained by the absence of family and community care for the person with disability. The lack of economic support and the consideration that support is only for children of the rich contributes to this kind of thinking. Finally, the lack of awareness among family members and the society in general, the socio-economic situation of the family and also the absence of legislation to protect the rights of persons with disabilities are contributing factors.”
Timothy Ali Yohanna told Asylos and ARC Foundation about the incidence of sexual exploitation of persons with disability based on research that he had carried out in northeast Nigeria:

“Yes, especially in the northern part of the country. I work with this issue a lot. Just between January to date, I can confirm for you categorically that I had access to about nine children with disability who were sexually exploited. And why? Because people believe having sex with people with disability will increase their wealth or such kind of things. I interviewed around 100 victims in the northeast of Nigeria who had experienced these violations and spoke to many activists and community mobilisers who had similar encounters with others as well. When they share their story, people don’t believe them. They say, "What do you mean? You are a disabled person, why would an abled person come to you?" and that kind of thing. And because they are vulnerable, they can’t fight on their own, they cannot get away, or they don’t have any defensive mechanism against the perpetrator. So, it does happen, so, so many times.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

A report from Centre for Civilians in Conflict also states that persons with disabilities are particularly vulnerable to suffering harm in the conflict in the North East of Nigeria:

“Over the last 11 years, civilians have borne the brunt of the conflict in northeast (NE) Nigeria. The insurgency has resulted in the deaths of more than 39,000 people, the majority of whom have perished in Borno state. As a result of the ongoing conflict, civilians have experienced arbitrary detention, abduction, sexual exploitation and abuse (SEA), the destruction of property, extra-judicial killings, torture, recruitment as child soldiers, forced displacement, as well as other forms of physical and psychological harm. While civilians of all genders, ages, and abilities have been greatly affected by the conflict, CIVIC has found that persons with disabilities (PWDs) and the elderly are particularly vulnerable, even more so if they are also internally displaced. Research concerning the protection issues faced by PWDs and the elderly living in conflict in Nigeria is limited, and as such, this research contributes to the body of knowledge on this important topic.

[...] PWDs and elderly respondents interviewed for this research highlighted the harm they faced during the conflict – including, for some, injuries that led to their disabilities – as a result of attacks by armed opposition groups (AOGs) and firefights between government security forces and AOGs. They also highlighted that some AOGs tolerated their presence and did not subject them to the same violence experienced by many other civilians during AOG occupations of their communities. Respondents lamented that government security forces had not done enough to protect communities from AOG attacks – a common complaint among civilians – but also commended them for their support to move or evacuate vulnerable people from conflict zones. They also noted how traditional self protection strategies such as fleeing violence have proven complicated, and in some cases, simply not feasible given their physical limitations. Moreover, PWDs and the elderly feel generally unsafe owing to the absence of traditional caregivers whom they depend on for support, who often have to flee for their own safety. Despite the lack of tailored protection strategies, some community structures in the northeast have recognized the distinct
challenges PWDs and the elderly face when seeking protection and security, and have taken actions to better protect such groups.”

(Source: Centre for Civilians in Conflict, *Civilian Protection Snapshot: Persons with Disabilities and the Elderly in North East Nigeria*, September 2020, pg 1-2)

Grace Jerry and Olawunmi Okupe, in their interview with Asylos and ARC Foundation, corroborate reports that persons with disabilities are particularly vulnerable to suffering harm in the conflict:

“This may be because their parents or guardians would want to save themselves and other family members without disabilities first as children with disabilities are often considered better off dead. Some parents or caregivers deliberately leave children with disabilities behind during conflict so they can die and they will be free from the burden of having to care for them.

[...] Yes. Children who need no mobility aids can run for safety once instructed as against those who cannot move without assistance. Also children with disabilities from smaller families may be taken to safety alongside other family members as against those from larger families. Children with disabilities with parents who are informed on disability issues may not experience this as against children of illiterate parents who probably see the child as a curse or punishment from the gods”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

1.8. Is there evidence that children and young people with disabilities experience forcible marriage, forms of constraint, neglect, abandonment and / or violence (including rape), by family or other community members?

1.8.1. General information

The following report from the BBC describes a series of cases in which individuals (including 7 children) had been found locked up and severely mistreated by their families in Kano State. The Head of the Psychiatrist’s Union told the BBC that ‘the cases in the north is a reflection of what is happening in Nigeria. This issue of locking up mentally ill people and maltreating them is a widespread issue across the country’:

“A spate of cases in which people have been rescued after being locked up for many years by their families has shocked Nigerians, and shone a spotlight on both parental neglect and the lack of mental health provision.

Some adults, said to be mentally ill, were found with iron chains around their ankles, and forced to eat, sleep and defecate within the same confined place.
In one case, a 32-year-old man was chained up for at least seven years in his parents’ garage in north-western Kano state.
There have also been reports of children being treated violently while under the care of step-mothers or relatives.
In the most recent case in September, a seven-year-old’s step-mother was arrested after he was allegedly battered to death at his home in Kano, the biggest state in northern Nigeria. The step-mother has not yet been charged, and hasn’t commented.

The boy in the chicken coop
While there are cases of child maltreatment across Nigeria, the recent focus has been mostly on the north, triggered in mid-August by the story of an 11-year-old who was locked up in a chicken coop in Kebbi state, while his father and step-mothers, who have now been charged to court, lived comfortably inside the house.
People were outraged by the image of an unkempt child squatting next to a hen and a turkey.
"After the case in Kebbi, we started getting tip-offs," said Haruna Ayagi, the head of Human Rights Network (HRN), a non-governmental organisation that has been involved in the rescue of 12 people, seven of them children, in August alone, in Kano state.
"What we noticed was that the children who were abused, did not live with their mothers," added Mr Ayagi.

In the capital Abuja, two children were rescued from a toilet, where they were allegedly locked up daily by their step-mother until she returned from work.

In one case in Kano, a seven-year-old girl was allegedly beaten, burned and starved by her step-mother, according to the authorities.
The girl, and other children rescued in Kano, are now in government care homes, receiving treatment and counselling, while some of the parents and guardians have been arrested, but not yet charged in court.
A 2003 federal law protecting the rights of children gives the state the right to take away a child suspected of being "neglected or ill-treated".
But 11 northern states, including Kano, are yet to pass the law, mainly because of opposition to defining a child as anyone below the age of 18 years and therefore prohibiting child marriages that take place in the region. Some Muslims believe that once a boy or girl reaches the age of puberty, they are adults and can marry.
With this dispute blocking passage of the legislation in the 11 states, it makes it more difficult for the state to intervene in a suspected case of ill-treatment or neglect.
Furthermore, polygamy in the north and the ease with which a husband can dissolve his Islamic marriage - he only needs to tell his wife "I divorce you" - means many children do not live with their biological mothers or end up in broken homes where they might be treated badly.
"There has been a normalization of violence against these children, mostly as an act of wickedness and ignorance of basic human rights," said Imaobong Ladipo Sanusi, head of Wotclef, an organisation that campaigns for the rights of women and children.
She wants awareness campaigns to be held about what constitutes "violence against persons and to understand a clear-cut reporting map".

The Stigma of being mentally ill
The 30-year-old rescued from his parents’ garage in Kano, where neighbours said he had been locked up for seven years for allegedly being mentally ill, could barely walk when he was found.
His legs were crooked at his badly callused knees and too frail to support his severely emaciated body.
In another case in Kano, a 55-year-old man was found locked in a room without a door or window. One of his feet was attached to a large log with a metal bar.
He had been locked up by his family for 30 years because he was mentally ill, and was taken to Rogo General Hospital. A doctor at the hospital, Luis Nweke, said he suffered from "irrational behaviour and psychosis".

For many years, Nigeria has struggled to look after mentally ill people, partly because of the stigma associated with it.

In some communities, mental illness is seen as a taboo and the mentally ill are referred to as "mad people", ex-communicated by their families, forced to roam the streets in tattered clothes and eat from rubbish dumps.

"The cases in the north is a reflection of what is happening in Nigeria. This issue of locking up mentally ill people and maltreating them is a widespread issue across the country," head of the psychiatrists' union, Dr Taiwo Lateef, told the BBC.

(Source: BBC, Why some Nigerian families lock up children and the mentally ill, 3 October 2020)

The World Bank cites the following sources:

“Etieyibo and Omiegbe (2016), however, highlight discriminatory practices against persons with disabilities in Nigeria on the basis of religion and culture such as:

Trafficking and killing of persons with mental illness and raping of women with mental illness. Such practices result from a belief that the victims must have violated a community tradition or are involved in witchcraft. Homeless women with mental illness are sometimes raped by men who believe that doing so will make them wealthy (Eze 2005).

Trafficking and killing of people with oculocutaneous albinism and angular kyphosis. Such practices are fueled by the belief that the body parts of persons with albinism and angular kyphosis can be used for rituals for wealth and long life (Anumihe 2008; Oji 2010; Omiegbe 2001).

Use of children with disabilities in alms-begging. Some parents send their children with disabilities to the streets to beg for alms; the children obey for fear of being punished (Omiegbe 1995). These parents use their children to evoke a sense of empathy from members of society, especially those who consider alms-giving to be an obligation.”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg. 19)

According to the following journal article, physical, mental or intellectual disabilities, among other characteristics, can be interpreted as signifying witchcraft, and lead to forms of violence, torture and murder perpetrated against children:

“In Nigeria, child witchcraft is [...] a serious social problem [...], particularly in Akwa Ibom and Cross River [...] Hundreds of children continue to appear on the streets every year since then to date as abandoned child witches whilst others are murdered. [...]”

[...] Children of all ages and genders are targeted [...] A broad range of behaviors and impairments are relied upon to identify the child witches, such as being too dirty, disrespectful, stubborn, impolite, selfish, solitary, malnourished, domineering, or being epileptic, mentally retarded, or a sleep-walker [...] These children are often treated inhumanely. Academic reports from different parts of Africa consistently show that child witches are frequently abandoned, maimed, tormented or killed [...] Acid baths, poisoning, slaughtering, drowning, live burial, live burning [...] being tied to a tree, locked up in a room, forced to sleep with a human corpse [...] and other inhumane treatments are also commonplace. These are done as part of punishments or to extract confessions [...] While
many children are murdered following the witchcraft-related accusations, others survive and for those who survive, particularly the abandoned ones, their childhood experiences are markedly different from those of their peers. They are very likely to face stigmatization and discrimination for life […] Many live on the street as a result.”


The following reports by media and (inter)governmental organisations provide corroborative information on the treatment of children and young people accused of witchcraft:

“The United Nations (UN) Human Rights Council has passed a resolution condemning accusations of witchcraft, rituals and other harmful traditions that result in human rights violations in Nigeria and other parts of the world.

[...] According to investigations, such harmful practices have been rife in Cross River, Akwa Ibom and other parts of the country, leading to stigmatisation of several children as witches and wizards, which result in serious psychological and bodily harm.”

(Source: The Guardian Nigeria, *UN moves to check violations associated with witchcraft, other practices in Nigeria*, 5 August 2021)

“In some states children accused of witchcraft were killed or suffered abuse, such as kidnapping and torture.”


“3.9 Persons affected by witchcraft or ritual killings

[…] 3.9.2 Persons accused of witchcraft

From available research, it is widely recognised that most of the persons at risk of witchcraft accusations are women, the elderly and children or those ‘who are somehow “different”, feared or disliked’, according to a UNHCR report.886 Academic research suggests that witchcraft accusations are often directed towards persons closely related such as neighbours, kinsmen, even own children or parents.887

On the other hand, Pratten notes that ‘victims are generally identified at random and usually because they are relatively soft targets. These would include those younger and/or those who were mentally or physically challenged’. He added: ‘skin colour [albinos] does not seem a major factor in Nigeria’, but he heard many stories about persons with kyphosis (hunchback) being potential targets.888 (pg. 106)

[…] 3.9.2.3 Child witches

In the last decade, an increasing tendency to accuse children to be witches has been noticed. 894
The following profiles of children are at particular risk of accusation of witchcraft, according to UNICEF:

- ‘Children having lost both parents, sent to live with another relative. Sometimes the child is sent to a host family according to rules of kinship (matrilineal or patrilineal).
- Children having lost one parent, the other having remarried. Disagreements with the step-father or -mother may be the origin of an accusation.
- Children living with a physical disability (any physical abnormality: large head, swollen belly, red eyes, etc.), those with a physical illness (epilepsy, tuberculosis, etc.) or psychological disorder (autism or Down Syndrome, etc., even those who stutter) or especially gifted children.
- Children showing any unusual behaviour, for example children who are stubborn, aggressive, thoughtful, withdrawn or lazy. In short, all kinds of behaviour that, in a specific context defined by witchcraft discourse, appear as unusual or abnormal.
- ‘Bad birth’ children may also be open to witchcraft accusations, but constitute a separate category.’

Human rights violations to children accused of witchcraft can include: infanticide, abandonment, physical and sexual violence. Once the child ends up living on the streets, it often encounters other violence, perpetrated by gangs but also often by the authorities. Common problems these children encounter are: drugs, illegal work, prostitution, begging, no schooling, and stigmatisation and discrimination.

Accusations of child witches occur more frequently in southern Nigeria’s Christian regions and much less in the (Muslim) northern regions. The UNICEF study indicates that there is not enough information to explain this phenomenon but also points at the different perception of evil in Islam and different ways to address witchcraft.

Means of redress

In Nigeria, the Child Rights Act (2003) protects children against all forms of physical, mental, and emotional torture and abuse. The Nigerian Child Right Law was adopted in Akwa Ibom in 2008. Accused child witches usually end up on the streets or they might ask for help from NGOs such as CRARN.

According to the UNICEF report, the role of the police in helping child witches often shows a double standard, as police also use street children to steal and rob people for them.

The Grassroots Researchers Association also reports:

“In other climes, people believe that PWDs are not only inferior to those without disabilities but can also be used for social and economic benefits. That is, they lack characteristics that make them full humans and can be used in sacrifices in some communities in Nigeria in order to bring wealth or good luck. Other discriminatory practices against PWDs in the context of religion and culture include the trafficking and killing of persons with mental illness, people with oculocutaneous albinism and angular kyphosis, raping of women with mental illness and the use of children with disabilities for alms-beggning. In some communities, it is believed that such persons have committed an abomination, that is, violated the tradition of the communities. In other cases, a mentally ill person is simply labeled as a witch and subsequently burnt to death. Such negative beliefs reinforce and fuel the systemic discrimination and stereotype that relate poverty and disability. It is asserted that if PWDs are designated as if they are inferior or second-class citizens, they are likely to have negative self-concept and to view themselves as inferior.116


(Source: Grassroots Researchers Association, “They Called us Senseless Beggars”: Challenges of Persons with Disabilities in North Eastern Nigeria, 2018, pg. 41)

The 2020 annual human rights report by the U.S. Department of State indicates that babies with ‘defects’ or albinism who were born into so-called baby factories were killed in some communities:

“So-called baby factories operated, often disguised as orphanages, religious or rehabilitation centers, hospitals, or maternity homes. They offered for sale the newborns of pregnant women—mostly unmarried girls—sometimes held against their will and raped. The persons running the factories sold the children for various purposes, including adoption, child labor, child trafficking, or sacrificial rituals, with boys fetching higher prices. Media reports indicated some communities killed infants born as twins or with birth defects or albinism.”


When asked if they knew whether children and young people with disabilities still experienced forcible marriage, forms of constraint, neglect, abandonment and / or violence (including rape), by family or other community members, and if they were aware of any recent examples of this, one source we interviewed stated:

“Yes it is still been committed.”

[...] “An example is the case of a young girl who was married off to an old man who indicated interest in her. Her family even felt grateful that someone would want to marry her and take her off their hands.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

In his written correspondence, Danlami Umaru Basharu outlines that forced marriage and other abuses are ‘a daily occurrence’ for children with disabilities:
“Forceable marriage, constraint, neglect, abandonment, violence, including rape, are a daily occurrence for children with disabilities, even from family members. Forcible marriage which is a daily occurrence in the northern part of Nigeria, and even in the south, takes place because of the traditions and religious beliefs of the family. Some families in the northern part believe that once a child has a disability, then he is nothing but good for begging as he will bring some economic benefit to the family. A child once told me of his predicament. Being from the northern part, his parents were happy to have him as they felt their woes were over because he came out as a child with disability. Once he was grown, he was given a begging bowl and sent out to the streets. It took the efforts of a good-spirited Nigerian to lend his support to his education. Neglect, abandonment and rape are also a daily occurrence of persons with disabilities. Because of their vulnerability, children and young persons with disabilities are subjected to these harmful practices, particularly rape. These days, where some state governors are banning begging, they are subjecting these children to harmful practices. Some governors have passed laws against rape, i.e. the death penalty, though I do not believe this to be the answer. Parents need to be careful with their children.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

Further information was given by interviewees Timothy Ali Yohanna and David Anyeale:

“Yes, members of communities, religious institutions and, in some instances, family members, were even worse in doing this kind of thing. For example, you will see a family member will arrange for a female child living with disability who is just reaching puberty to be married off for financial gain. And in some instances, if they feel like they're a liability, they marry them off even if they are a child. They just give them away to someone who is not even a responsible member of society. That is a rampant thing that is happening. In some instances, a group of community members, or especially traditional leaders, will form a kind of committee and say, "Okay, we will try to assist or help people with disability." But they use them, they trade them to make money. When someone wants to see them then they pay a little money to the person living with disability and give them a small amount of food, and then they take the money away again.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

“I know that some of this abuse are being committed but the challenge we have is that family members do not report. In order for you to gather evidence or to provide service or support because they do not-- in most case, even if you want to take it up on your own and you will hear something like, "Oh, leave it. God will take control." So they will abandon it at the middle of the road. Victims hardly come out to complain. Victims hardly come out to seek for redress. As such you will struggle to generate evidence that support the prevalence or the pattern of abuse or exploitation among children.”

(Source: Interview with David Anyeale, Executive Director, Centre for Citizens with Disabilities (CCD), 26 June 2021)
An anonymous source we interview, a disability activist, lawyer and published author, says that children born with disabilities are sometimes killed or left to die because of beliefs that they are possessed by evil spirits or that they bring bad luck:

“When a child is born with a disability in Nigeria, some believe that the best thing to do is to throw the child away. And some of those kids are labelled evil spirits or bad luck because of our societal ignorance, they are seen as snakes, they are seen as evil or snakes in human form. And such children are beaten, some are killed, some are left to starve and eventually die. And we have some traditional ritualists who are experts in killing those kinds of children. They call them traditional doctors. So, some children who are born with disabilities are killed by those traditional doctors.

I am a disabled person and I tell you, if I had been born with my disability, possibly, they would have labelled me a snake and thrown me away to die in a forest or river. But I am lucky because I grew up before I became disabled. So, they knew I was not a spirit or a snake in human form. I wasn't a snake. That it was something that attacked my leg. The children who are unfortunately born with disabilities, many of them don't celebrate their next birthday alive. They are killed. And as I talk to you, many people will deny it. However it’s a tradition that is happening even now as I speak with you. And in the next 20 years, from where I am sitting, I would say that that practice will still be with us.”

(Source: Interview with anonymous source, 3 August 2021)

The same source also says that because the social perception of disability is so negative, people are rewarded for harming people with disabilities:

“[...] The more you hurt disabled people, you harm them, the more people reward you. Because disability in Nigeria has not been welcomed. Disability in Nigeria is seen as a taboo. Is seen as a curse. Is seen as a punishment for the disabled. Is seen as people who are outcasts. A bad omen. Bad luck. So, the more you eliminate disability, or you do away with them, the more the society sees you as doing the society some good. That is why even in religion, they only use the disabled as objects for demonstrating their so-called counterfeit religious powers. So, disability is not welcomed in that part of the world. And until things change, the best case scenario is when disabled people are seen as an object of charity.”

(Source: Interview with anonymous source, 3 August 2021)

When asked if they were aware of any reasons why parents may be unable or unwilling to protect their child from these types of harm, the sources interviewed for this report stated:

“Yes. Financial constraints poverty, illiteracy and cultural beliefs.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

“Some parents are usually afraid to report these cases even to the authorities for fear of societal thinking.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)
1.8.2. Information relating to children and young people with intellectual impairments

These sources provide specific information on violence and abuse experienced by persons with intellectual impairments:

“There are cases of persons with intellectual disability killed as part of rituals or practices that flow from traditional religious belief systems.”


“The study revealed that MIPs [Mentally Impaired Persons] were abused sexually as well as through neglect, verbal, physical, and emotional abuse. In addition, it revealed that there was a significant relationship between the ages of the MIPs and experience of abuse. It was widely agreed by the respondents and the participants of both the FGDs [Focus Group Discussions] and IDIs that female MIPs experienced double discrimination for being both female and with MI.”

(Source: International Quarterly of Community Health Education, Sociocultural Factors Associated With Abuse of Mentally Impaired Persons in Imo State, Nigeria, 10 August 2015, pg. 365)

1.8.3. Information relating to children and young people with physical impairments

No specific and relevant information within sources consulted and timeframe were found.

1.8.4. Information relating to children and young people with mental health impairments

No specific and relevant information within sources consulted and timeframe were found.

1.8.5. Information relating to children and young people with sensory impairments

These sources report on the abuses suffered by persons with albinism in Nigeria:

“Many children, youth and adults with albinism in Nigeria have been found dead or have gone missing due to the belief that certain body parts can be used in rituals, to gain power, money and success, and for the cure of impotency.”

(Source: Imafidon, Elvis, African Philosophy and the Otherness of Albinism: White Skin, Black Race, Routledge, 2019, page unavailable)

“3.9.2.4 Persons with albinism
Persons with albinism (or albinos) face discrimination and ostracism in large parts of the African continent. Albinos are regarded in many African societies as ‘abnormal’ and vulnerable for human rights violations. Their body parts are highly in demand for potions and lucky charms which bring prosperity.

[...] The UNHRC states that in the past ten years at least 600 attacks on children and adults with albinism have been reported in 28 countries. These attacks refer not only to the use of body parts of albino people for rituals, but also to accusations of witchcraft of people with albinism: ‘children born with albinism can be perceived as a curse on their families who are quick to abandon them, exclude them and their mothers from the community, or even be the victims of infanticide.’ Of the 600 reported attacks, ten had been committed in Nigeria. It is not known in which time span these attacks had been committed. According to Pratten, skin colour does not seem a major factor in Nigeria.

The Independent Expert in her first general report, not covering specific countries, notes: ‘Women and children with albinism are particularly vulnerable as they are exposed to intersecting and multiple forms of discrimination [...] Children with albinism are often particular targets of attacks due to the witchcraft-based belief that the innocence of a victim from whom body parts are taken increases the potency of the potion for which the body parts are used.’ She adds that ‘children constitute a large proportion of victims of ritual attacks.’ The report does not include specific references to Nigeria. (pg. 108-109)

1.9. How has the COVID-19 pandemic impacted upon any types of exploitation of, and harm towards, children and young people with disabilities?

In our written correspondence, Danlami Umaru Basharu outlines:

“Covid has been an added scar on the lives of children and young persons with disabilities.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

2. Legal and policy frameworks and implementation

Legal and policy frameworks

2.1. How is disability mentioned / defined in the Constitution?
At present, disability is not defined in the Constitution of the Federal Republic of Nigeria. However, the term disability or disabled is mentioned three times, in the following articles of the constitution:

“Economic objectives.
16. (2) The State shall direct its policy towards ensuring—
[...] (d) that suitable and adequate shelter, suitable and adequate food, reasonable national minimum living wage, old age care and pensions, and unemployment, sick benefits and welfare for the disabled are provided for all citizens.”

[...] Right to freedom from discrimination.
42. (1) A citizen of Nigeria of a particular community, ethnic group, place of origin, sex, religion or political opinion shall not, by reason only that he is such a person—

(a) be subjected either expressly by, or in the practical application of, any law in force in Nigeria or any executive or administrative action, of the government to disabilities or restrictions to which citizens of Nigeria of other communities, ethnic groups, places of origin, circumstance of birth, sex, religious or political opinions are not made subject; or

[...] (2) No citizen of Nigeria shall be subjected to any disability or deprivation merely by reason of the circumstances of his birth.


A Bill sponsored by the Speaker of the Nigerian House of Representatives to amend the provisions of the Constitution to provide for inclusion and protection of persons with disabilities passed its first and second readings in the National Assembly in June 2021:

“The House of Representatives has passed for first reading a Bill seeking an amendment to sections 147, 151, 192 and 196 of the 1999 constitution, to provide for the inclusion of young persons and persons with disabilities (PWDs) in political and other appointments in Nigeria.

The proposed legislation, titled ‘A bill for an act to amend the constitution to provide for inclusion of young persons, persons with disabilities in appointment,’ is sponsored by the Speaker, Hon. Femi Gbajabiamila.
Specifically, the Bill proposes that young persons and PWDs should be included in the appointment as ministers, commissioners, heads and members of statutory government agencies and boards.

The Bill also seeks to bring the issue of disability to the concurrent list so that states can also provide for the welfare of PWDs effectively.”

(Source: This Day Live: House Moves to Include Youths, PWDs in Political Appointment, 13 June 2021)

“Stakeholders have been urged to increase the zeal with which they are pursuing the attempt to give constitutional recognition to the rights and obligations of people living with disability in Nigeria by ensuring the proper implementation of the clauses so as to cause the disability community to also make tangible contributions to nation building.
The attempt to effect the inclusiveness of Nigerians with disability during the current attempt by the National Assembly to carry out a constitution amendment has also been described as a clear undisputable and verifiable democratic dividend as the race for the achievement had taken decades without any meaningful outcome.


“The Constitution of the Federal Republic of Nigeria1999 (as amended) (herein referred to as the “Principal Act”) is further amended as set out in this Bill” on its sections, 147 (sub-section 3); 151 (sub-section 4 and 1); 192 (sub-section) 6); 196 (sub-section 5).

“Section 147 is amended by including the word “and shall include persons with disabilities,” after the last word “state” in the last paragraph of Sub-Section 3;

“Any appointment under Sub-Section (2) of this section by the President shall be in conformity with the provisions of Sub-Section (14(3) of this Constitution. Provided that in giving effect to the provisions aforesaid the President shall appoint at least one Minister from each State, who shall be an indigene of such State and Shall include persons with disabilities;

“Section 151 is amended by including a new sub-section (4) to read; The President while exercising the power conferred in sub-section (1) of this section, shall include person(s) with disabilities;

“Section 196 is amended by including a new sub-section (5) to read: The Government while exercising the power conferred in sub-section 1 of this section shall include person(s) with disabilities;

The Disability Bill concluded that; “Amendment of Part II: Concurrent Legislative List, of the Second Schedule (Legislative Powers), is amended by including a new item 31 to read: (a) Of persons with Disabilities and or Disability Matters

“The National Assembly may make laws for the Federation with respect to the welfare of persons with disabilities and or disability matters;

“Nothing in Paragraph 31 hereof shall preclude a House of Assembly from making laws with respect to the welfare of persons with disabilities and disability matters provided it shall not be in consistent with any law made by the National Assembly.”

[...] “We wish to appeal to the National Assembly through its oversight functions to pay more attention to the implementation of the law when passed because the implementation of Nigerian laws has been a great challenge but it is surmountable when everyone plays his part genuinely.

[...] The Bill sponsored by the Speaker House of Representatives, Hon. Femi Gbajabiamila “A BILL FOR AN ACT TO AMEND THE PROVISIONS OF THE CONSTITUTION OF THE FEDERAL REPUBLIC OF NIGERIA, 1999 (As Amended), (TO PROVIDE FOR INCLUSION AND PROTECTION OF PERSONS WITH DISABILITIES) passes its second reading at the National Assembly last week.”
Media sources report on constitutional amendments that have been proposed by civil society organisations to address the lack of specific provision for persons with disabilities:

“Persons with Disabilities (PWD) have called for the reservation of a certain percentage of seats to the disability community in federal and state houses of assembly in the proposed amendment to the 1999 Constitution.

They made the call yesterday during an event organised by the Commission for Persons with Disabilities (NCPWD) to brainstorm on how the constitutional review will accommodate the rights of PWDs in Nigeria.

The guest speaker at the event, Dr. Adebato Shittu, said lack of representation of PWDs in leadership positions was denying them the opportunity to contribute to the growth of the nation.

"The process needs to start with the amendment of the constitution to give a percentage to the community either through nominees or every geopolitical zone producing a PWD through a consensus arrangement," he said.”

“Civil society groups at a recent citizen and stakeholders’ engagement on review of constitution held in Lagos, stressed the need for a constitution that promotes the cause of democracy, inclusive governance, gender and disability rights, socio-economic rights, media freedom and freedom of expression.

Organised by YIAGA Africa and facilitated by the International Press Centre (IPC), the Institute of Media and Society (IMS) and the Center for Citizens with Disability (CCD), that are partners to the European Union Support to Democratic Governance in Nigeria (EU-SDGN) project, the civil societies unanimously noted that it is a welcome development that the 9th National Assembly is undertaking the process to amend critical areas of the 1999 constitution to serve the interest of Nigerians.

[...] On issues relating to people with disability and status recognition/social integration, the group observed that Section 15 of the Constitution criminalises discrimination on different grounds, it is however silent on the grounds of disability. According to him [Executive Director, International Press Center (IPC) Lanre Arogundade], “we propose an amendment that reads as follows: Accordingly, national integration shall be actively encouraged, whilst discrimination on the grounds of place of origin, sex, religion, status, disability, ethnic or linguistic association or ties shall be prohibited”.

In addition, the group noted that Sections 48 and 49 on the composition of the Senate and House of Representatives do not make specific provisions for PWD, adding that, “we propose an amendment as follows: (S48) The Senate shall consist of three Senators from each State; one from the Federal Capital Territory, Abuja; and one person with disabilities from each of the six geo-political zones. (S49) subject to the provisions of this Constitution, the House of Representatives shall consist of three hundred and sixty members representing
constituencies of nearly equal population as far as possible, and three persons with disabilities from each of the six geo-political zones, provided that no constituency shall fall within more than one state.

[...] Thirdly, the group observed that Section 91 on the composition of the House of Assembly do not make specific provisions for PWD...

[...] Fourthly, they observed that Section 223 of the Constitution and rules of political parties do not make specific provisions for PWD...

(Source: The Guardian (Nigeria), Civil societies seek constitution that promotes democracy, 5 July 2021)

2.2. What regional and international human rights treaties has the State ratified?

Nigeria has ratified the following international human rights treaties (date of accession/ratification in parenthesis):

- Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (2009)
- International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families (2009)
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (2001)
- International Covenant on Civil and Political Rights (1993)
- International Convention against Apartheid in Sports (1987)
- Convention on the non-applicability of statutory limitations to war crimes and crimes against humanity (1970)
- International Convention on the Elimination of All Forms of Racial Discrimination (1967)

(Source: United Nations Treaty Collection, Multilateral Treaties Deposited with the Secretary General, Participant Search: Nigeria, Title IV Treaties)
Nigeria has ratified the following regional human rights treaties (date of accession/ratification in parenthesis):

- African Youth Charter (2009)

(Source: African Union, OAU/AU Treaties, Conventions, Protocols & Charters)

2.3. Has the UN Convention on the Rights of Persons with Disabilities been ratified and what reservations have been made?

Nigeria is a State party to the UN Convention on the Rights of Persons with Disabilities. It signed the convention on 30 March 2007 and ratified it on 24 September 2010. It made no declarations, objections, or reservations.


Nigeria is a State party to the Optional Protocol to the UN Convention on the Rights of Persons with Disabilities. It signed the Protocol on 30 March 2007 and ratified it on 24 September 2010. It made no declarations, objections, or reservations.


2.4. Has the UN Convention on the Rights of the Child been ratified and what reservations have been made?

Nigeria is a State Party to the UN Convention on the Rights of the Child. It signed the convention on 26 January 1990 and ratified it on 19 April 1991. Nigeria made no declarations, objections, or reservations.


Nigeria is a State Party to the Optional Protocol to the UN Convention on the Rights of the Child on the involvement of children in armed conflict. It signed the Protocol on 8 September 2000 and accessed it on 25 September 2012. Nigeria made the following declaration:

“Declaration:

“(A) The minimum age at which Nigeria permits voluntary recruitment into her National Armed Forces is eighteen years of age;
(B) The Federal Republic of Nigeria has established safeguards to ensure that such recruitment is not forced or coerced, including a requirement in Part III, Section 34(1) of the Child’s Rights Act, 2003, which stipulates that no child shall be recruited into any of the branches of the Armed Forces of the Federal Republic of Nigeria;

(C) Part III, Section 34(2) of the Child’s Rights Act, 2003 states that the Government or any other relevant agency or body shall ensure that no child is directly involved in any military operation or hostilities;

(D) Part XXIV 277 of the Child’s Rights Act, 2003 states that a child is a person under the age of eighteen years.”


Nigeria is a State Party to the Optional Protocol to the UN Convention on the Rights of the Child on the sale of children, child prostitution and child pornography. It signed the Protocol on 8 September 2000 and accessed to it on 27 September 2010. Nigeria made no declarations, objections or reservations.


2.5. Have these Conventions been transposed into national law?

A treaty ratified by the Nigerian State needs to be enacted into law by the country’s National Assembly, pursuant to the Constitution of the Federal Republic of Nigeria:

“Implementation of Treaties.
12.—(1) No treaty between the Federation and any other country shall have the force of law except to the extent to which any such treaty has been enacted into law by the National Assembly.”


Amnesty International lists the following human rights laws that have been enacted into domestic legislation:


The Discrimination against Persons with Disabilities (Prohibition) Act 2018 draws on and seeks to domesticate the provisions of the UN Convention on the Rights of Persons with Disabilities (2006), which Nigeria has signed and ratified.

“The Discrimination against Persons with Disabilities (Prohibition) Act 2018 (FRN 2019), enacted January 23, 2019, is a comprehensive piece of legislation that guarantees the full integration of persons with disabilities into society and establishes a national commission
responsible for ensuring their education, health care, social, economic, and civil rights. The law draws on and seeks to domesticate the provisions of the Convention on the Rights of Persons with Disabilities (2006), which Nigeria has signed and ratified."

(Source: World Bank, Disability Inclusion in Nigeria: A Rapid Assessment, 26 June 2020, pg 65)

For information on the implementation of the The Discrimination against Persons with Disabilities (Prohibition) Act 2018 see sections 2.11. – 2.17. under the subsection heading Implementation of legal (and policy) frameworks.

The UN Convention on the Rights of the Child has been transposed into national law through the enactment of the Child Rights Act in 2003:

“Nigeria has transposed the Convention on the Rights of the Child into national law through the enactment of the Child Rights Act, 2003, which prohibits, among others, slavery and practices similar to slavery, such as the sale of or trafficking in children, debt bondage, serfdom and forced or compulsory labour for children. The Act guarantees the provision of special protection measures for children in need, including assistance and facilities necessary for education, training, preparation for employment, rehabilitation and recreational opportunities in a manner conducive to achieving their fullest possible social integration and individual development. Furthermore, the Act prohibits the recruitment of children into the armed forces. In terms of the federal structure of Nigeria, national law does not apply unless specifically adopted by state assemblies.”

(Source: Human Rights Council, Report of the Special Rapporteurs on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, on the sale of children, child prostitution and child pornography and on contemporary forms of slavery, including its causes and consequences on their joint visit to Nigeria, 15 June 2016, para. 2)

Despite the domestication of the UN Convention on the Rights of the Child through the Child Rights Act, according to the following research article, ‘child abuse is commonplace in the country’:

“Nigeria domesticated the provisions of the CRC by promulgating the Child Rights Act (CRA) in 2003 (Aransiola et al., 2009), which 26 of the 36 Nigerian states have domesticated (Nzarga, 2016). As noted by the Bar Human Rights Committee (BHRC, 2013) of England and Wales, the CRA supersedes all other legislations connected to the rights of the child in Nigeria. The CRA specifies the rights and responsibilities of children as well as the duties and obligations of parents, government, organizations and other authorities towards children (Ibid.). The CRA in its various sections mandates that necessary care and protection shall be given to a child in order to ensure his/her wellbeing and that any individual, organization or authority dealing with a child shall act in the best interest of that child. It entrenches the fundamental rights of the child, such as the child’s rights to a name, survival and development, freedom of thought, conscience and religion, freedom of association and peaceful assembly, freedom from discrimination, freedom of movement, upholding of dignity, right to education, good health, access to healthcare services, parental care and protection amongst others.

Despite the domestication of the UN CRC by Nigeria in the form of the CRA, child abuse is commonplace in the country. The child witch stigmatization and inhumane treatment of children, including murder, are commonplace in the states of Akwa Ibom and Cross River –
two states that have domesticated the CRA (BHRC, 2013; Nzarga, 2016). [...] The CRA is explicit that the “best interest” of the child shall be paramount in any matters concerning a child. Unfortunately, this stigmatization and its consequences are not in the best interest of the child.”


In an interview with Asylos and ARC Foundation, an anonymous source, a disability activist, lawyer and published author, described the ‘tripartite legal system’ and said that in practice it is difficult to implement the Child Rights Act and uphold the principle of the best interest of the child in communities where customary law and religious legal systems prevail in practice:

“Let me start by saying, Nigeria as a country operates what we call a tripartite legal system. That is to say we have three legal systems in one country. We have the sharia law, we have the customary law, and we have the English law. The English law supports the rights of a child, which talks about the best interests of a child, what should be done to children and what should not be done to children. Thus, the Child Rights Act 2003 is the law that guides and protects children in Nigeria. Under sharia law, they have their own rules on how to bring up children. What could be labelled as a violation of children rights under the Child Rights Act 2003, under the common law, is not regarded as an offence under sharia law.

[...] So, in a nutshell, because Nigeria practices a tripartite legal system, then it's difficult to prosecute people who believe in our traditional legal systems. If you know, our laws categorically state that any of these laws, either Islamic law or traditional law, that are inconsistent with fundamental human rights should be declared a nullity. But it is not as easy in practice as I say it orally here. So easy to say, but when you look at the implementation or the application of those laws, many times children are violated due to those practices that are ordained either by the Islamic religion or the traditional legal system, and the law is confused on how to intervene. Also, there is a lack of political will in protecting children with disabilities against abuses in the country. All these make it very difficult for children with disabilities to enjoy their full rights as children in Nigeria.

[...] The conflict of these three legal systems, actually, is a huge problem. Because if this law says one thing about children, and then another law says something else, which one are you actually going to follow? So, children are in between these laws, and that is to their big disadvantage.”

(Source: Interview with anonymous source, 3 August 2021)

2.6. What legislation on persons with disabilities has been adopted?

This section should be read in conjunction with sections 2.11. – 2.17. under the subsection heading Implementation of legal (and policy) frameworks.

In 2018 Nigeria enacted the Discrimination against Persons with Disabilities (Prohibition) Act:
“This Act provides for the full integration of persons with disabilities into the society, establishes the National Commission for People with Disabilities and vests the Commission with responsibilities for their education, health care, social, economic and civil rights.”


Disability is defined in the Discrimination against Persons with Disabilities (Prohibition) Act, 2018 as follows:

“"disabled" means having a disability;
"disability" includes long term physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder full and effective participation in society on equal basis with others;

[...]"person with disabilities" means-
(a) a person who has received Temporary or Permanent Certificate of Disability to have condition which is expected to continue permanently or for a considerable length of time which can reasonably be expected to limit the person’s functional ability substantially, but not limited to seeing, hearing, thinking, ambulating, climbing, descending, lifting, grasping, rising, and includes any related function or any limitation due to weakness or significantly decreased endurance so that he cannot perform his everyday routine, living and working without significantly increased hardship and vulnerability to everyday obstacles and hazards; and

(b) a person with long term physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder their full and effective participation in society on equal basis with others;”


The legislation contains anti-discrimination provisions on the grounds of disability:

“PART I - PROHIBITION OF DISCRIMINATION, AND AWARENESS PROGRAMMES

1. (1) A person with disability shall not be discriminated against on the ground of his disability by any person or institution in any manner or circumstance.

   (2) A person who contravenes subsection (1), commits an offence and is liable on conviction to, if the person is -

      (a) a body corporate, a fine of N1,000,000; and

      (b) an individual, a fine of N100,000 or six months imprisonment or both.

(3) Notwithstanding the prosecution, conviction or otherwise of any person for any offence under this Act, the person against whom the crime or wrong is committed may maintain a civil action against the person committing the offence or causing the injury, without prejudice to any conviction or acquittal.”

In its 2020 report of a Rapid Assessment of Disability Inclusion, the World Bank provides an assessment of the Discrimination against Persons with Disabilities (Prohibition) Act and other legislation targeting or indirectly including people with disabilities in Nigeria:

“Legal Frameworks and Programming

[...] General


• The Discrimination against Persons with Disabilities (Prohibition) Act 2018 (FRN 2019), enacted January 23, 2019, is a comprehensive piece of legislation that guarantees the full integration of persons with disabilities into society and establishes a national commission responsible for ensuring their education, health care, social, economic, and civil rights. The law draws on and seeks to domesticate the provisions of the Convention on the Rights of Persons with Disabilities (2006), which Nigeria has signed and ratified. Implementation, which has not yet begun, will involve a rigorous process of developing and costing the plan, including the establishment of a national commission to monitor the process. Additionally, 11 states already have disability laws in place.

• Violence Against Persons (Prohibition) Act 2015 seeks to eliminate violence in private and public life. It prohibits all forms of violence against persons, provides maximum protection and effective remedies for victims and punishment of offenders. The law applies to all people, including those with disabilities, although they are not specifically mentioned. The Disability Rights Advocacy Center organized a workshop in 2018 to familiarize disability-inclusive development actors with the provisions of the law. The law is applicable in the Federal Capital Territory, but only a few other states have begun to adapt it for their use (FRN 2015b).”


The same World Bank report provides an in-depth explanation of the Discrimination against Persons with Disabilities (Prohibition) Act and its implications:

“Discrimination against Persons with Disabilities (Prohibition) Act 2018

The Discrimination against Persons with Disabilities (Prohibition) Act 2018 (FRN 2019) is a law of the Federal Republic of Nigeria to provide for the full integration of persons with disabilities into society; establish the National Commission for Persons with Disabilities; and vest in the commission the responsibilities for their education, health care, social, economic and civil rights, and for related matters.

The law provides for the following socioeconomic spheres of life among persons with disabilities in Nigeria:

1. Prohibition of discrimination and awareness program;
2. Accessibility of physical structures;
3. Road transportation;
4. Seaports, railways, and airport facilities;
5. Liberty; rights to education, health, and first consideration in queues; and accommodations in emergencies;
6. Opportunity for employment and participation in politics and public life;
7. Establishment of the National Commission for Persons with Disabilities; and
8. Appointment and duties of the executive secretary and other staff.

The law came into being following years of relentless advocacy and struggles by the disability movement and civil society in Nigeria. On January 23, 2019, President Buhari signed the act into law. Prior to its enactment, there had never been a statute to protect the rights of persons with disabilities in Nigeria. The right to freedom from discrimination is a human right enshrined in Nigeria’s 1999 constitution (FRN 1999), but it is limited to Nigerian citizens and does not make specific provisions for the privileges, opportunities, and services that may be occasioned by a significant human difference, such as a disability.

The law criminalizes discrimination by imposing sanctions on the offenders, including fines and prison sentences. It also stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible. Employers of labor must ensure that 5 percent of their workforce comprises persons with disabilities. A person with a disability who is discriminated against can instigate a civil action against the offender without prejudice to acquittal or conviction under this law.

Furthermore, the law establishes a National Commission for Persons with Disabilities, which will ensure that stakeholders adequately implement its provisions, including by liaising with the public and private sector and with the government to ensure that all policies, programs, and activities address the needs of persons with disabilities. The commission has the power to receive complaints from persons with disabilities regarding any violation of their rights and to provide support to such complainants to seek redress through the courts.

[...] Implications of the law

One important expected impact of the law, according to study participants, is that persons with disabilities will have improved access to the physical environment and to basic services, such as education, health, and livelihoods, which will help alleviate poverty among persons with disabilities.

In addition, it is expected that society will begin to treat persons with disabilities as rights-holders rather than as objects of charity or as those whose needs should be addressed only after all others.

[...] The law also implies that organizations of persons with disabilities will need to raise awareness and mobilize their members to access basic services. They will also play a role in monitoring the implementation and/or enforcement of the law by holding offenders accountable.

[...] Similarly, civil society is expected to become gradually more inclusive by ensuring the application of the principles of equity, participation, and accessibility in their programs and services. The law also calls for the expanded engagement of development partners in disability inclusion through increasing funding of disability-inclusive interventions, particularly capacity development of organizations of persons with disabilities to improve their participation and leadership in disability-inclusive development.”
Jane Birchall sets out another assessment of the law in a Helpdesk report commissioned by the UK Department for International Development, highlighting concerns of disability experts:

“This act was signed into law in January 2019, after nine years of advocacy by disability rights groups. The act is a first step towards domesticating the CRPD, and it will establish a National Commission for Persons with Disabilities to oversee access to housing, education and healthcare. The act (Thompson, 2019a; 2019b):

- Stipulates a five-year transitional period after which public buildings and transport must be accessible
- Requires all public organisations to reserve at least five per cent of employment opportunities for people with disabilities
- Lays out penalties for non-compliance

Disability experts note that while the bill represents an important opportunity to advance the rights of people with disabilities in Nigeria, the fact that it took so long to become law demonstrates the low priority that has been given to disability among successive governments. Concerns remain that the bill is not accompanied by genuine political will, or a framework for implementation (Holden et al., 2019). The Federal Ministry of Women Affairs and Social Development is responsible for policy on disability, and made a number of commitments at the recent Global Disability Summit around inclusive education, economic empowerment and technology. Disability experts are concerned, however, that disability is not mainstreamed across the work of government ministries and that there is no framework in place to monitor disability inclusion at government level (Holden et al., 2019).”

Human Rights Watch provides a brief overview, including of events preceding the signing of the Bill into law:

“Nigeria ratified the United Nations Convention on the Rights of People with Disabilities (CRPD) in 2007 and its Optional Protocol in 2010. Since then, civil society groups and people with disabilities have called on the government to put it into practice. In 2011 and 2015, the National Assembly passed the Discrimination Against Persons with Disabilities (Prohibition) Bill 2009, but former President Goodluck Jonathan declined to sign it into law. The bill for the new law was passed by the House of Representatives and the Senate joint committee in November 2016, but was not sent to Buhari for his signature until December 2018.

On January 17 [which year?], Buhari denied on national television that he had received the bill. Hundreds of people protested, and barely five days later, he signed the bill into law.

The law prohibits discrimination on the basis of disability and imposes sanctions including fines and prison sentences on those who contravene it. It also stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible and usable for people with disabilities.
The law will also establish a National Commission for Persons with Disabilities, responsible for ensuring that people with disabilities have access to housing, education, and healthcare. The Commission will be empowered to receive complaints of rights violations and support victims to seek legal redress amongst other duties.”


A similar account, with highlights of key features of the law, is provided by the Nigerian newspaper Premium Times:

“In January, Nigeria signed into law the prohibition of discrimination against persons with disabilities bill, after over 20 years of advocacy by notable Nigerians including David Anyeale: a disability rights activist and Executive Director, Centre for Citizens with Disabilities (CCD).

According to section (1) of the law, anyone found guilty of discriminating against a person with a disability would be liable to a fine N100,000 in the case of an individual or N1 million in the case of an institution or a term of six months in jail or both.

The law also provides for the Nigerian government to establish institutions that will enhance its implementation such as the commission for persons with disabilities.

Before the creation of that law, Nigeria had ratified the United Nations Convention on the Rights of Persons with Disabilities on March 30, 2007 and its Optional Protocol on September 24, 2010, with the Ministry of Women Affairs and Social Development charged with ensuring compliance with the laws and submitting the reports to the international bodies.

Article 5: paragraph 2 of the UNCRPD, states "parties shall prohibit all forms of discrimination on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds."

(Source: Premium Times, Despite New Law, Nigerians Living With Disabilities Lament Discrimination, 1 November 2019)

According to a Mental Health Policy Brief, the law in Nigeria with regards to mental health is outdated and discriminatory:

“Whilst health has scarcely ever been a Legislative priority in Nigeria, mental health in particular has received an infinitesimal level of attention in law and policy making.

The Lunacy Act, dating from a 1916 Ordinance, is the extant federal law on mental health. Although it provides a process for involuntary commitment, its references to ‘lunatics’ ‘idiots’ and ‘asylums’ and provisions relating to the ‘arrests’ of persons suspected to be mentally ill, are discriminatory.”

(Source: Centre for Ethics Law and Development, Mental Health Law in Nigeria, 11 April 2021)

A new mental health bill was proposed and adopted by the Senate in 2003, but the bill was not passed by the House of Representatives and was therefore not adopted into law:

“A 2003 bill for a mental health act passed a public hearing and was adopted by the Senate, but was not passed by the House of Representatives and thus was not adopted into law.
before the end of the last administration. It is unclear whether negotiations are still on-going to ensure passage of the Bill.”

(Source: Centre for Ethics Law and Development, *Addressing Mental Health Challenges and Inadequate Services in Nigeria*, 12 April 2021)

2.7. What policy measures on persons with disabilities have been adopted?

This section should be read in conjunction with *section 5. Access to services and support* and *section 6. Access to education*.

The World Bank report analyses national policies by sector, that relate to persons with disabilities:

“Education Sector
National Policy on Inclusive Education in Nigeria. This policy seeks to provide unhindered access to quality education and engage the active participation of all learners in the same safe school environment […] It is a comprehensive policy, developed with support and based on lessons learned from ESSPIN projects in Nigeria, which includes provisions for its implementation plan and monitoring and evaluation framework. It clearly states how the educational needs of children with disabilities should be mainstreamed. However, implementation seems to have stalled since 2016, and it is not clear whether or not the plan has been costed. A coordination mechanism may be needed to revisit the process. Strong political will coupled with funding support will be crucial to its proper implementation (FRN 2016).

National Policy on Education. This national-level policy emphasizes inclusive education as a way of ensuring equity in education as enshrined in the Universal Basic Education Act 2004 (Asiwe and Omiegbe 2014). It asserts that the education of children with disabilities shall be free at all levels and makes provisions for all needed educational support, training, and retraining of teachers, learning materials, and assistive devices and technologies. However, the policy is weak in terms of early detection and identification mechanisms, the monitoring and evaluation system, the implementation structure, funding, and data collection. And it is only being partially implemented as is (Asiwe and Omiegbe 2014; Eleweke, Agboola, and Guteng 2015). Much needs to be done to ensure the full implementation of the policy, including drafting a plan that has disability-specific indicators for monitoring (FRN 2004b).

National Policy on Albinism in Nigeria 2012. This policy, whose review was completed in 2019 (FRN 2012c), aims to guarantee the welfare and rights of persons with albinism through awareness and sensitization efforts, the protection and promotion of their rights, the fostering of their participation and empowerment, the facilitation of the passage of a law to establish the National Agency for Albinism and Hypo-pigmentation in Nigeria, and the promotion of relevant research and data collection.

National Policy on Special Needs Education in Nigeria 2015. This policy seeks to provide complete service delivery that encompasses physical, mental, and emotional disabilities in Nigerian children at school, at home, and the hospital; to provide adequate qualitative education to all persons with disabilities in all aspects of national development; and to ensure that all persons with disabilities develop at a pace commensurate with their abilities so they can contribute to the nation’s socioeconomic and technological development (FRN 2015a).
Social Protection Sector
Economic Recovery and Growth Plan, 2017. This medium-term plan builds on the 2016 strategic implementation plan. Aimed at restoring economic growth while leveraging the ingenuity and resilience of Nigerians, it envisions sustained inclusive growth through structural economic transformation focused on improving both public and private sector efficiency and provides a foundational blueprint for future generations while building the capacity of Nigerian youth to carry the country forward. The plan utilizes 60 strategies to attain its objectives, two of which are directly related to social inclusion and another two to job creation. One of the strategies specifically targets the elderly and persons with disabilities; another—regarding social safety nets—refers to the vulnerable in general terms. The two job creation strategies do not make any mention of disabilities, which has implications for addressing the needs of persons with disabilities. [...] 

National Social Protection Policy, 2017. The National Social Protection Policy is an umbrella policy framework with provisions covering all conventional core sectors and emerging issues that the social protection programs and projects in the country are currently implementing. It also encompasses emergency and crisis contexts of social protection. It comprises 16 policy measures to be implemented in eight sectors. Persons with disabilities are targeted specifically in three of its five education and health services sector programs as well as in one of its four livelihood enhancement and employment sectors. There are no other specific efforts toward disability inclusion in any of the remaining six sectors. Disability inclusion should be considered as a cross-cutting issue in the policy, given the strong relationship between poverty and disability (Ukpong and Ikoh 2017).

Housing and Urban Development Sector
National Building Codes, 2012. These legal codes support the 2012 National Housing Policy. They provide standards and guidelines for the accessibility of private and public buildings to persons with different types of disabilities. However, they were neither approved nor implemented and are now being reviewed (FRN 2012b). [...] 

Health Sector
National Policy on Sexual and Reproductive Health and Rights of Persons with Disabilities, especially Women and Girls. This policy seeks to ensure that all sexual and reproductive health programs reach and serve persons with disabilities, to expand access to such services, and to increase understanding about the sexual and reproductive health issues among women and girls with disabilities. The policy, which also serves as an advocacy and resource mobilization tool for relevant stakeholders, seeks to achieve its objectives through the implementation of policy actions and strategic activities under five thematic areas: 
1. Increasing knowledge, raising awareness, generating popular support, and mainstreaming the issue; 
2. Improving access to sexual and reproductive health for women with disabilities, including access to related education, services, transportation, information, and communications; 
3. Improving the inclusion of women with disabilities in governance by mainstreaming them into in all government programs, including them in policies and laws, and allocating budgets for persons with disabilities; 
4. Building bridges for partnership and collaboration and building the capacity of stakeholders; and 
5. Promoting research, monitoring, and evaluation for issues, activities, and programs involving women with disabilities.
Adequate implementation will require the collaboration of multisectoral stakeholders to develop an effective implementation plan that includes monitoring, evaluation, and costing (FRN 2018b).

Social Development Sector
National Rehabilitation Policy. Nigeria has a vague and outdated policy for the rehabilitation of persons with disabilities. Relevant stakeholders have recently made unsuccessful efforts to develop a more functional policy. A comprehensive policy that meets the rehabilitation needs of men, women, and children with disabilities is urgently needed. FMWASD, in collaboration with other stakeholders in the disability community, is currently developing a national disability policy to replace the National Rehabilitation Policy (FRN n.d.).

National Gender Policy, 2006. This policy brings a gender perspective into all aspects of planning, policy, legislation, and transformation activities in Nigeria. It is meant to address the systematic inequalities between women and men in society without ignoring the intersectional fundamental differences between them. The policy acknowledges disability as a form of social vulnerability, dedicating a section to it. Given the strong intersectionality between gender and disability, the minimum standard should be to treat disability as a cross-cutting issue in this policy. The country is already feeling the effect of this omission because the gap in programming between women’s rights and disability rights is still present. Recent efforts to close this gap by the disability rights movement, particularly women with disabilities, is increasing awareness about this intersectionality among relevant actors.”

Electoral/Political Participation Sector
The Independent National Electoral Commission Framework on Access and Participation of Persons with Disabilities in the Electoral Process (FRN 2018a). This framework enshrines the inclusion of persons with disabilities in all aspects of the electoral process, including eliminating the barriers they encounter as voters, aspirants, candidates, party officials, and staff of the INEC. The framework has an accompanying internal operational plan to deliver on its objectives.

Humanitarian Settings
National Policy on Internally Displaced Persons in Nigeria (FRN 2012d). This policy asserts the principles that guide humanitarian assistance and implementation of durable solutions in situations of internal displacement in Nigeria. It is a comprehensive policy that addresses all of the causes of internal displacement and all of the groups of internally displaced persons, including those with disabilities. It is applicable to all of the assistance and protection needs during every phase of displacement—preparedness, relief, and recovery—and at every level of government.


A media source, This Day, reports in August 2021 on initiatives to support persons with disabilities announced by the federal government:

“The Minister of State for Industry, Trade and Investment, Mrs. Mariam Katagum, yesterday reiterated the federal government’s commitment to supporting people living with disabilities in the country.

[...] Katagum said a lot is being currently [sic] by the federal government to support people with disabilities citing, the allocation of five per cent in every track of the MSMEs Survival Fund, meant to cushion the effect of the COVID-19 pandemic on MSMEs to people with living with disabilities.

In a statement issued by the ministry’s Assistant Director, Information, Mrs. Oluwakemi Ogunmakinwa, the minister said that the Federal Executive Council (FEC) had further ensured that every memo on new office building that came to the council for consideration must accommodate relevant structures that would serve people living with disabilities.”

(Source: This Day, FG to boost support for people living with disabilities, 12 August 2021)

This Day also reports on a number of Senate resolutions calling for persons with disabilities to receive assistive devices, have their accessibility needs considered in the construction of schools and other public places, among other federal government actions:

“The Senate yesterday urged President Muhammadu Buhari to provide a five-year post COVID-19 special intervention programme for Nigerians living with various types of disabilities.

This was just as it urged the Central Bank of Nigeria (CBN), through the NIRSAL Micro Finance Bank, to provide Special Loan facilities to Persons with Disabilities through the National Commission for Persons with Disabilities.

The upper legislative chamber also called on security agencies to retain and convert personnel who became disabled in the course of discharging their duties than retiring them. In addition, it also urged the Federal Civil Service Commission (FCSC) and Boards of Parastatals to give special consideration to Persons with Disability during the recruitment exercise to give effect to the Legislative intent of the Discrimination against Persons with Disability (Prohibition Act, 2018).

These formed part of the resolutions reached after the upper chamber considered a motion titled, “Urgent need to provide Special Presidential Interventions for the persons living with disabilities in Nigeria.”
Accordingly, the Senate in its resolutions urged President Buhari to provide a five-year post-COVID-19 special intervention programme in areas of: Mass distribution of Assistive devices to include wheelchairs, prosthesis and orthotics, hearing aids, crutches, Braille machines, special computers, skin protector, among others.

The upper chamber posited that doing so would provide access to education; independent living for disabled Nigerians; and facilitate effective inclusion and participation in development activities.

In addition, the Senate called on the Federal Government to undertake the design and construction of accessibility facilities in all Federal Government institutions, city roads, pedestrian walkways and public facilities, including airports, railway stations, motor parks, schools, universities, etc.

It also demanded the revitalisation of all rehabilitation facilities and special schools in the six geo-political zones across the country.

While urging all Ministries, Department and Agencies (MDAs) to provide at least 10% of their projects and programmes [sic] for persons with disabilities through the National Commission for Persons with Disabilities; the chamber called on the Central Bank of Nigeria (CBN), through the NIRSAL Micro Finance Bank, to provide Special Loan facilities to Persons with Disabilities through the National Commission for Persons with Disabilities.”

(Source: This Day, Senate Asks Buhari to Provide Five-year Post-COVID Intervention for Disabled Nigerians, 5 May 2021)

2.8. Is the principle of the best interests of the child reflected in the Constitution or other legislation?

The Constitution of the Federal Republic of Nigeria does not mention the principle of the best interest of the child. However, the Child’s Rights Act of 2003 is the legislation adopted by the Federal Republic of Nigeria to domesticate the UN Convention on the Rights of the Child (CRC). The best interest of the child is the first article of the legislation:

“PART I - BEST INTEREST OF THE CHILD TO BE OF PARAMOUNT CONSIDERATION IN ALL ACTIONS

1. In every action concerning a child, whether undertaken by an individual, public or private body, institutions or service, court of law, or administrative or legislative authority, the best interest of the child shall be the primary consideration.

2.- (1) A child shall be given such protection and care as is necessary for the well-being of the child, taking into account the rights and duties of the child's parents, legal guardians, or other individuals, institutions, services, agencies, organizations or bodies legally responsible for the child."

(2) Every person, institution, service, agency, organization and body responsible for the care or protection of children shall conform with the standards established by the appropriate
authorities, particularly in the areas of safety, health, welfare, number and suitability of their staff and competent supervision.”


2.9. Have federal states domesticated national provisions on disability and child rights?

In June 2020 the World Bank reported that only 11 of 36 states have enacted disability laws at the state level, with a low rate of implementation:

“Eleven states—Lagos, Plateau, Jigawa, Bauchi, Ondo, Ogun, Nasarawa, Anambra, Kano, Kogi, and Kwara— currently have disability laws to safeguard the rights of persons with disabilities. However, the rate of implementation for these laws is very low, with only Lagos and Plateau having structures in place for their implementation, the extent and quality of which has not been adequately assessed.”


Similarly, in December 2020 disability expert Mr David Anyaele is reported by The Guardian (Nigeria) to have said ‘only about 10’ states have enacted the federal law (Discrimination against Persons with Disabilities (Prohibition) Act, 2018):

“Citizens with disabilities have urged states to enact laws to remove barriers that hinder them from enjoying equal rights as citizens rather than being discriminated against and marginalized on the basis of their disabilities.

The Executive Director of the Center For Citizens With Disabilities (CDD), Mr David Anyaele, who made the call in Umuahia Abia state capital commended the federal government under president Muhammadu Buhari for enacting the disabilities law and also setting up a Commission to implement its provisions.

Anyaele decried that only about ten states have enacted this law noting that in the case of Abia, the bill has been undergoing legislative processes.”

(Source: The Guardian (Nigeria), *Group urges states to enact disability law*, 15 December 2020)

The US Department of State reports the same:

“By year’s end 10 states had adopted the national disability law including Kano, Jigawa, Anambra, Kogi, Ondo, Lagos, Ekiti, Plateau, Kwara, and Bauchi.”


Danlami Umaru Basharu told Asylos and ARC Foundation:

“Unfortunately, the Act has not been implemented in every state. There is only one office of the Commission at the national level. I understand efforts are being made to get zonal
offices set up in six states of the federation. Meanwhile, persons with disabilities have to depend for support from their ministries of Women Affairs or Social Development.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

However, Theophilus Odaudu said that the National Commission for Persons with Disabilities has taken some steps to urge States to domesticate the Discrimination against Persons with Disabilities (Prohibition) Act, 2018:

“The commission has had visiting tours to some states where they’re urging some states to try to adopt the legislation or domesticate their own laws. Some states have their own disability laws. Some came about after the act was signed into law. Others came into force even before the national act was signed into law. A lot of this especially those in the latter category are also needing to modify their laws in line with the act. Some have taken that step like in Plateau State for instance I know that there was a move last year to amend the state law on disability, and the Disability Rights Advocacy Fund supported one of the OPDs to carry out advocacy in that regard. That process was on before COVID-19 and now it’s still in progress but most states are yet to enact disability-specific legislation. And that’s one direction I see the commission pushing towards.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

But Abia State was among those that had not yet domesticated the law as of mid-2021:

“Mr Samuel Ekeoma, Senior Special Assistant to Gov. Okezie Ikpeazu of Abia, on Disability Matters, has urged the Abia State House of Assembly to expedite action on the passage of Discrimination against Persons with Disability Bill, 2018. […] He said passage of the bill would ameliorate the plight of Persons with Disabilities (PWDs) and stop all forms of discriminations against them in the state. The governor’s aide, who is living with disability, insisted that it would fast track stakeholders’ action on inclusive policy on education and others.”

(Source: The Guardian Nigeria, Ikpeazu’s aide urges Abia Assembly to pass disability bill, 23 July 2021)

Although Nigeria has transposed the UN Convention on the Rights of the Child into national law through the enactment of the Child Rights Act in 2003, many states have still not domesticated the Child’s Rights Act into state law:

“While advocacy efforts continue to intensify for the domestication of the 2003 CRA across the remaining 11 northern states of Nigeria, the planned targets for domestication may need to be adjusted to allow more dialogue with key change makers to avoid child rights legislation including provisions that legitimize child marriage. Reaching agreements with government and key stakeholders on clear vulnerability criteria reduces the risks of having inflated child protection caseloads, which in turn allows for higher quality case management processes until case closure.”
“Child Rights Act 2003
This piece of legislation was intended to domesticate and implement the principles enshrined in the CRC. The act defines a child as someone under the age of 18. Among its provisions are those entitling all children to education, freedom from discrimination, and medical and health care. The act prohibits child marriage (Bar Human Rights Committee, 2013). However, the CRA has not yet been implemented in twelve of Nigeria’s 36 states. In some states where the CRA is not in force, the legal age of a child is up to 16 years old, allowing early marriage (Committee on the Rights of the Child, 2010).”

“Presently, in Nigeria, only 24 states have domesticated and re-enacted their respective Child Rights law. These include: Abia, Akwa Ibom, Anambra, Benue, Cross River, Delta, Edo, Ekiti, Imo, Jigawa, Kwarra, Kogi, Lagos, Nassarawa, Niger, Ogun, Ondo, Osun, Oyo, Plateau, Rivers, and Taraba. Unfortunately, Adamawa, Bauchi, Borno, Enugu, Gombe, Kaduna, Kano, Katsina, Kebbi, Niger, Sokoto, Yobe and Zamfara States are yet to domesticate the Act.

[...] In 2003, Nigeria adopted the CRA to domesticate the CRC. Although this law was passed at the Federal level, it is only effective if State assemblies also start it. The CRA was created to serve as a legal documentation and protection of Children rights and responsibilities in Nigeria.

The law has three primary purposes: to incorporate the rights of the CRC and the African Charter on Human and Peoples’ Rights into the national law, to provide the responsibilities of government agencies associated with the law and to integrate children-focused legislation into one comprehensive law. It also acts as legislation against human trafficking since it forbids children from being “separated from … parents against their will, except where it is in the best interests of the child.”

2.10. Does legislation and related policy respond to intersectional discrimination faced by children and young people with disabilities?

Several Nigerian disability experts who were interviewed by Asylos and ARC Foundation (or who provided written evidence), said that the current legislation does not respond to intersectional discrimination, with negative consequences for children and other persons with disabilities:

Theophilus Odaudu pointed to gaps in the legislation, saying that the Discrimination Against Persons with Disabilities (Prohibition) Act fails to make specific provision for children with disabilities, and the Child’s Rights Act does not adequately respond to the needs of children with disabilities:

“So, in Nigeria, as it is we recently got the Discrimination Against Persons with Disabilities (Prohibition) Act signed. That's about two years ago and prior to that there have been several laws that attempt to protect the rights of the child like the Child's Rights Act that was domesticated in Nigeria and several states have followed suit, about 11 States; and states
are yet to domesticate the act at the state level. But this legislation did not address issues of intersectional discrimination against children with disabilities. So surprisingly the legislation on disability, that's the National Disability Act did not specifically address issues around children with disability and I agree that it is a gap in the legislation. Of course, there are certain provisions that to an extent try to prevent exploitation especially when using persons with disabilities to beg on the streets or using their disability to solicit for alms. Of course, that's common or that's more common among children and young persons with disabilities. It's easier to get a child with disability and have them go to beg on the street and all of that. So that provision of course one can give an extended interpretation to cover children with disability but the act itself did not particularly address any of those provisions to children with disability.

And the Child's Rights Act also did not adequately capture the needs of children with disability even though it recognised the fact that some children might require special attention or might have special needs and that has to be provided but it's not too specific on children with disabilities. Another act as well like the Violence Against Persons (Prohibition) Act (VAPPA) also failed to adequately capture that. So, there's a lot of gaps around legislation when it comes to specifics around children and young persons with disabilities.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

Adeyinka Ige-Onabolu highlights the failure of the legislation to respond to the intersectional identities of children with disabilities:

“The Legislation does not acknowledge the intersectional identities of persons with disabilities hence it is unable to respond to discrimination faced by children with disabilities. It fails to address the complex interactions among the multiple social categories such as gender, religion, sex etc through an intersectional lens. It tends to treat persons with disabilities as all homogenous thus leaving out other areas of their identities.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Grace Jerry and Olawunmi Okupe highlighted the gap in provisions related to discrimination on the grounds of education or social status:

“The Act makes provision on the grounds of ethnicity, place of origin, sex, religion, political opinion, disability etc but does not cover discriminations arising from educational qualification or social status”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

Danlami Umaru Basharu identified the lack of understanding of the legislation by those who are meant to implement it, and highlighted the failure to respond to the intersectional needs of women with disabilities in particular:

“The Nigerian National Disability Act is yet to be understood by even those who are expected to implement it. There is a slow level of understanding of the Act itself. I think there is a great effort that must be made to increase the capacity of members of the Commission towards understanding the Act and the policies to be derived therefrom. The Act does not yet respond adequately to issues of intersectional discrimination of women, especially, with disabilities.”
Both Theophilus Odaudu and Adeyinka Ige-Onabolu explain that because of legislative gaps, children with disabilities are not protected under the law in Nigeria and are at risk of having their needs neglected:

“So, the risk is that a lot of children and young persons with disabilities do not get the needed protection under the law. While every other provision can be broadly interpreted to include children and young persons with disabilities, the fact that they’re not specifically referenced, or specific provisions are not made for that category of persons, makes it difficult to argue for their specific rights. So, it leaves a lot of children with disabilities and young persons with disabilities without adequate protection under the law. And it also makes it difficult to create needed awareness about the rights of children with disabilities. It does not provide that platform where one can reference a specific provision that addresses the needs of a child with disability, and one has to draw inference from several pieces of legislation and struggle to make different interpretations in order to make people understand that a child with disabilities have rights like every other child. So, the major risk I see is that lack of adequate protection under the law and bringing all the children under one umbrella means that a lot of them will be neglected or several needs will be left behind.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

“It undermines the impact of the law. The failure to recognise the various identity markers makes it almost impossible for systems and processes to respond to the needs of children with disabilities. They will continue to experience direct and indirect discrimination; they will not be able to access the rights and protection as the multiple layers of discriminations they face are not addressed in a multifaceted way.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

And according to Grace Jerry and Olawunmi Okupe:

“Acts of violence or exploitation against them may not be enforceable if it doesn't fall under those covered by the Act.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

**Implementation of legal (and policy) frameworks**

**2.11. Have initial and periodic reports been submitted to human rights treaty bodies and the Convention on the rights of persons with disabilities (CRPD)?**

Nigeria has not submitted its initial reports to the UN Committee on the Rights of Persons with Disabilities (CRPD), nor any periodic reports since it ratified the Convention:

“Nigeria ratified the CRPD in September 2007 and its Optional Protocol in 2010. Its report to the CRPD committee was due in 2010 but it has not yet been submitted [...].”

“Nigeria ratified this Convention [CRPD] on the 24th day of September 2010 with its Optional Protocol.\(^1\) The Federal Government is however, yet to put in place an appropriate legislation for the operationalization of the provisions of the Convention. Nigeria has also not met its reporting obligations to the Committee established under Article 34 of the Convention requiring Nigeria to report every two years, on the extent of its implementation of the provisions of the Protocol.

\(^1\) The optional Protocol means the Protocol to the Convention to establish a machinery for the resolution of issues emanating from the provisions of the Convention between PWDs and the respective States."

(Source: Centre for Citizens with Disabilities (CCD), *Policy Proposal to support the Urgent Assent of Nigeria Disability Bill 2018*)

Also see the Reporting status for Nigeria from the page of the United Nations Human Rights Treaty Bodies.

This is despite clear reporting obligations established by the CRPD:

“All States parties have to submit regular reports to the Committee on how the rights enshrined in the Convention are being implemented. States must report initially within two years of ratifying the Convention and, thereafter, every four years. The Committee examines each report and makes suggestions and general recommendations on the report.”

(Source: Committee on the Rights of Persons with Disabilities, *Questions and Answers*)

The last report submitted by Nigeria to the CRC was in 2008, which was addressed by the UN Committee on the Rights of the Child in 2010:

“In its concluding observations, the committee expressed a range of concerns, including those on the varying legal definitions of child across Nigeria’s states; discrimination against girl children, children from minority ethnic groups, internally displaced children and children with disabilities; access to health and education; economic and sexual exploitation; and harmful traditional practices (Committee on the Rights of the Child, 2010).”


### 2.12. What steps have been taken to implement the Discrimination of Persons with Disabilities (Prohibition) Act 2018?

Sources in 2019 and 2020 reported that implementation of the Discrimination of Persons with Disabilities (Prohibition) Act 2018 was slow and that persons with disabilities continued to face discrimination:

“‘Our findings show that line ministries, departments and agencies of Lagos State are still struggling to implement the disability law of the states,’ he [Mr David Anyaele, Executive Director, CCD] said.

‘For instance, accessibility to public places and their services is one of the major highlighted challenges confronting PWDs [people with disabilities] in Lagos State. Many of them are
facing numerous environmental, institutional, and attitudinal barriers in accessing public buildings, private institutions, and their public services.

The current study, which was done this 2020, showed that many of the ministries do not understand their roles and responsibilities. The only thing an average MDA understands about the implementation is ramp and we are saying, implementation beyond ramp or access beyond ramp.

Also, discrimination is pervasive against persons with disabilities that are working in Lagos State. Even in government institutions, officials treat people with disabilities with this disdain and it is a worrisome situation for people with disabilities who are working in government offices.’

According to Anyaele, the major issue, with regards to addressing the challenges of PWDs, is not the absence of laws, but essentially, the enforcement and implementation of the laws.

‘Our findings indicate that the Governing Board of Lagos State Office for Disabilities Affairs (LASODA) is yet to be constituted. What that means is that the Lagos state governor will struggle much more to implement policies that will benefit people with disabilities. However, we discovered that the Lagos State Ministry of Education is doing its best to promote inclusive education but there is a limited number of qualified teachers that can support the process. LASODA is struggling due to its inability to have qualified staff to handle most of their technical works. Therefore, there is limited knowledge of the law among peoples with disabilities, including the MDAS,’ he said.”

(Source: The Herald, Lagos State to Fully Implement Disability Laws- CCD, 5 December 2020)

“According to David Anyaele, the Executive Director of Centre for Citizen with Disabilities, disability is still often considered as a charity issue rather than a public policy concern. Thus, Nigeria’s disabled suffer discrimination in employment, accessing education, and in other aspects of life [...] Social protection for disabled people is still relatively weak. Even the recently approved Discrimination Against Person with Disability (Prohibition) Act does not appear to sufficiently cater or provide real protection for Nigeria’s disabled people. And according to a DATAPHYTE report in January 2020, the disabled people of Nigeria are still excluded.”

(Source: Dataphyte, Social Protection for the Disabled in Nigeria during COVID-19 pandemic, 7 August 2020)

“Despite the law signed by President Muhammadu Buhari in January 2019, against discrimination of persons with disability, The Guardian gathered that most Nigerian Government agencies and private institutions are yet to apply the provisions of this law.

Many Nigerians living with impairment say the journey towards legal recognition and respect by Nigeria is far; as the government that approved the new law has literally helped violate it.

For example, while the law says at least five per cent of all public appointments must go to people with disability, government at various levels have so far not complied. President Buhari did not appoint any person with disability into his 43-member cabinet in August last year.”
“Persons living with disabilities have lamented that they are still facing discrimination across the country despite the passage and assent to the National Disability Bill.

President Muhammadu Buhari had on January 23, 2019, signed into law the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018 following nine years of relentless advocacy by disability rights activists in the country.

[...] But as Nigeria joins the rest of the world to mark this year's World Disability Day, persons with disabilities said discrimination against them has not abated. They said public and private buildings have remained user-unfriendly to their members especially at state and federal secretariats.

[...] The President, National Association of Persons with Physical Disabilities (NAPPD), Comrade Rilwan Mohammed Abdullahi, noted that though President Buhari had assented to the National Disability Bill which prohibits discrimination against persons with disabilities, the trend remains a challenge to millions of their members.

"The major challenge being faced by persons with physical disabilities in Nigeria is discrimination which we thought would become history soon after the law was enacted.

"One of the major problems with Nigeria is that we are very good with coming up with laws but when it comes to implementation it is another issue," Comrade Abdullahi said. Also speaking, the president, Association of Physically Challenged Applicants, Godstime Onyebulam, said: "Pure discrimination is our major challenge."

In January, Nigeria signed into law the prohibition of discrimination against persons with disabilities bill, after over 20 years of advocacy by notable Nigerians including David Anyeale: a disability rights activist and Executive Director, Centre for Citizens with Disabilities (CCD).

[...] But even after the signing of the law, many Nigerians living with disabilities say the journey towards legal recognition and respect by Nigeria is still ahead. The government that approved a new law has literally helped violate it.

For example, while the law says at least five per cent of all public appointments must go to people with disabilities, governments at various levels have so far not complied. President Muhammadu Buhari appointed no person with disability into his 43-member cabinet in August.

[...] Babatunde Fasiu, the legal officer for Lagos State office for disability affairs, said no one has been prosecuted for discriminating against people with disabilities.

Mr Fasiu told PREMIUM TIMES that many people living with disabilities fail to report cases of alleged discrimination because of the challenges militating against them in that regard.

"To start with, it is the duty of the police to investigate such cases. But many people with disabilities cannot go to the station because they lack access. If they struggle to get there,
they are met with a brick wall because a deaf person that cannot afford an interpreter or a blind person may end up being misinterpreted at the station. There are no facilities to aid the communication needs of persons with disabilities.”


In June 2020 the World Bank described the challenges to the implementation of the Act:

“Also challenging the law’s implementation is a dearth of disability-inclusive policies, and where disability-related provisions exist, whether in inclusive or disability-specific policies, implementation is deficient. Further, the development and review phases for Nigerian policies lack the active participation of persons with disabilities.”


The World Bank report stated that the implementation of policies for person with disabilities is the responsibility of the rehabilitation department of the Federal Ministry of Women Affairs and Social Development, noting a reliance on the ‘charity approach’, insufficient budget allocation and a lack of institutional coordination to address disability inclusion:

“The rehabilitation department of FMWASD [Federal Ministry of Women Affairs and Social Development] is responsible for disability matters in Nigeria. The ministry still relies heavily on the charity approach to deliver its mandates.

Budget allocations are insufficient to run programs for persons with disabilities. Some past programs are no longer feasible due to lack of funds.

[...] The ministry is not currently implementing any policies to address the needs and concerns of persons with disabilities. It used to have a vague rehabilitation policy that was inadequately implemented. However, the ministry recently developed a national-level disability policy.

About 20 of FMWASD’s current staff members are persons with disabilities, 40 percent of whom are female.

There is no coordination between the other departments of the ministry and the rehabilitation department that handles disability issues. The ministry includes departments that handle gender, children, and the elderly, but their programs and policies are not disability-inclusive despite the known intersections between the issues of these other departments with disability. Similarly, disability issues are isolated in the ministry’s rehabilitation department, with other ministries believing that FMWASD should manage all disability-related concerns, an approach that further marginalizes persons with disabilities. Overall, however, the study and the opinion of experts consulted for it point to an overall gap in institutional coordination in the government to address disability inclusion.”


The same source reported that some ministries, departments, and agencies (MDAs) in Nigeria have instituted a disability desk or disability focal point to implement disability-inclusive practices within the Civil Service. However, programming gaps reportedly include inadequate formulation and implementation of disability-inclusive policies, inadequate knowledge and skills, lack of disability focal points in many MDAs and an overall lack of collaboration and cooperation on disability issues:
“The Office of the Head of the Civil Service of the Federation (OHCSF) has the unique mandate of providing leadership, management, and capacity development to all civil servants for effective, efficient, and accountable public service delivery. OHCSF interfaces with other MDAs on issues regarding civil service regulation, including the welfare of employees.

In 2003, OHCSF became the first government organ in Nigeria to establish a disability desk. It is located in the Occupational Health, Safety and Environment Division under the Employee Relations and Welfare Department. The division’s main function is to provide guidelines on health, safety, and the environment. The disability desk was established to implement disability-inclusive practices in OHCSF with the main objective of coordinating the affairs of all federal civil servants with disabilities and to improve their working conditions.

[...] The disability desk collates data of civil service with disabilities; ensures that the office environment in all the MDAs are safe for and accessible to persons with disabilities; receives and addresses complaints about disability inclusion in government policies that are staff-related, and attends to issues around reasonable accommodations for civil servants with disabilities.

[...] Apart from OHCSF, the finance, national human rights commission, justice, and other ministries have disability focal points.

However, these focal points seem to be works-in-progress as many of the federal ministries are still physically inaccessible, with very steep ramps and no lifts. Reports by staff members with disabilities in some MDAs also indicate that the provision of reasonable accommodations to staff is inadequate

[...] Programming gaps

- The formulation and implementation of disability-inclusive policies is inadequate.
- Knowledge and skill levels regarding disability-inclusive policies, programming, and service delivery is inadequate.
- Disability focal points are unavailable in most MDAs; those that do exist should look into disability inclusion across all other mandates of the MDAs, including the provision of accessible services and products, as well as the formulation and review of policies with a disability lens.
- Collaboration and coordination on disability issues within and between departments and MDAs is lacking.”

(Source: World Bank, Disability Inclusion in Nigeria: A Rapid Assessment, 26 June 2020, pg 50–51)

A key aspect for the implementation of the Act is the establishment of a National Commission for Persons with Disabilities. The Bill provides the following in relation to the Commission:

“PART VII - ESTABLISHMENT OF THE NATIONAL COMMISSION FOR PERSONS WITH DISABILITIES

31. (1) There is established the National Commission for Persons with Disabilities (in this Act Establishment of referred to as "the Commission") to be placed under the Presidency.

[...] 32. (1) There is established a Governing Council for the Commission (in this Act referred to as the "the Council") which shall conduct the affairs of the Commission.
37. The Council shall have power to-

(a) manage and superintend over the affairs of the Commission;
(b) make rules and regulations for the effective running of the Commission;
(j) [sic] establish and promote inclusive schools, vocational and rehabilitation centres for the development of persons with disabilities;
(k) liaise with the public and private sectors and other bodies to ensure that the peculiar interests of persons with disabilities are taken into consideration in every government policy, programme and activity;
(l) issue insignia of identification with persons with disabilities;
(m) in collaboration with other relevant government agencies and professional bodies in the building industry, enforce compliance of public buildings codes and impose necessary sanctions and make appropriate orders;
(n) receive complaints of persons with disabilities on the violation of their rights;
(o) support an individual’s right to seek redress in court, investigation, prosecution or sanctioning, in appropriate cases, the violation of the provision of this Act;
(p) ensure research, development and education on disability issues and disabled persons;
(q) collaborate with the media to make information available in accessible format for persons with disabilities; and
(r) procure assistive devices for all disability types.

39. (1) The Commission shall have power to do any lawful thing, which will facilitate carrying out of its functions and in particular may-

(a) enter into contract for the education and welfare of persons with disabilities;
(b) purchase or acquire any assets , business or property considered necessary for the proper conduct of its functions;
(c) sell, let, lease or dispose of any of its property;
(d) undertake or sponsor research where necessary for the performance of its functions; and
(e) train managerial, technical or other category of staff for the purpose of running the affairs of the Commission.

(2) The power conferred on the Commission may be exercised by it or through any of its employees or agent authorised in that behalf by the Commission.

(3) The Commission shall not be subject to a direction, control or suspension by any other authority or person in the performance of its functions under this Act except the President.

PART VIII- APPOINTMENT AND DUTIES OF THE EXECUTIVE SECRETARY AND OTHER STAFF

40. (l) There shall be an Executive Secretary for the Commission who shall-

(a) have such qualification and experience as appropriate for a person required to perform the functions of that office;
(b) be a person with disability; and
(c) be responsible to the Council for the execution of the policies and administration of the daily affairs of the Commission.”

(Source: Federal Republic of Nigeria, Discrimination against Persons with Disabilities (Prohibition) Act, 2018, articles 31, 32, 37, 39, 40)
In December 2019, members of the National Assembly of the Federal Republic of Nigeria urged the government to implement the Discrimination against Persons with Disabilities (Prohibition) Act, 2018 and to form the National Commission for Persons with Disabilities:

“Meanwhile, the Senate has urged the Federal government to fully implement the provisions of the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018, especially the composition of the National Commission for Persons with Disabilities. While urging the Ministry of Information and National Orientation Agency to undertake awareness campaign against all forms of discrimination, the Senate called on the Ministry of Works to be aware of their obligations to Persons with Disabilities.

The Chamber, accordingly, urged the Works and Housing Ministry and other MDAs involved in infrastructure and public buildings to adopt codes and standards that are user friendly to Persons with Disabilities. These were resolutions reached by the Senate after consideration of a motion to mark the International Day of Persons with Disabilities.”

(Source: National Assembly of the Federal Republic of Nigeria, Senate condemns Boki killings ...Urges FG to implement Persons with Disabilities Act, 5 December 2019)

The National Commission for Persons with Disabilities was appointed by Nigerian President Buhari in August 2020. The Nigerian Senate confirmed the appointees in December 2020:


The appointments are in line with the Discrimination Against Persons with Disabilities (Prohibition) Act 2019.

A statement by Special Adviser to the President on Media and Publicity, Mr. Femi Adesina, said the Act provides that the commission shall be headed by a part-time chairman and six members who shall be persons with disabilities from geo-political zones of the federation.

He also said the appointments would be subject to Senate confirmation for a four-year term of office in the first instance, and may be renewed for a second term of four years and no more.

The executive secretary, he added, who shall be responsible to the council for implementation of the policies and administration of daily affairs of the commission, shall also be a person with disability with a five-year tenure in the first instance, and may be reappointed for a second term and no more.

He listed members of the commission as Dr Hussaini Suleiman Kangiwa (Chairman, North West); Oparaku Onyejelam Jaja (South east): Philomena Isioma Konwea (South-south); Omopariola Busuyi Oluwasola (South-west); Amina Rahma Audu (North-west); Mrs Esther Andrew Awu (North-central); Abba Audu Ibrahim (North-east) and James David Lalu (Executive Secretary, North-central).”

(Source: This Day, Buhari Appoints Chairman, Secretary of National Commission for Persons with Disabilities, 25 August 2020)

“The Senate on Wednesday confirmed President Muhammadu Buhari’s nominees for appointment as Chairman and National Commissioners of the newly created National Commission for Persons with Disabilities (NCPWD).
Those confirmed for the NCPWD include Hon. Hussaini Suleiman Kangiwa as Chairman representing (North West), Oparaku Onyejelam Jaja as a member from South East and Philomena Isioma Konwea as a member representing South-South.”

(Source: The Nation, Senate okays nominees for Disability Commission, 9 December 2020)

The National Commission for Persons with Disabilities’ Governing Council was inaugurated in late December 2020 by Nigerian Minister of Humanitarian Affairs, Disaster Management, and Social Development, as reported by the newspaper Vanguard:

“MINISTER of Humanitarian Affairs, Disaster Management, and Social Development, Hajiya Sadiya Umar Farouq, Friday, inaugurated the Governing Council of the National Commission For Persons with Disabilities.

Speaking at the inauguration ceremony in Abuja, Farouq said that Commission was established based on the desire of the federal government to bring an end to the years of exclusion of persons with disabilities.

Umar Farouq said that the establishment of the commission will go a long way in alleviating the suffering of Persons With Disabilities including seeing to their education, general wellbeing, employment, and economic development.”

(Source: Vanguard, Farouq inaugurates governing council of Nat’l Commission for Persons with Disabilities, 22 December 2020)

A member of the Nigerian Senate urged the government to provide adequate funding to the National Commission for Persons with Disabilities, according to reporting by the Premium Times Nigeria:

“Obinna Ogba (PDP- Ebonyi) Chairperson, Senate Committee on Youth and Social Development, […] said adequate funding of the commission would help towards its eventual take off.

He said it was important for the commission to be adequately funded to achieve the purpose for which it was set up.

“We thank the executive for setting up the National Commission for Persons with Disabilities and nominating persons to run it. But putting such intervention mechanism in place without required funding, will defeat the purpose for which it was established. On our own part here in the Senate and by extension, the National Assembly, having through legislation, facilitated the establishment of the Commission, we shall at any given time, make required appropriation for effective and efficient functioning of the Commission.”

(Source: Premium Times, Senate tasks Nigerian govt on proper funding for Disability Commission, 7 December 2020)

As of 7 January 2021, only 3 of the 36 states in Nigeria had established Disability Rights Commissions at State level:

“President Muhammadu Buhari has charged the National Commission for Persons with Disabilities to play its roles adequately to enable the government to realise its objective of lifting 100 million citizens out of poverty.
The president said that his administration would continue to give effect to treaties that give inclusivity to persons with disabilities.

Buhari commended some governors who had enacted laws on disability and enjoined others who had not to do the needful.

“I thank the Governors of Plateau, Lagos and Nasarawa States for enacting disability laws and establishing Disability Rights Commissions in their states.

“I am calling on Governors of Yobe, Kano and Kogi States to implement their laws while those states that are yet to do so should take necessary action to enable Federal Government efforts have the desired impact at the subnational levels,” he said.”

(Source: The Guardian Nigeria, *Buhari urges Commission to assist in lifting 100m Nigerians out of poverty*, 7 January 2021

In February 2021 it was reported in the media that the National Commission for Persons with Disabilities’ executive secretary was accused of corruption by civil society organisations:

“Just before a proper take-off of the newly established Nigerian with Disabilities Commission, two non-profit groups have called on President Muhammadu Buhari to protect his legacy that led to the establishment of the Commission and launch an investigation into what has happened to the seven hundred and fifty million nairas (N750m) take-off grant which has been shared among a few people despite the fact that an office space has not yet been allotted to the Commission.

[...] ‘Mr Lalu continued with his unconstitutional, unprofessional, unethical, immoral behaviour knowingly or deliberately and intelligently, conspired with a few others to defraud the National Commission for Persons with Disabilities of her initial Two Hundred and Seventy-Five Million Naira (275 Million Naira) START-UP fund allocation to the newly established, National Commission for Persons with Disabilities and with impunity, brags about it.’

[...] ‘We request an investigation and Forensic Audit of the 275 million Naira be conducted as soon as possible before it is too late’.”

(Source: Vanguard, *750 Million Naira scandal rock Nigerian Disabilities Commission*, 15 February 2021)

The same media source reported in July 2021 that the federal government ordered a forensic audit of the activities of the National Commission for Persons with Disabilities since its inception:

“The Auditor-General for the Federation, Mr Adolphos Aghughu has named a Deputy Director of Audit, Mr Fawale Busayo Ayinla as the Supervisor for a five-man forensic audit team that will on Monday commence work on the level of compliance of the management of the newly established Nigerian Commission for Persons with Disabilities with the laws that guided the running of the Commission.

In a three-page letter of understanding signed by Aghughu who is the current Chairperson of the African Union Board of External Auditors, which was initially sent to a wrong address
before it was corrected last week, the forensic audit would scrutinize the operations of the Commission from its inception to December 2020.”

(Source: Vanguard, Dep Director, 5 others to conduct Forensic Audit of Nigerian Commission for Persons with Disabilities, 13 July 2021

In May 2021, a report by the Centre for Citizens with Disabilities that considered compliance with disability legislation in Lagos State concluded that the rights of persons with disabilities are still not being accommodated by the public or private sector:

“A non-governmental organisation, Centre for Citizens with Disabilities (CCD) has called for the strengthening of Lagos State Office of Disability Affairs (LASODA) for the monitoring of compliance with the provisions of the law, to ensure the protection of the rights of People with Disabilities (PWDs) in the state.

At the Lagos disability law summit with the theme “Our Lagos, Our Disability Report 2020, An Assessment of Compliance to Lagos Disability Law by Public and Private Institutions in Lagos State”, the Executive Director of CCD, David Anyaele, noted that the report evaluated the extent of compliance with the law by both public and private institutions and to identify the challenges of enforcing the law and measures to address them.

The researchers noted that many MDAs are yet to have their own stand-alone policy documents addressing the needs of PWDs.

According to the report, many public and private institutions in Lagos are still poorly equipped to cater for PWDs. Other challenges identified in the study include poor access to public spaces and transport services, inequality, lack of free healthcare, poor welfare, discrimination, stigmatisation, and unemployment.

Ministry of health is incapacitated in providing free healthcare services to PWDs due to lack of funding and specific policy guidelines, while the ministry of education, among others, was applauded for its achievements in implementing the law.

Anyaele noted that the major issues with regards to addressing the challenges of PWDs are not the absence of laws, but the enforcement and implementation of those laws.”

(Source: The Guardian (Nigeria), Strengthen LASODA to monitor disability law compliance, group tasks Lagos, 25 May 2021

“The Centre for Citizens with Disabilities (CCD), a Non-Governmental Organisation (NGO) has reiterated the need to scale up implementation and enforcement of the National Disability Act 2018.

The Executive Director of CCD, Mr David Anyele, said this during a public presentation of the centre’s report on assessment of compliance to the National Disability Act 2018 by public institutions in Abuja.

Anyele said that lack of capacity by some Ministries, Departments and Agencies (MDA) to effectively comply with the Act resulted to increased discrimination against Persons with Disabilities (PWD).
According to him, the National Disability Act (2018) has been weakly enforced in majority of the public institutions in Abuja.

[...] Anyele, who advocated specific yearly budget line for all the concerned line MDAs, noted that it would increase efforts towards the inclusion and welfare of PWDs.

[...] Anyele, however, urged the National Assembly to evoke its powers to enable proper implementation of the Act.

[...] Anyele also emphasised the need to build the capacity of the MDAs for full optimisation of the Discrimination against Persons with Disability Act (2018).

He said, “The Federal Ministry of Information and Culture should roll out information, education and communication programmes for the operationalistion of the Discrimination against Persons with Disabilities (Prohibition) Act 2018”. (NAN)

(Source: Inclusive News, **CCD calls for improved implementation of National Disability Act**, 30 July 2021)

In June 2021 Theophilus Odaudu told Asylos and ARC Foundation that 'little' had been done to implement the Act, with no visible Government programs or policies, and low awareness of it. This includes the measures that were supposed to take affect from when the Act was signed (everything other than the accessibility modifications e.g. to buildings). Mr Odaudu also told the authors of this report that someone in the Commission disclosed to him that the Commission has a very limited budget and was not expected to achieve much. However, he does consider that there has been some limited progress more generally:

“So, the act, yes, the five-year transitional period is for buildings and other facilities and what that means is that the other aspects that do not concern modification of buildings, and vehicles, and other accessibility facilities are supposed to take effect from when that act was signed. However, not so much has been done around implementation. Or better put, not so much has been realized around implementation of the Act. So, the way the Act is structured is that the implementation and enforcement is supposed to be done by the Commission, which was recently created sometime last year, and beyond that there's no policy, no program yet specified by the government on that.

I know that earlier in the year the President in a meeting with members of the Commission did commit to implementation and did promise to sign an Executive Order mandating all government departments to design programs and policies that will implement the Act but that has not yet happened. And I know organisations of persons with disabilities, a lot of whom I work with as part of my work with the Disability Rights Fund, are pushing for implementation of various sections of the Act and several awareness raising campaigns are being carried out.

However, the major gap, for instance, that can be seen is that the Ministry of Information is mandated by the Act to create necessary awareness around the Act, but nothing has come forth from the Ministry around creating this awareness. And so, a lot of people, a lot of organizations, do not know about the Act or its provisions or how it consigns them. And because it doesn’t seem to be a priority for the government the awareness process is very slow. And that's where the Commission is supposed to step in to be more rigorous and vocal
about the Act. Of course, I will say it is doing a little and it has made some effort but that has not yet translated into visible policies or programs that are specific to implementation.

And I know you did mention about budget allocation. The only budget allocation worth monitoring will be the budget to the Commission. There was a budget for the Commission in the 2021 budget and even though I had several discussions with someone in the Commission, who has also confirmed that the budget to the commission is very little and may not be able to support them to achieve a lot. But he also said that he has received assurance that the Commission will be considered in the supplementary budget to be submitted later in the year. This conversation was around February, and I don’t have any information whether that supplementary budget has been submitted or whether the Commission was considered in it. I doubt it because not even in the news has there been a mention of a supplementary budget that has been sent to the National Assembly for consideration. So, something little was allocated to disability rights through the Commission and that’s what it’s using for its operation.

[...] Besides all this, implementation has been very minimal because there have also been so many records of rights violations against persons with disabilities that have gone on with the rest and it isn’t like a lot of the agencies, ministries, and departments are aware of the law and what the rules are in the implementation.

Maybe just to add that the five-year transitional period, which we have less than three years now, there’s still no concrete steps. We’ve not seen any visible measures or policies designed to make existing buildings conform with the provision of the Act. Of course, new buildings, currently I know a few that have come up and have had some consideration for accessibility, but it’s not something that I will say was informed by any policy as a result of the Act and it’s probably something coming out of a lot of advocacy work done by the various organizations of persons with disabilities as to the need of accessibility in public spaces. So yeah, the process is still on. The push is still on for implementation but not so much is being done yet.

[...] There is a link between the act and several existing laws and policies. And even though they are not specifically designed as a result of the Act, their implementation is also helping to realise the Act. So, for instance the commitment of the government at the Global Disability Summit 2018 (GDS18) to do certain things can also be linked to the Act and I can see the government is making some effort in that, especially around accessible facilities and assistive devices. Several steps have been taken on the reproductive health of patients with disabilities, but not so much around employment or political participation. There has been so much discussion about persons with disabilities especially with the enactment of the law. The fact that there are so many conversations going on about disability, and several government officials at different levels, even at the highest level, have made reference to disability, to disability rights, to the act and all of that, gives some glimpse of hope that as the conversations continue, over time we may begin to see some positive impacts, and the law being implemented if the government gets serious about putting their words into action.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

Adeyinka Ige-Onabolu attributed the lack of progress in implementing the Act to multiple factors, including low awareness and capacity, and insufficient budget allocation:
“Since the passage of the disability Act in 2019, nine states in the Federation have enacted disability laws to safeguard the rights of persons with disabilities to varying degrees of implementation. For states that have not enacted it, persons with disabilities continue to experience discrimination, exclusion and the lack of functional services thereby increasing the hardship they face.

The most significant improvement in implementing the law has been seen in areas around accessibility aid such as ramps in public and private institutions. With respect to the other provisions, there has not been significant progress and can be attributed to a number of factors.

[...] A number of factors are responsible for this at the Federal and state level: limited awareness of the law, low knowledge and capacity of designated Ministries, Departments and Agencies, insufficient or no budget allocation, little political will and lack of an effective monitoring system. Most of the studies on access to public infrastructure has been conducted by civil society organisations.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Grace Jerry and Olawunmi Okupe, providing written correspondence for this report, confirmed this, stating:

“Implementation is slow. There is need for sensitization on the provisions of the Act and Advocacy to relevant stakeholders.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

Danlami Umaru Basharu highlighted the lack of policy to guide implementation of the Act:

“A five-year transitional plan is envisaged in the act, but the question is when does it start. Does it start from the passage of the law in 2018 or does it start with the appointment of the Commission? The truth of the matter is that there has been no policy in place to inform companies, buildings and other structural environments what is expected of them.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

2.13. To what extent have persons with disabilities been included in the implementation of the legislation?

When asked if persons with disabilities are included by the State in the process of translating the Act into policy and other interventions, Theophilus Odaudu told us:

“Well, I would say to an extent, because since the Commission was inaugurated most issues around disability are first referred to the Commission, especially if it is coming from the government, and in that process persons with disabilities are usually involved. I also know that through their various programs supported by various funders, OPDs (organisations of
persons with disabilities) in their advocacy work have also established relationships and connections with relevant authorities, and that they’re also being consulted before certain steps are taken.

So, for example, there was a policy that was formulated in 2019 on sexual health rights of persons with disabilities with special focus on women and girls. I am aware that this was designed in full consultation with persons with disabilities and one of the OPDs was involved in the formulation. Also, when the Federal Ministry of Health was trying to do the cost analysis and projecting the allocation for that policy, they also held a session with different disability groups cutting across different sectors to try to get their input.

So, compared to what was there in the past, there is an improvement in consultation of persons with disabilities in designing programs and all of that. What I will still say is that that’s not being done in most cases, or it’s not done as it should be in every program but there is an improvement from what used to be.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

Adeyinka Ige-Onabolu, Grace Jerry and Olawunmi Okupe had a different perspective on inclusion of persons with disabilities in designing and planning interventions:

“Very little inclusion of PWDs is done in designing and planning interventions. In fact, not a lot of interventions have focused on PWDs hence the limited engagement. However even in instances where there have been, the participation of PWDs is limited in terms of their access to the process and participation in the process. The implications of this are that products and services are designed without the input of the key user. There is also the tendency to take persons with disabilities as an homogenous group, thereby the particular needs of the various disabilities may not be catered to. It also continues to reinforce the exclusion and discrimination they face.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

“The percentage of persons with disabilities who are involved in the designing and planning of interventions is very low, and often those selected are those who are willing to bury their will and the welfare of the PWD community in the will of those who selected them. The implication of this is that PWDs are mostly not appropriately captured in targeting, or that the peculiarities of their needs are not taken into consideration thus making the programs almost useless in the end and the goal defeated as a result.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

2.14. What measures have been taken to ensure effective access to justice at all stages of the legal process by children and young persons with disabilities?

A paper based on a doctoral research and published in the online journal ‘Social and Legal Studies’, finds that barriers to access justice for persons with disabilities include accessibility issues in court premises, and poverty and lack of financial assistance for potential litigants:
Abstract
Access to justice through the court system for non-disabled persons is trampled upon every day in Nigeria. One can then imagine the plight of the disabled persons most of whom live in abject poverty and constant discrimination from their respective families, religious congregations, educational sectors, Judicial practices and the ineffectiveness of the government policies, which clearly plummeted people’s confidence in the social justice system as well as the entire political structure.

Against this backdrop, this study presents the findings of the analyses of these discriminations and Injustices, stemming from basic amenities to prevailing cultural vices, religious practices, and lack of commitment on the part of the government. To attend and implement the needs of the disabled persons, which are hindrances to access to justice for the disabled persons in Nigeria.

I. Concept of Access to Justice and Accessibility
Access to justice simply means the common man having the unequivocal right to access the court without obstructions.

The above viewpoint is backed by Section 36 (1) of the 1999 [Constitution] which stipulates ‘that the common man is entitled to be treated justly and get fitting remedy from the court, which is within the ambit of the law and within his constitutional right as a citizen of Nigeria.’

Flowing from the above, it is regrettable to note that neither the Courts premises in Lagos State nor that of Enugu State observes or implement that provisions for the interests of disabled persons. In the same vein, accessibility or availability in this context is making sure that all persons can wholly and successfully dialogue or talk with every one involved in the court or ADR process, without accessibility impediments.

However, at the courts in Lagos and Enugu there were no post barriers on gutters, no ramps or handrails to aid disabled persons in the courts. No instructions or guidelines for the hearing impaired, no recorders, no sign language interpreters, and no provision for the blind either. The writer also noticed that the disabled parties cannot access the offices, rooms, including toilets (is too small) and even the roads is filled with stones, so even if they can afford a mobile wheelchair, the road is unmotorable, hence cannot be used by the disabled. One can argue that the relatives can assist them to access the courts but its about equality, their constitutional right and inclusion which they are entitled to and which is guaranteed in section 36 (i) of the 1999 constitution of the Federal Republic of Nigeria; it is about proper access in the real sense of it and it is about sense of belonging which Maslow pointed out as an essential element a human being needs.

Suffice to say that Section 46 (4) (b) (i) & (ii) “The National Assembly under the 1999 constitution made provisions- (i) “for the rendering of financial assistance to any indigent citizen of Nigeria where his right under this Chapter has been infringed or with a view to enabling him to engage the services of a legal practitioner to prosecute his claim, and (ii) for ensuring that allegations of infringement of such rights are substantial and the requirement or need for financial or legal aid is real.”

Though the above provisions cover indigent citizen, however most disabled persons live in abject poverty in Nigeria, hence accessing the court and basic services like engaging a lawyer or getting financial aid is far-fetched. It is essential to point out that there are more
than one million disabled people in Nigeria and yet it was just in 2017 that they had access to vote.11 […]

8 1999 Constitution of the Federal Republic of Nigeria
9 Jenny Birchall, Overview of social exclusion in Nigeria (K4D 2019).
10 Disability Inclusion: A Repaid Assessment (World bank Group 2020)

(Source, Chinwe Stella Umegbolu, Access to Justice for People with Disability in Nigeria: Therapeutic Day Care Centre as a Case Study (TDCC), Social and Legal Studies, Vol 6(2) 2020, pg 29-34)

Similarly, the media outlet Premium Times reports on the barriers to access to justice for persons with disabilities in Lagos State, including lack of physical access to courts, and courts and lawyers approaching cases on welfare rather than human rights grounds:

“He [Babatunde Fasiu, legal officer for Lagos State office for disability affairs] said for many years, until 2018, lawyers approaching the court in Lagos experienced untold difficulty while moving from the parking lot to the main court premises, until the immediate past Chief Judge of the State, Opeyemi Oke, ordered the creation of a parking lot for them close to the court entrance.

Before the creation of this special parking loft at the high court in Lagos, lawyers and litigants with disabilities had unimaginable difficulties approaching the court.

Another lawyer, Daniel Onwe, who is the National President, Association of Lawyers with Disabilities, said many affected Nigerians fail to report their cases for prosecution "because the system has a different view of the problem from what it ought to be".

"The major challenge is that Nigerian courts and lawyers do not really appreciate disability jurisprudence. They wrongly approach it as a welfare matter to be governed by chapter 2 of the Constitution, rather than as a human rights issue governed by chapter 4 of the Constitution,” Mr Onwe said.

He added that the factors militating against easy access, as well as poverty, have also contributed to the factors militating against the prosecution of defaulters.”

Source: Premium Times, Despite New Law, Nigerians Living With Disabilities Lament Discrimination, 1 November 2019

The Disability Rights Advocacy centre details some of the issues around access to justice for women and girls with disabilities in Nigeria:

“Women and girls with disabilities in Nigeria encounter multiple barriers in accessing justice services due to lack of protective legislation, negative attitude of service providers, inaccessible facilities, poor knowledge of their rights, and poverty.
Most often, the experiences of violence against women and girls with disabilities remain hidden and unreported due to their fear of blame, increased stigma, and low knowledge of reporting channels. In addition, some of them are trapped in cycles of abuse with their caregivers and feel powerless to escape or report.

Therefore, women and girls with disabilities are unable to access justice, their experiences of violence and abuse continue unabated.”

(Source: Disability Rights Advocacy Centre, #HACKSGBV Innovation Challenge, 24 June 2021)

2.15. How many discrimination cases based on disability have been taken through the court?

Several Nigerian disability experts who provided written and oral information to Asylos and ARC Foundation, said that very few discrimination cases based on disability have been taken through court, for reasons that include lack of information and resources for persons with disabilities, and the expense and slow pace of litigation:

“There have been a handful of cases related to discrimination based on disability brought before the Courts in Nigeria yet there has been no landmark decision. The reasons for the very low number of cases; include lack of access to information for PWDs, lack of legal representation, distrust for the legal system, court infrastructure and processes that do not accommodate the needs of persons with disabilities amongst others.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

“Some of the disability cases we are aware of are probably still in court as nothing has been heard about judgement and award of damages. This may be brought on by the slow pace of sittings and incessant adjournment. Often, lack of resources to get legal representation is also a deterrent as well as the fear that the case will drag for too long make people lose interest in litigation.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

“From my findings, only two such discrimination cases have gone through the courts, one in Lagos State and the other in Port Harcourt, Rivers State. But they were both ruled out. They were however taken to court before the passage of the law. But even then, I doubt if the courts would have ruled in favour of them considering how very unaware the courts are about disability issues.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

“So I can speak of one particular case which perhaps is still the only major case […] So late last year, in December to be precise, there was a case of discrimination against a person in a wheelchair at the airport in Abuja. There have been several of such cases, especially by carriers in the aviation sector, where persons with disabilities are ill-treated or even denied boarding. In this case, someone came and was supposed to board but was denied because he was in a wheelchair. Even though he came with an aide that was supposed to fly with
him, the airline company said that they have a policy that they don't fly persons with disabilities at night.

[...] I think he became agitated, and they said he destroyed some of their equipment, so they decided to take him to court for that act. But now the argument from the disability community is that [...] there was also a violation of his rights and that he was discriminated against and that was also a violation of the Discrimination Against Persons with Disabilities Prohibition Act. [...] So there's going to be a countersuit against the airport authority and the airline about the discrimination he suffered and that's one case that could link up several other cases.

[...] But besides this particular case, there have been no known cases in the court yet as a result of the rights being violated, and this could be attributed to several factors. First, it could be because even among persons with disabilities there need to be a lot of awareness about their rights and about what they can do in the face of violations. Not too many persons with disabilities have this knowledge or know what constitute the violation of their right and steps that they can take in seeking redress.

Another factor could be also that litigation can be expensive and of course, a lot of persons with disabilities may not have the resources to want to engage a lawyer or institute a case and pay all the necessary fees and all of that. So that can also discourage a lot of cases from going to court. And this is where the disability commission can step in and fill a lot of the gaps. This it can do by engaging relevant authorities and departments whenever there is a case of rights violation. With this, people may not have to bear the cost of litigation, especially where redress is got through the intervention of the Commission. A third thing could also be that the judicial system here can be very slow and a case can take years to be concluded. For instance, the case I just mentioned which was instituted in January or late December, not much progress has been made. Proper hearings on the case have not begun up to this point, and the judiciary have been on industrial action for the past two months and all of that. So, all these factors make it difficult for such to happen and I know that there have been suggestions around instituting class action or doing public interest litigation around these issues, that is, compounding some of these violations and bringing them forth in a single suit. That's one possibility and that's one thing that I know some groups are looking at, but that's yet to happen.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

2.16. What measures has the State taken to develop social protection programmes for young people with disabilities?

The World Bank reports that social protection schemes in Nigeria do not adequately include persons with disabilities:

“Despite the disproportionate impact of poverty on persons with disabilities in Nigeria, social protection schemes do not adequately include them, and there are no tailored interventions to reduce the impact of poverty. The internal bureaucracies of the organizations of persons with disabilities and a lack of accountability among their leadership further negatively impacts access to social protection”

(Source: World Bank, Disability Inclusion in Nigeria : A Rapid Assessment, 26 June 2020, pg X)
The same report provides an overview of how persons with disabilities experience poverty, and their general lack of access to social protection programmes:

“The experiences of persons with disabilities participating in this study related to social protection are characterized by a lack of access to social security schemes, internal bureaucracies of organizations of persons with disabilities, and corruption of the leadership of organizations of persons with disabilities.

[...] Persons with disabilities experience high levels of poverty, but they do not have access to loans or grants to start businesses, to access education and health, or to augment their incomes. Life is more expensive for a person living with a disability, who might need assistive devices, aids, personal assistance, home accommodations, accessible transport, rehabilitation services, or medical treatments to improve functioning. Access requires financial resources that the average person with a disability or a typical household that includes a member with disability may not have.”

(Source: World Bank, Disability Inclusion in Nigeria: A Rapid Assessment, 26 June 2020, pg 46)

The World Banks further points to how certain social protection policies may in fact be excluding some persons with disabilities:

“Despite the vulnerability of persons with disabilities, there is no evidence of concrete provisions for including them in all of the existing social protection programs in Nigeria, although the National Social Protection Policy included such provisions. In fact, some of the eligibility conditions may not favor most persons with disabilities. For example, COPE’s conditional cash transfer program targets households with children of school-going age that are headed by a woman or that include a member who is elderly, has a disability, has fistula, or is HIV-positive. A woman with a disability in Nigeria may not have children or a head a household and so therefore may not be eligible to be a primary beneficiary. Similarly, women with disabilities are less likely to benefit from the maternal and child health care program. Only the Jigawa State government provides disability grants to its citizens without clear eligibility criteria.”

(Source: World Bank, Disability Inclusion in Nigeria: A Rapid Assessment, 26 June 2020, pg 46)

The same study further identifies three gaps in the programs for social security as they impact the lives of persons with disabilities:

“Gaps in Programming

• Provisions of the National Social Protection Policy that address the needs of persons with disabilities are not being implemented.
• The National Social Protection Policy does not include disability as a cross-cutting issue; only a few provisions mention disability inclusion.
• Monitoring and accountability strategies to ensure the proper implementation of the existing social security schemes are Inadequate.”
According to Save the Children, persons with disabilities are largely excluded from social protection programmes in Nigeria, despite the positive example of Jigawa State:

“While an estimate of over 10 million Nigerians have benefitted from different national social protection interventions, persons with disabilities who are the largest minority and most vulnerable group are excluded among the beneficiaries.” (pg 6)

“Jigawa State is one of the frontline states in Nigeria with visible commitment and support for the inclusion and development of PWDs. The State enacted its Disability Law in 2017 and has in place one of the most comprehensive Social Protection Policies in the country. The state government also made a strong commitment to support economic empowerment of PWDs at the 2018 Global Disability Summit held in the UK.” (pg 11)

2.17. What measures are in place for the inclusion of young people with disabilities in the labour market?

The Discrimination of Persons with Disabilities (Prohibition) Act 2018 spells out the right for persons with disabilities to work on an equal footing with others, and provides for fines in case of non-compliance:

“28. (1) A person with disability has the right to work on an equal basis with others and this includes the right to opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open.

(2) A person who contravenes subsection (1), commits an offence and is liable on conviction to nominal damages of a minimum of N250,000 payable to the affected person with disability.

(3) Where a company contravenes subsection (1) -
   (a) the company commits an offence and is liable to nominal damages of a minimum of NS00,000 payable to the affected person with disability; and
   (b) any principal officer of the company involved in the violation is liable to N50,000 damages payable to the affected person with disability.

29. All employers of labour in public organisations shall, as much as possible, have persons with disabilities constituting at least 5% of their employment.”


The National Employment Policy from 2017 makes special provisions for access to the labour market and the employment of persons with disabilities:

“4.7.4 Employing Persons with Disabilities (PWDs)
People with disabilities in Nigeria are faced with numerous barriers and discrimination in the labour market, including negative attitudes among employers and co-workers, inaccessible work environments, lack of adequate vocational training opportunities and poor public support. Increasing the labour-market participation of persons with disabilities (PWDs) is a fundamental goal of the Nigeria’s employment policy. The National Employment Policy aims to foster an inclusive and respectful workforce culture that promotes the hiring, retention and professional development of people with disabilities by private and public employers of labour on business and non-discriminatory principles.

Objective 1: To ensure the full employability of Nigerians with disability; removing all forms of discrimination against PWDs; provide them access to inclusive educational and vocational training demanded by the labour market to enable them integrate into the country’s workforce.

1.1. Government shall promote the mobility of PWDs by removing architectural barriers in buildings and facilities constructed with government funding.

1.2 To promote employability of PWDs, government shall facilitate the passage of the Nigerians with Disability law.

1.3 Government shall establish vocational rehabilitation centers to develop and enhance the skills and potential of persons with disability.

1.4 Public and private employers of labour shall provide people with disabilities flexibility in the scheduling and other aspects of their work –giving them sufficient time to prepare for work, to travel to and from work, and to deal with health concerns.

Objective 3 [sic]: To use various channels to demonstrate the potential of PWDs, and promote adequate employment for them in the workforce across the country.

3.1 Disability and Special Job Fairs shall be used to promote self-employment strategies and employment potential among PWDs in Nigeria.

3.2 Government shall improve the quality and availability of disability data and statistics in Nigeria, which is essential for the formulation of disability-sensitive development policies and programs across the country. Such a database will also create easy access for potential employers to ensure easy job placement for PWDs.

3.3 Tax of employees with disabilities shall be retained by the organization as an incentive to help in implementing their disability friendly policies and programmes.”


The increase in wage employment in public and private sectors of persons with disabilities is a key indicator to measure the impact of the National Employment Policy:

“5.3 Achievement Indicators and Outcomes of NEP

The following are key indicators that should be used to measure the impact of the National Employment Policy in Nigeria.

[...]

96
Increase wage employment and accommodation of qualified persons with disabilities in public and private sectors”


The National Employment Policy also recognises the difficulties of vulnerable populations, which include persons with disabilities, in accessing the labour market:

“While providing for a greater role for the private sector, and market principles in employment and job creation, it is a well-known paradox that the operation of the open market system often leads to the marginalization of vulnerable sections of the population. These include women, especially, women in the rural and urban informal sectors, the youth, elderly persons, those with disabilities, and the unemployed. The government shall protect and assist those groups through adequate safety net, such as the special compensatory and well targeted programmes envisaged under the National Directorate of Employment.”


According to the U.S. Department of State:

“The government operated vocational training centers in Abuja and Lagos to train indigent persons with disabilities. Individual states also provided facilities to help persons with physical disabilities become self-supporting.”


However, this article describes instances of discrimination that persons with disabilities continued to experience in employment in 2019:

“Nigeria is a signatory to the ILO Convention on the Vocational Rehabilitation and Employment of Disabled Persons21 which makes provision for employment of persons with disabilities without discrimination. Notwithstanding, employers give several reasons for not recruiting people with disabilities: they perceive people with disabilities as less talented and requiring greater supervision, less able to adapt, prone to requesting paid sick leaves, payment of their hospital expenses and compassionate waivers from certain duties.22 Since employers are interested in taking on the most talented and suitable person for a particular job, it is hardly surprising that when they assess a handicapped candidate in the light of their perception of people with disabilities, they tend to take on a non-handicapped person rather than a candidate with disabilities.23

21 Convention No. 159 of 1983.
22 M Christianson, ‘Incapacity and Disability: A Retrospective and Prospective Overview of the Past 25 Years’ (2004) IJ879-896

3. **Data Collation**

3.1. **Does the State collate data on persons with disabilities?**

In February 2021 the Chair of the governing council of the National Commission for Persons with Disabilities stated that the number of persons with disabilities in Nigeria is unknown and likely to be far higher than previous estimates, due to armed conflict and prevalence of violence in the country:

“[..] In response to a question that bothered on the actual number of persons living with disabilities in Nigeria, he said,

“we have been using the figure that was estimated before now, but now, we think it would be wise for us to know our numbers.

“Many years ago, we were estimated to be over thirty-one million Persons living with disabilities in Nigeria and very recently, we were informed that we have been estimated to be about thirty-five million in number.

“But if we want to consider the current happenings in the country, the activities of Boko Haram and those who were victims of communal clashes that are happening across the country as well as victims of accidents, we realise that the number must have risen to about fifty million if not more.

“We are witnessing these cases where more people are being amputated, many people are losing their sight and we have many of our compatriots joining us daily due to the realities around us.

“We have the number rising daily and we do not know who will join our group next.”

(Source: Vanguard, *NCPD numerates members to check insecurity — Board Chair*, 9 February 2021)

The World Bank Rapid Assessment of disability inclusion in Nigeria found that disability-related data was ‘sparse’ and that data collection challenges include low prioritisation, lack of expertise and a lack of understanding of disability as a cross-cutting development issue. The Nigeria Demographic and Health Survey included questions in its disability module based on the Washington Group’s Short Set for the first time in 2018, however the disability prevalence rate was still lower than expected:

“Executive Summary

[...] Availability of Data

Disability-related data are sparse in Nigeria. Data collection challenges include the government’s low prioritization of collecting disability-disaggregated data and the lack of expertise in the collection process. Utilizing a disability/impairment approach known to yield low results (NPC 2009), the 2006 Nigerian population census reported a disability prevalence rate of 2.3 percent. In 2011, a national baseline survey conducted by the Federal Ministry of Women Affairs and Social Development2 documented a similar rate: 3.2 percent (FMWASD 2011).

Nigeria’s General Household Survey Panel 2010–11 also documents a 2 percent disability prevalence rate (Leonard Cheshire 2018). The panel used the Washington Group on Disability Statistics “Short Set,”3 a set of questions based on the framework of the World Health Organization’s International Classification of Functioning, Disability, and Health and commonly referred to as the Washington Questions. The low rates may be connected to unreported alterations to survey instruments, such as screener or introductory statements,
cultural barriers around mentioning functional difficulties, and differences in the training of interviewers (Leonard Cheshire 2018). The 2012–13 edition of the same survey has not yet been analyzed with a disability lens, and the survey’s third wave (2015–16) only collected data on vision difficulties.

In 2018, for the first time, the Nigeria Demographic and Health Survey included questions in its disability module that were based on the Washington Group’s Short Set. The survey’s estimated disability prevalence rate of around 8 percent is still significantly lower than the World Health Organization’s 2011 estimate of around 15 percent of the global population (WHO and World Bank 2011). (pg IX)

[...] 2. In August 2019, the Federal Ministry of Women Affairs and Social Development was split to Federal Ministry of Women Affairs and Social Development was moved to a newly created Federal Ministry of Humanitarian Affairs, Disaster Management and Social Development. 3. The Washington Group “Short Set” includes questions that are designed to identify persons with disabilities in a census or survey format, for example, if they have difficulty performing basic universal activities such as walking, seeing, hearing, cognition, self-care, and communication. See http://www.washingtongroup-disability.com/washington-group-question-sets/short-set-of-disability-questions/.

Challenges Related to the Collection of Disability-related Data

The problems associated with collecting disability related data stem from a lack of understanding of disabilities as a cross-cutting development issue that requires attention. Some stakeholders view and portray disabilities as a complex issue, which may discourage the collection of data. The collection of disability disaggregated data is a low priority among stakeholders in the major sectors of the economy, such as education, health, and transportation. [...] The capacity for conducting disability-related research in Nigeria is limited. There is a lack of expertise for collecting disability data, which also makes it very difficult to gather reliable data. In addition, persons with disabilities and their organizations are seldom consulted by researchers.” (pg 15)

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg IX-15)

In March 2020 the Senior Special Assistant to the President on Disability Matters announced the creation of a Disability Data Bank for Nigeria, as reported by the Basic Registry and Information System in Nigeria (BRISIN) and media sources. The data bank would be the first in Nigeria, created in collaboration with BRISIN, and would allow for planning and management of services for persons living with disabilities.

“Dr Samuel Ankeli, Senior Special Assistant to the President on Disability Matters, is collaborating with the Basic Registry and Information System in Nigeria (BRISIN), to create a disability data bank for the country.

Ankeli, while signing a Memorandum of Understanding (MoU) with the Head, BRISIN implementation, Dr Anthony Uwa, on Thursday in Abuja, said the data bank would be the first in the history of Nigeria.

[...] The SSA to the President, said: “we (Nigerians) have all failed in our responsibility towards people living with disabilities.”
The Head of BRISIN implementation, Uwa, in his remarks, said the MoU was the foundation that would move the country forward and ensure adequate and accurate data system in the country.

He said all PLWD would be captured in the project as the capturing would begin from the ward to the local government, state and then the federal level.

He said with adequate cooperation and support of the government, Nigerians in the diaspora, well-wishers and other well-meaning and patriotic Nigerians, the data bank project could be completed within a year. (NAN)"

(Source: BRISIN International Foundation, FG moves to create first Disability Data Bank in Nigeria, 30 March 2020)

“Dr Samuel Ankeli, Senior Special Assistant to the President on Disability Matters, while commenting on the establishment of a data bank on the People Living with Disability (PLWD) said, this is the first time in the history of this country, a concrete action is taken by any government toward building a system for data governance, that would give room for accurate planning and management of (PLWD).

The Presidential aide said his office will coordinate all other stakeholders to join resources in building this centralised data bank for good planning and management of these less privileged members that are difficult to manage as at now.

The Presidential aide, however, confirmed that it had been difficult to get accurate data to plan for PLWD.

‘We don’t know how many people living with disability, most time, we guess and rely on foreign organisations to give us figures about our people. This has made life difficult not only for people living with disability but for people in governance. We have some baseline surveys that are not realistic, that is why we decided to work with BRISIN as quickly as possible and get it functional. So that we can have a system on ground that will constantly and continuously give us information so that when we process it, we can use the data to apply for planning and policy. We are talking about Bill for disability; we can’t come up with concrete evidence to say this is the number of people living with disability in the country.’

The Senior Special Assistant to Mr President, however, called for support from well meaning and patriotic Nigerians, Oil and Gas companies, Communication and ICT companies, Banks and organized private sectors, donors and international organization, State Governors, Local government Chairmen, and all the stakeholders on the issues with (PLWD, IDP and Less privileged) in Nigeria."

(Source: BRISIN - Basic Registry and Information System in Nigeria, Stop to data speculation on people living with disability – Presidency, BRISIN news, 13 March 2020)

A pilot scheme was announced in August 2020, although it was reported that no Federal Government budget was allocated for building of the data bank. Concerns were raised about the challenges of implementation, including because the data bank will include persons living with disability, less privileged and Internally Displaced Persons (IDPs):

“Dr Samuel Ankele, Senior Special Adviser to President Muhammad Buhari on Disability Matters, says the Nigeria Disability Data Bank has taken off with FCT as its pilot scheme.
Ankeli told newsmen on Tuesday in Abuja, that the implementation would ensure inclusiveness of People Living with Disabilities (PLWDs) in the social development of the country.

According to him, the introduction of the Basic Registry and Information System in Nigeria (BRISIN) is the powering instrument to build the disability data bank for PLWDs, less privileged and Internally Displaced Persons (IDPs).

He said that it was high time everyone living with disability was known and identified, adding that he would use the second term of his appointment to achieve this.

[...] On funding, he said there was presently no Federal Government budget allocation for building of the data bank.

[...] He said the Central Bank of Nigeria (CBN) had been requested to provide seed money for takeoff of the project.

Ankeli urged local and state governments, fund raising agencies, international donors, banks and private companies, Nigerians in the Diaspora and well-wishers to support the implementation of the data bank.

He said a BRISIN Information Journal would be made available that would publish activities of the data bank including donations and expenditure of the project. (NAN)”

(Source: Abuja City Journal, Nigeria disability data bank takes off in FCT, 12 August 2020)

“Hope of better days may be coming for persons living with disabilities (PLWD) in Nigeria as President Muhammadu Buhari last week approved the establishment of a databank for them. According to the Senior Special Assistant to the President on Disability Matters, Dr Samuel Ankeli, who disclosed the development, the databank will capture personal information on all persons living with disability, less privileged and Internally Displaced Persons (IDPs).

According to current estimates, the population of Nigerians living with disabilities is about 27 million, while the IDPs number about 1.5 million and the less privileged also in their tens of millions.

A database for Nigerians living with disabilities is expected to provide a framework for addressing the numerous challenges they face on a daily basis. These challenges range from the emotional trauma occasioned by their circumstances to the actual handicaps of their physical condition, which denies them full capacity to live out their lives as they would have desired, and the social dimension of abandonment that is usually their lot. Yet these are Nigerians who in many instances are victims in one state of disability or the other, for no fault of theirs.

The initiative of the disability data bank is a progression of the long-drawn process of providing socio-economic inclusion for the country’s disabled. [...] Meanwhile, as a result of the condition of the disabled in Nigeria, many of them face a number of challenges as well as human rights abuses such as stigmatisation, discrimination, violence, and diminished access to healthcare, housing and education.
[...] With the approval of the establishment of the Disability Data bank lies the more onerous challenge of implementation. Given the over 20 years of advocacy that yielded the present dividends, the implementation is not expected to be without challenges. One of these remains the administrative framework for the implementation.

The creation of a Disability Commission as a separate agency for the exercise is seen widely as unnecessary as most of the reforms in the management of the affairs of the disabled can be marshalled by several of the existing MDAs, which can have their statutory mandates reviewed to accommodate the disabled. A typical instance is the current issue of date profiling of the disabled, which can and should be handled by the National Population Commission (NPC).

Even the lumping together in the data banking exercise of the disabled and IDP with the less privileged constitute a recipe for confusion in delineation of who is who by the Commission. The IDPs are victims of in-country hostilities and are expected to go back to their respective traditional bases whenever circumstances permit. They all therefore, do not qualify in the strict sense of the letter as disabled persons. The concern of the data bank with the less privileged stretches the incongruity of the exercise to the hyperbole, as with the status of the country as the poverty capital of the world, over 60% of Nigerians fall into this category.

Hence for the purpose of making a success out of the disability data banking exercise, it should be confined to the essential provisions for the truly disabled, as designated by the United Nations. [...] 

(Source: Daily Trust, Databank For Nigeria’s PLWD, 20 August 2020)

Theophilus Odaudu welcomed the initiative of the disability data bank but is not aware of any concrete steps towards its implementation:

“So, the issue around data is a serious one for Nigeria, especially for the disability community. If you do ask persons with disabilities or any group at all to talk about persons with disabilities you will hear different figures about the population of persons with disabilities. While some will tell you 19 million, some will tell you 25. Some will tell you 27. You’ll get 30 million. So there’s no particular figure. People project based on whatever consideration they are doing. And looking at the Nigerian population then try to get the 15% following the WHO standard and all of that. So that’s what usually happens. And this is largely because the data collection process is not usually disaggregated by disability.

The last census, for example, was in 2006. I did remember participating in that particular census. And of course, while you can indicate that you are a person with disability, the way the questions are structured also make a lot of persons with disabilities indicate that they are not with a disability. So, it has to do with the methodology used in collecting data across the board as a lot of these do not make it easy for persons to be able to identify areas of their disability or for those analysing the data to know that this is referring to a person with disability.

There have been a lot of talks about adopting the Washington Group Methodology in data collection and that’s still on. We’re yet to see that happening. Recently, the Disability Rights Fund has provided support to one of its grantees in the country to work around COVID-19 vaccines distribution and trying to get the government to prioritise persons with disability. Whether you have data that’s collected of persons that have been vaccinated or those who
want to be vaccinated there is no provision for disability-related data in it. And then it, therefore, means the government will also, for instance, not have any data to find out how well persons with disabilities are responding to the vaccine because that information was not provided for. So it's a gap in our data collection system, the data gathering methodology in the country and that's largely responsible for the data gap.

There have been talks around disability data bank. I've heard people talk about it. I've heard even from the disability commission saying issues around data we prioritise. But I am also not aware of any concrete steps yet even as a part of the disability community. I don't know of any concrete steps that have been taken to actualise that data bank. It's a good and laudable initiative if well-followed but we are yet to begin to implement that and that level of data collection is probably still at the planning stage. Well, it's not a popular program yet in the disability community.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

Regarding funding of the data bank, Grace Jerry and Olawunmi Okupe said:

“A lot of discussions are going on between development partners to see how funds can be sourced to boost the activities of the NIDDB who is tasked with the responsibility of gathering data of PWDs to aid organizations and government in their inclusion works.

[...] The economic downturn resulting from the pandemic has stunted resources that would have been allocated for data gathering and other areas of interventions.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

3.2. Is data collated disaggregated by sex, age, type of disability, ethnic origin etc.? 

The World Bank report found that most national surveys and other data are not disaggregated by disability. However, the Washington Group questions (a short set of questions designed to identify persons with disabilities) have been used in the 2010-11 General Household Survey Panel and the 2018 Nigeria Demographic and Health Survey (NDHS):

“Most national surveys and surveillance data are not disaggregated by disability in Nigeria. In light of the above, the Washington Group questions have been recommended for reliable and comparable disability data in censuses (Mont 2007). The questions focus on six basic core activities designed to capture most adults with disabilities, except individuals with mental disabilities (Mont 2007). To the knowledge of the authors, the only two available surveys in Nigeria that have used the Washington Group questions in Nigeria are the General Household Survey Panel 2010–11 and, more recently, the 2018 Nigeria Demographic and Health Survey (NDHS). The General Household Survey Panel 2010–11 estimates a disability prevalence of 2 percent (Leonard Cheshire 2018). The 2012–13 edition of the same survey has yet to be analyzed with a disability lens, while the third wave of the survey (2015–16) only collected data on the visually impaired.

The popular Demographic and Health Survey is widely utilized for national planning and is useful for international comparisons. In 2018, the Nigeria Demographic and Health Survey (NDHS) included for the first time a disability module that is based on the Washington Group
on Disability Statistics questions, which are themselves based on the framework of the World Health Organization’s International Classification of Functioning, Disability, and Health. The questions address six core functional domains: seeing, hearing, communication, cognition, walking, and self-care. According to the 2018 survey data for Nigeria, an estimated 7 percent of household members age 5 and older (and 9 percent of those age 60 and older) have some level of difficulty in at least one functional domain; and 1 percent either have a lot of difficulty or cannot function at all in at least one domain (see figure 4.1; also NPC and ICF 2019: 458).

[...] Data are crucial to development—its planning, implementation, monitoring, and evaluation. The lack of available disability data makes it difficult to develop policies and interventions for Nigeria’s development agenda that address the needs and concerns of persons with disabilities. It is therefore important that data from future censuses conducted in Nigeria be disaggregated by disability. National surveys and surveillance data should also collect disability-disaggregated data to ensure that the on-the-ground reality regarding disability is reflected.

[...] 5. The Washington Group Short Set are questions designed to identify people with a disability (in a census or survey format). People are asked if they have difficulty performing basic universal activities: walking, seeing, hearing, cognition, self-care, and communication. http://www.washingtongroup-disability.com/washington-group-question-sets/ short-set-of-disability-questions/.


The World Bank report stated that only a few of the international and national organisations working on disability-related issues in Nigeria disaggregate data by disability using the Washington Group questions:

“Disability-related services and actors
A wide array of disability-related services and actors operate in Nigeria. Findings from the online assessment of 43 organizations working on disability-related issues (international and national NGOs) have relevant organizational strategies. However, this does not greatly influence their programs—many have insufficient or non-existent budget allocations for disability inclusion.

Only a few of the organizations disaggregate data by disability using the Washington Group questions, which leaves in doubt their level of effectiveness at addressing the needs of persons with disabilities in their programs. Such gaps in programming may partly contribute to the current dearth of disability data for the country.”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, p. 53-54)

Theophilus Odaudu shared concerns that the national census, that was set to include disaggregated Washington Group’ questions, has been put on hold due to the pandemic:
“There have been a lot of talks about adopting the Washington Group Methodology in data collection and that’s still on..

[...] for data, like I said, we perhaps are waiting for the national census which was being planned for, but that seems to be on hold now due to the pandemic and more because of the level of insecurity at the moment in the country. So, we are yet to know exactly how persons with disabilities will be included in that particular program. But that was a major point of data collection - the population census where we hope to see the involvement of disaggregated data using The Washington Group questions; and it will redefine how data are gathered in the country. I do not know exactly what will happen.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

Similarly, Grace Jerry and Olawunmi Okupe highlighted the lack of disaggregated data:

“There is a data gap because most of the questions developed to gather data on disability are not constructed in such a manner that it reflects disability types, breaking it into clusters and descriptions that will enable respondents know where they fall particularly if at all. This is a major gap that needs to be addressed locally through availability of funds”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

3.3. Is data collated on a nation-wide basis?

Disability-related data, although limited in scope and quality, is collated on a national level, including through the population census and the Nigeria Demographic and Health Survey (NDHS):

“The 2006 Nigeria population census (NPC 2009) indicated a disability prevalence of 2.3 percent. This figure has been challenged as it is significantly below the global average. The definition of disability in the 2006 census—“disability is the inability of the respondent to perform up to normal natural expectation”—was somewhat general and vague. The census also identified six categories—seeing, hearing, speaking, mobility, mental, and other—with definitions better suited for capturing severe impairments. The prevalence rate therefore falls within the limit of severe disability documented by the World Report on Disability (WHO and World Bank 2011).

[...] A national baseline survey by the Federal Ministry of Women Affairs and Social Development (FMWASD 2011) documented a disability prevalence of 3.2 percent, which was higher than that of the 2006 population census but lower than expected. There are patchy reports regarding the prevalence of disabilities that focus on certain disciplines or areas of interest. For example, a survey report by the Federal Ministry of Youth Development documented a disability prevalence of 0.26 percent (167,549) among the total youth population of 64,038,008 who were surveyed (FMYD 2012). The definition of disability used for that survey is not clear, but the categories of disability in the report include visual impairment, poliomyelitis, and partial paralysis. There were no data for Zamfara State or Federal Capital Territory.
The popular Demographic and Health Survey is widely utilized for national planning and is useful for international comparisons. In 2018, the Nigeria Demographic and Health Survey (NDHS) included for the first time a disability module that is based on the Washington Group on Disability Statistics questions, which are themselves based on the framework of the World Health Organization’s International Classification of Functioning, Disability, and Health. The questions address six core functional domains: seeing, hearing, communication, cognition, walking, and self-care. According to the 2018 survey data for Nigeria, an estimated 7 percent of household members age 5 and older (and 9 percent of those age 60 and older) have some level of difficulty in at least one functional domain; and 1 percent either have a lot of difficulty or cannot function at all in at least one domain (see figure 4.1; also NPC and ICF 2019: 458).

The 2018 NDHS data suggest that disability rates are significantly higher for those over the age of 60; one-third of this population reportedly has some difficulty in at least one functional domain. While only 1 percent of household members under the age of 40 have a lot of difficulty or cannot function at all in at least one domain, 9 percent of those age 60 and above have a lot of difficulty or cannot function at all in at least one domain (figure 4.2). The data also reveal that 30 percent of widowed women and 37 percent of widowed men have difficulty seeing, and that 31 percent of widowed women and 35 percent of widowed men have some difficulty in at least one domain (NPC and ICF 2019: 458).


In March 2021 the Independent National Electoral Commission (INEC) acknowledged that the lack of disaggregated data at a national level was largely responsible for the failure to fully include persons with disabilities in the electoral process, and announced a national strategy to undertake data collection across Nigeria’s 36 states:

“The Independent National Electoral Commission (INEC) has said that lack of dis-aggregated data of People Living with Disabilities (PWDs) in the country, was largely responsible for the commission’s inability to fully capture them in all electoral processes in the country.

The National Commissioner and Chairman Outreach and Partnership Committee (OPC), INEC, Dr. Adekunle Ogunmola said this on Tuesday in Abuja at the public presentation of the Data for Inclusion of PWDs, organized by the Inclusive Friends Association (IFA).

He commended the IFA, and other organizations that deals with issues relating to PWD’s welfare, for their efforts towards gathering of some data of PWDs in some states.

According to him, INEC is building on the effort of the IFA to organize a national strategy in both Northern and Southern Zones, with other PWDs as well as Disability Desk Officers across the 36 states and the FCT to strategies on ways to undertake general data collection across the country.

[...] Speaking earlier, the Executive Director of the IFA, Ms Grace Jerry, said that IFA and its partners deployed a combination of manual and electronic methodology to collect the disaggregated data of PWDs across 13 states.

She said that the manual methodology was deployed through a specialized checklist, where the data of PWDs was collected by LGA supervisors and entered carefully into the checklist to aggregate the disability status, location, polling unit details, type of disabilities.”
A later media source states that the Independent National Electoral Commission (INEC) has asked persons with disabilities to 'indicate their disability' when registering to vote:

“In our effort to serve all Nigerians better, the commission has requested registrants to indicate their disability (if any).”

He explained that the essence of this will enable INEC to efficiently deploy assistive voting devices such as Braille ballot guide and magnifying glasses for persons with special needs at polling units on election day.

He added: “We have data for 6,558 registrants who have clearly indicated their type of disability.”

(Source: This Day, INEC pledges to use technology to deepen democracy, 14 July 2021)

3.4. Is the number and composition of persons with disabilities collated in various settings (e.g. various Institutions, within education facilities, health care centres, urban/rural facilities, detention centres etc)?

Some data on the number of children with disabilities in Nigerian schools is captured, but data collection is considered inadequate:

“Currently, information on the number of children with disabilities in Nigerian schools is limited to Education Management Information System data from states supported by the Education Sector Support Programme in Nigeria (ESSPIN) (Humphreys and Crawfurd 2015). The report identifies disability as one of the cultural barriers to education and acknowledges the lack of education provided to learners with disabilities in Nigeria’s basic education system. Enrolment rates among children with disabilities in mainstream schools has been increasing in states that have been implementing the recent ESSPIN interventions, such as Jigawa, Lagos, and Kaduna, but the retention rate, their needs, and their experiences at school are not known (ESSPIN 2013).”


[...] National Policy on Education. This national-level policy emphasizes inclusive education as a way of ensuring equity in education as enshrined in the Universal Basic Education Act 2004 (Asiwe and Omiegbie 2014). It asserts that the education of children with disabilities shall be free at all levels and makes provisions for all needed educational support, training, and retraining of teachers, learning materials, and assistive devices and technologies. However, the policy is weak in terms of early detection and identification mechanisms, the monitoring and evaluation system, the implementation structure, funding, and data collection. And it is only being partially implemented as is (Asiwe and Omiegbie 2014; Eleweke, Agboola, and Guteng 2015). Much needs to be done to ensure the full
implementation of the policy, including drafting a plan that has disability-specific indicators for monitoring (FRN 2004b).” (pg 66)


(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg 30 / 66)

“Some countries attempt to identify children with a broader range of disabilities. For example, in Nigeria children are listed as having a vision disability if they are either blind or visually impaired. This identifies more children with disabilities, but the degree of disability is not recorded, so children with mild versus severe impairments cannot be identified.”


Limited data is, for example, collected by disability desks within the Office of the Head of the Civil Service of the Federation (OHCSF):

“The Office of the Head of the Civil Service of the Federation (OHCSF) has the unique mandate of providing leadership, management, and capacity development to all civil servants for effective, efficient, and accountable public service delivery. OHCSF interfaces with other MDAs on issues regarding civil service regulation, including the welfare of employees.

In 2003, OHCSF became the first government organ in Nigeria to establish a disability desk. It is located in the Occupational Health, Safety and Environment Division under the Employee Relations and Welfare Department. The division’s main function is to provide guidelines on health, safety, and the environment. The disability desk was established to implement disability-inclusive practices in OHCSF with the main objective of coordinating the affairs of all federal civil servants with disabilities and to improve their working conditions.

[...] The disability desk collates data of civil service with disabilities; ensures that the office environment in all the MDAs are safe for and accessible to persons with disabilities; receives and addresses complaints about disability inclusion in government policies that are staff-related, and attends to issues around reasonable accommodations for civil servants with disabilities.”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg 50)

3.5. Is there evidence that disability inclusive data informs decision making, policy and legislative development, implementation, and evaluation?

The World Bank reports that disability-related data are sparse and unreliable, and that the collection of disability-disaggregated data for planning is not prioritised:

“Disability Data in Nigeria
Disability data are crucial to social inclusion and development of persons with disabilities. Data allow for an objective diagnosis of disparities in outcomes between people with and without functional difficulties. They are indispensable for the monitoring of progress (or regress) and the impact evaluation of policies and interventions over time. The study explored and documented the situation of disability data in Nigeria the following sections describe.

Availability of Disability-related Data
Disability-related data in Nigeria are sparse. The collection of disability-disaggregated data to inform planning for persons with disabilities in the development context does not appear to be a priority in the country. There are a few unreliable statistics on the prevalence of disabilities—the only type of data that most consider. There are also some disability-specific data, particularly regarding access to basic services and vulnerability to certain social issues among persons with disabilities. Usually, these kinds of data are not properly disseminated to the general population and are restricted to a specific audience. Data in national surveys are seldom disaggregated by disability. For national planning, such data are more relevant than standalone or disability-specific data, which are rarely of interest to the various stakeholders, including policy makers. (pg 9)

5. Conclusions and Key Recommendations
The findings of this rapid social assessment of the socioeconomic status of persons with disabilities in Nigeria indicate that their access to basic services is wholly inadequate and that deeply ingrained and wide-spread attitudinal barriers across the country significantly contribute to their exclusion from all sectors of the economy. Policies and legal frameworks to promote and protect the rights of persons with disabilities are either non-existent or poorly implemented. The current institutional landscape is poorly adapted to disability-inclusive development. To advance the status of persons with disabilities in the country, substantial improvements are needed in the areas of disability advocacy, disability data, capacity development, pro- vision of assistive devices and technology, and stigma reduction. (pg 90)

Disability Data Generation
Disability data generation is the bedrock of planning and design for disability inclusion. The dearth of disability data in Nigeria is worrisome. Advocacy for collection of disability-disaggregated data that targets relevant stakeholders, such as the Nigeria Bureau of Statistics and National Population Commission, should be intensified. Capacity development for disability data collection using the Washington Group questions is crucial and should be prioritized. Advocacy is needed to encourage the collection of disability-disaggregated data in the Health Management Information System and Education Management Information System and in all national surveys and surveillance operations.

Strategic frameworks and implementation guidelines for policies should also include a mix of disability-inclusive indicators and disability-specific indicators. Development partners should require proposed grantees to demonstrate how their monitoring frameworks will include disability indicators. They should mandate that grantees and implementing partners report on disability issues.” (pg 92-93)


Grace Jerry and Olawunmi Okupe said:
“The data gap will create loopholes in targeting, design and implementation of programs as they will not be painstakingly tailored to meet the needs of all disability types.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

Danlami Umaru Basharu highlighted the implications of the lack of data for planning purposes:

“It is true that absence of data has been a great stumbling block in planning anything for persons with disabilities. We have figures ranging from 19 million to about 31 million which is not good enough for planning purposes. The disability community has yet to come together to advocate properly for effective data.

The absence of data is in fact very distressing for persons with disabilities. We do not know how many we are. It is important to advocate seriously so that we get the data gap cleared.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

The Count Disability Nigeria Coalition highlights the importance of disability-disaggregated data for formulating and implementing legal and policy frameworks etc., saying that the ongoing lack of data is increasing the exclusion and vulnerability of persons with disabilities:

“Persons with disabilities (PWDs) have lamented that the absence of disability-disaggregated population data is worsening their exclusion and vulnerability in the country.

A coalition of disability rights groups, under the aegis of Count Disability Nigeria Coalition (CDNC), stated this while briefing newsmen in Abuja on the significance of disability disaggregated statistics in Nigeria.

The convener of CDNC, Irene Patrick-Ogbogu, said World Bank/World Health Organisation estimated in 2018 that persons with disabilities accounted for 29 million out of the 200 million Nigerian population.

She, however, described the PWDs estimates in Nigeria as a “mere abstract proclamation” because it lacked concrete data to provide real usable evidence.

She noted that the collection of appropriate disability-disaggregated data would serve as reliable evidence and guide for the government in formulating and implementing relevant legal and policy frameworks, programmes, services, and products.

Irene, therefore, urged the federal government to fulfil its commitment to the 2018 Global Disability Summit (GDS) held in the UK.

The summit, among others, charged participants to collect and use reliable and comparable data on disability as well as establish a fund to support the development of a national disability database.”

(Source: Daily Trust, Lack Of Data Worsening Persons With Disabilities’ Plight, 12 August 2021)
3.6. Do persons with disabilities participate in the collation of data?

The World Bank reported that persons with disabilities and their organizations are seldom consulted by researchers and, among its recommendations for improving data collection, suggests ensuring the active participation of persons with disabilities:

“The capacity for conducting disability-related research in Nigeria is limited. There is a lack of expertise for collecting disability data, which also makes it very difficult to gather reliable data. In addition, persons with disabilities and their organizations are seldom consulted by researchers.

[...] Recommendations for Improving Data Collection

▪ Raise awareness among stakeholders, including decision makers and policy makers, and advocate for disability to be viewed as a development issue that should be mainstreamed into all sectors of the economy.

▪ Ensure the active participation of persons with disabilities and their organizations in the design of data collection instruments, capacity building, data collection, monitoring, and leveraging the Washington Group methodology.

▪ Develop the capacity of relevant stakeholders for disability data collection and disaggregation, including defining the term disability for research purposes.

▪ Analyze the dataset from the first and second waves of Nigeria’s General Household Survey through a disability lens.”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg 15-16)

In August 2021, it was announced that a group of persons with disabilities will collect data from 50,000 persons with disabilities across the country:

“The National Commission for Persons with Disabilities has embarked on a training exercise to collate data of 50,000 Persons With Disabilities (PWD).

According to the Executive Secretary of the commission, James Lalu, the intervention is an empowerment programme to enable members of the disability community to have a means of livelihood following the effect of the COVID-19 pandemic.

He stated that the exercise would collect data of 1,000 PWDs from each state across the federation and appealed to its officials to make the selection process free from interference.

(Source: Daily Trust, Disability commission to collect data of 50,000 PWDs, 9 August 2021)

3.7. Does data collated include instances of matters such as exploitation, domestic violence, community violence, trafficking etc. affecting persons with disabilities?

The World Bank reports that while persons with disabilities are known to be affected by gender-based violence and community violence, data is not available:

“While there are more available data on the overall prevalence of gender-based violence in Nigeria (DHS, 2018), there is scant information and data on the prevalence of GBV against women living with disabilities. This is an issue that should be further looked into as anecdotal information suggests that the prevalence is high. […] (pg 21)
Displacement
The Boko Haram insurgency in North East Nigeria and attacks by herdsmen in the north and south have displaced many, including persons with disabilities. Further, conflict and humanitarian contexts are known to result in impairments. A recent review of disability inclusion in the humanitarian response in North East (CBM International and JONAPWD 2019) reveals that the efforts reported by four selected actors toward disability inclusion were inadequately systematic to have a positive impact on beneficiaries with disabilities. Disability data were not available, services and programs were not accessible to persons with disabilities, and beneficiaries with disabilities did not actively participate in making decisions that affect their lives in the camps. Identified reasons for this include a disability-inclusion capacity gap among humanitarian actors, the absence of an available coordination platform for disability inclusion, the low prioritization of disability inclusion in the face of a complex humanitarian environment, the adoption of a charity approach, and the lack of a budget allocation for disability inclusion.” (pg 25)


4. State discrimination and availability of protection

State perpetrated discrimination

This section should be read in conjunction with section 5. Access to services and support and section 8. Institutionalisation.

4.1. Are persons/children and young people with disabilities, subject to discrimination, exclusion, humiliation, violence or other actions by the State authorities?

The report from Grassroots Researchers Association finds that Government agencies fail to uphold the rights of persons with disabilities alongside evidence of discrimination in housing, education, employment and transport and a lack of support from government agencies:

“Executive Summary [...] According to our findings physically-challenged people in North-Eastern Nigeria face discrimination in housing, education, employment, and in access to public transportation. Their needs and concerns are rarely taken into consideration by the state, and they often have no options, choices or control over their lives. Their rights are not systematically upheld. The government does not uphold the rights of PWDs within state institutions, and does not guarantee that these rights are respected throughout Nigerian society. Harsh economic realities prevail, and there is little support outside of benevolent family caregivers for many forms of disabilities. As a result, PWDs are often predisposed to dependence on street begging, which further endangers their lives.

[...] Our findings indicated that the support PWDs need from government agencies and development partners is either significantly lacking or grossly insufficient. Despite the presence of several non-governmental organizations intervening in North- Eastern Nigeria, They have not made the plight of PWDs a priority of their work. There has been little effort by disability-rights NGOs and other institutions to work with PWDs to develop programs that
effectively respond to their needs and concerns. The Ministry of Women Affairs and Social Development, which is responsible for special education, social welfare and health services, has failed to develop appropriate programs for the protection of PWDs’ rights. Instead, the Ministry has taken a charity/welfare approach to persons with disabilities. Although Nigeria has signed the Convention on the Rights of Persons with Disabilities, among other relevant global and regional efforts relating to PWDs, to date it has failed to implement these commitments. Until it does so, the fate and condition of PWDs in Northern Nigeria and the country as a whole will remain a sorry tale to tell in the face of extreme rise in poverty levels.”

(Source: Grassroots Researchers Association, Challenges of Persons with Disabilities in North-Eastern Nigeria, October 2018, p.5-38)

Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’ gave examples of different forms of state discrimination:

“First and foremost is the design of the institutions, they never consider a person living with a disability at all. It's not part of their plan. So, because it was not part of their plan, if they decide to include these people, then automatically it seems so difficult. I shared an example about a disabled person who was selling his newspaper, and, in the end, he was detained, and there are examples of people with disabilities who are thought to be witches and so they are abandoned. I know of a woman who gave birth to someone who had a physical disability, and people said the child was going to destroy the family, and they went to throw the child away. And the government doesn’t take any actions to ensure that people in these situations are rehabilitated and then given an opportunity to live their life. And there's this notion that armed groups use people with disability as informants. Maybe there were a few cases where this happened and then the government started treating all disabled children and people on the streets as if they were informants.

The government will tell you, "No, we're not discriminating" but, in reality, they are doing it. For example, children with a hearing disability. Will they be in a ‘normal’ school with children and understand? Of course not. But is there sufficient provision in all the schools that were built for people with hearing disability? No. What about visual disability? No. So if these people come out of school because they are not getting what they need, are you not discriminating against them? In the hospital, the person with a disability who is in a wheelchair is supposed to go upstairs to see a doctor. I know of a disabled person who was supposed to write an exam and he was unable to climb the staircase to the examination hall and he was waiting downstairs until the exam finished. Is that not discrimination? So, this is the way I look at it, when you don’t make access or provision for people with disability to do the things that they want, its discrimination, in my definition.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Danlami Umaru Basharu said that discrimination and other abuses by state authorities are a daily occurrence:

“Discrimination, exclusion, humiliation, violence or other abuses are daily occurrences on persons with disabilities, even by state authorities. We note the brutalization of a young lawyer during the Covid period, who was brutalized by the police. He was out trying to
distribute palliatives to colleagues and was accosted by the police. It does not matter whether you are a person with a disability, the authorities will set upon you.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

The anonymous source Asylos and ARC interviewed, who is a disability activist, lawyer and published author, said that state actors fail to protect children and young people with disabilities from discrimination and violent actions, and carry out ‘violations’ themselves:

“So young persons with disabilities in Nigeria are highly discriminated against. They are excluded, they suffer humiliation, and there are a whole lot of violent attacks against them, and other actions that bring untold hardship. And the worst part of it is that there seems to be a conspiracy to punish these children. Because even the state actors are quiet. Nobody is trying to save those kids. The English legal system - the common law that we practice, the Islamic law, the traditional religion and Christianity seems to have conspired against the best interest of the child. That includes the state actors. Because the state actors should be there protecting the interest of the child. And sometimes, those violations are carried out by state actors themselves. Or they keep quiet. They see this happens, but nobody feels obligated to intervene. I know a child is always a child. They can't help themselves. They are vulnerable. So, they are subjected to all manners of discrimination, all manners of violence, all manners of attacks, without any remedy.”

He also said that there is a lack of political will and public awareness about children’s rights and the protection of children:

“[T]here is no interest, there is no political will to promote the rights of a child. Nigeria signed up to the United Nations Convention on the Right of a Child. But back home, is that practiced? The answer is no. Children themselves are not even aware they have a right. Parents of the children themselves, they do not even know children have rights. Only the few elites. The government does not care about informing the society about the rights of a child. The government doesn’t care about implementing the policies that are meant to protect children. Therefore, when you talk about information or a legal framework on the rights of a child, it only exists in the heads of few educated people like me. But, in reality, it’s not there. Nobody knows about it.”

(Source: Interview with anonymous source, 3 August 2021)

Timothy Ali Yohanna also told us that there is limited reporting of state discrimination or state violence against persons with disabilities, due to censorship, the tendency of the media to publish only stories that show people with disability in a negative light, and lack of inclusion:

“One key factor is censorship by the government. The government will never allow you to publish things related to discrimination against people with disability because you'll be arrested. They consider the action and treat you as if you’re violating a law. They will look at it as if you're trying to tarnish the image of the government. So that is the notion behind it, which means they must close it down. For example, in the year 2020 in Maiduguri, Borno State, a Commissioner of Youth and Sport invited leaders of disabled persons to give them capital for small business as a form of economic empowerment. He then decided to give them an amount that is less than $1 and one of the leaders rejected it and went on his Facebook page to air his concerns. Because of those publications, the commissioner sent
political thugs to his house, broke his car, and beat him up severely. They looked at what he did as tarnishing the government’s image.

Second, the negative things that people with disability do is what the media want to report, but they don’t report things that the government does to people with disability. Third, in the mode of writing, intervention, and implementation of projects, people with disability are being discriminated against. Even in the northeast they will say, “we are going to include people with disability,” and then you see they are only 1 out of 100. How do you think they can make an impact? These are things that are not reported. If you do in depth research and speak to people, they give you specific examples of things that were done to them, some of which constitute a crime against humanity. But because people with disability do not have a voice, you will not find it reported online.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

In relation to the limited reporting of state discrimination or state violence against persons with disabilities, Danlami Umaru Basharu said:

“It is not the low level of incidence, but the lack of interest by the authorities concerned.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

This media source quotes David Anyaele commenting on a report the Centre for Citizens with Disabilities (CCD) worked on titled ‘Our Lagos, Our Disability Report 2020: An Assessment of Compliance by Public/Private Institutions on Lagos State Disability Law’:

“[...] discrimination is pervasive against persons with disabilities that are working in Lagos State. “Even in government institutions, officials treat people with disabilities with this disdain and it is a worrisome situation for people with disabilities who are working in government offices.”

(Source: The Herald: Lagos State to Fully Implement Disability Laws - CCD, 5 December 2020)

Dataphyte, a Nigerian online platform that publishes and analyses public data, reports the following:

“According to David Anyaele, the Executive Director of Centre for Citizen with Disabilities, disability is still often considered as a charity issue rather than a public policy concern. Thus, Nigeria’s disabled suffer discrimination in employment, accessing education, and in other aspects of life [...] Social protection for disabled people is still relatively weak. Even the recently approved Discrimination Against Person with Disability (Prohibition) Act does not appear to sufficiently cater or provide real protection for Nigeria’s disabled people. And according to a DATAPHYTE report in January 2020, the disabled people of Nigeria are still excluded.”

(Source: Dataphyte, Social Protection for the Disabled in Nigeria during COVID-19 pandemic, 7 August 2020)

The following sources give examples of state discrimination perpetrated against persons with disabilities in Nigeria:
 [...] When people with disability are seen on the street it makes the situation even worse for them. It keeps increasing the level of discrimination and stigmatization against people with disability and gives room to armed groups to recruit them because they think they are abandoned. I'll give you a specific example: there's one person with disability in Damaturu. The person was not sent to school and he was always on the street. Instead of begging, he decided to sit close to the government house so that he could sell his newspapers. Some people coming out of the building doubled the money for him instead of buying the newspaper and he was earning money. He didn’t dress well but someone advised him "Why don’t you get good clothes since you’re sitting close to a government building and selling your newspaper? Then people will see you as hygienic and they will buy your paper?" So, he took the advice, he dressed very well, and people kept on buying his paper, seeing his disability and giving him money. Unfortunately, a government official came over to him and said, "Look, you're on the street. You don’t have anything. Now you're making money and dressing well. It means you are working with the armed groups, and they are giving you money." And the guy was arrested, taken to prison and tortured. So, you can see the attitudes towards people with living with disability make the situation worse. They are seen as cursed people, as criminals if they are homeless, as second-class citizens, and nobody there gives them a voice.

(Source: Interview with Timothy Ali Yohanna, Researcher and author of 'They call us senseless beggars’, 29 May & 18 June 2021)

Dr. Ayuba Gufwan, People’s Democratic Party (PDP) candidate in the Mangu Local Government chairmanship contest (Plateau State), reported facing derogatory remarks on his physical disability:

“Recent reports had claimed that Gufwan, who contested the Mangu Local Government chairmanship seat in the Oct. 10 Plateau local government elections, dumped the PDP after its leaders allegedly rejected his nomination as running mate to PDP governorship candidate Jerry Useni. The leaders were alleged to have said that Gufwan, a cripple, who moves on a wheelchair, was not a worthy choice as a running mate. [...] "My initial anger was based on the discriminatory and divisive comment on my person by ranking members of our party. I indeed considered opting out of the party and totally out of politics. It was a personal protest against any form of discrimination against people living with disability.”"

(Source: The Herald: Derogatory remarks: Gufwan, PDP candidate in LG election, says still in PDP, 26 October 2018)

The report by the World Bank finds evidence of discriminatory attitudes among airline and airport staff, and a lack of training on the principles and practice of inclusive air travel:

“As a visually impaired person, you cannot get on board [an airplane] without a guide. [...] A visually impaired woman reported to us; she finished school and tried to come back to Abuja from Lagos, from a kind of rehabilitation center in Lagos. Suddenly, when she went to the airport in Lagos, they told her she could not board unless she had somebody [to take care of her]. After a lot of dragging, the woman had to pay a certain amount of money for her to be taken care of on board before she was allowed to board. This is a serious [sic]. It is not all the airlines [that do this], but we receive these types of cases.” – a visually impaired man, Gombe
[...] Airport staff, including that of the Federal Airport Authority of Nigeria, do not receive adequate training on the principles and practices of inclusive air travel for persons with disabilities. They usually demonstrate inappropriate and risky boarding procedures and handling, such as demanding a passenger with mobility difficulties pay for the use of a wheelchair for boarding, as this study documents. Sometimes, airport staff damage assistive devices, such as wheelchairs, and then refuse to replace them.

“The airline insisted I pay for wheelchair services despite the provisions of the Disability Act and the Air Passenger Bill of Rights.” – a female with mobility impairment, Abuja

Furthermore, the wheelchair-accessible parking at the Nnamdi Azikiwe International Airport, Abuja, is not available to air travelers with disabilities. The parking has been converted to “VIP” (very important person) use and requires the purchase of a sticker that costs N100,000 annually. Indeed, there is a great need for interventions in the aviation sector to improve the situation.”


In February 2021 The Guardian (Nigeria) reported on a directive from the Federal Government for TV stations to use sign language interpreters during news casting following complaints of discrimination from disability advocates:

“The Federal Government has directed TV stations to in line with National Broadcasting Code, deploy sign language interpreters during their major news casting.

The Minister of Information and Culture, Alhaji Lai Mohammed gave the directive on Monday in Abuja during a virtual meeting with the officials of the Centre for Citizens with Disabilities (CCD). The minister said that the directive would be officially communicated to all public and private TV stations on Tuesday.

The News Agency of Nigeria (NAN) reports that the directive was sequel to a complaint by the Executive Director of CCD, Mr David Anyaele that many of their members were being discriminated against without the sign language component during news casting. Anyaele who was physically present at the meeting, said he was making the request on behalf of the 31 million Nigerians living with disabilities.

The minister noted that the sign language component during news casting was backed by the NBC code and the directive would go out to TV stations to comply to the provision. He assured that his ministry would collaborate with the Centre in the implementation of the relevant sections of the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018 assented to by President Muhammadu Buhari.”

(Source: The Guardian Nigeria, FG directs TV stations to deploy sign language interpreter during news, 22 February 2021)

In May 2021, the Independent National Electoral Commission announced it would address the issues of access to polling units for persons with disabilities:
“The Independent National Electoral Commission (INEC) says its ongoing expansion of existing polling units would enhance access to voting centres by People with Disabilities (PWDs) and new settlements.

[...] He said that some of the present locations of polling units made access almost impossible, particularly for PWDs, adding that such polling units would be reviewed and properly relocated.”

(Source: The Guardian Nigeria, INEC hails converted polling units for providing access to PWDs, others, 8 May 2021)

However, in July 2021 the Centre for Citizens with Disabilities reported their concerns about inclusion of persons with disabilities in the electoral process in Lagos, including their access to polling units:

“People With Disabilities, PWDs, under the aegis of Centre for Citizens with Disabilities, CCD, have accused the Lagos State Independent Electoral Commission, LASIEC, of plans to exclude over 2 million of their members from actively participating in the July 24, council polls in Lagos State.

Executive Director of CCD, Mr. David Anyaele, stated this on Thursday, at a public presentation of findings on the pre-election assessment of LASIEC provisions for PWDs for July 24, 2021, Local Government elections, held in Maryland, Onigbongbo Local Council Development Area, LCDA, Ikeja.

According to Anyaele: “We are worried that LASIEC has decided to exclude over 2 million PWDs in the July 24 council polls in Lagos.”

He added that despite series of petitions, “LASIEC has not complied with the provision of the law on the inclusiveness of PWDs in the exercise.

“Our expectations with reference to election and voting process during the Covid-19 in the state, access should be provided for PWDs in the process and ensure no one is left behind in participating in the electoral process.

LASIEC should make provision for inclusive and accessible polling units, making the ballot paper lower for those on wheelchairs, provide magnifying glasses for the Albinos and make provision for signage posters at the polling unit.”

(Source: Vanguard, Lagos LG polls: PWDs accuse LASIEC of exclusion from active participation, 24 July 2021)

4.2. Are some groups particularly vulnerable to discrimination, exclusion, or violence by state actors, based on their disabilities?

When asked if some groups of children or young people with disabilities are particularly vulnerable to discrimination, exclusion, or violence by state actors, an anonymous source told Asylos and ARC Foundation that:

“If you are a disabled child, and you are a female child, and you're from a poor home, you're going to face three challenges. You're going to face discrimination as a female child because
in Nigeria we don’t have respect for female children. As a matter of fact, if you see a man who does not have a male child, he feels barren.

Second, disabled children are the most vulnerable because your school environment will not even accept you. Even if your school accepts you, there will be no access for you. There are no facilities for you. So disabled children, female children, and the third category of the vulnerable are children from poor homes - they face a whole lot. As a matter of fact, if you fall within these three categories, then there is no way you will have education. There is no way you will have quality of life. Your future is defined the day you were born - because you were born the way you are, you will grow up like that, and die like that.

And that's the reason why it is so difficult to eliminate poverty for many Nigerians. Most of the children fall within this category because the poor are in the majority. So, their children face discrimination. Only in a few exceptional cases do you see female children excelling. Under a few circumstances, you see disabled children excelling. Under a few circumstances, you will see poor children excelling. And that's the reason why if you look at our national assembly, how many women are in the parliament? At the executive arms of the government, how many women are ministers? How many women are professors? How many women work for the government or in private organizations? They're just a few. The same thing applies to disabled children. How many of us are educated? How many of this population have degrees? First degrees? How many of this population even went to secondary school? Just a few. So, to answer you, in a nutshell, a female child, more vulnerable, a disabled child, vulnerable, and a poor child, most vulnerable.”

(Source: Interview with anonymous source, 3 August 2021)

Timothy Ali Yohanna drew attention to the challenges for persons with disabilities living in conflict zones:

“Yes, I think those with physical disability who live in conflict zones [are particularly vulnerable], because they target them as people who give information to the armed groups.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Danlami Umar Basharu said:

“I believe there is widespread incidence of violence against deaf persons and persons with physical disability.”

(Source: Written correspondence with Danlami Umar Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

4.3. Is there evidence of discrimination towards children and young people with disabilities in the implementation of non-disability specific laws (or policy)?

An anonymous source interviewed by Asylos and ARC highlighted discrimination towards children and young people with disabilities in the implementation of education legislation:
“Okay, yes. You see, in Nigeria we practice what is called Universal Basic Education. And what that means is every child must go to school to a particular level. That should be applicable to every child. But a disabled child cannot enjoy that same right because they don’t have access. Take for instance when I was in primary school, I used to enter my classroom through the window because the step outside was so difficult for me to climb. The shame of creeping on the ground on my hands. I would go to school early and hide and enter through the back window so that they would not see me creeping on the ground. And when the school closed, I would stay back to make sure that everybody goes home and then I would come out from the window.

I did that out of a passion because I was interested in going to school by any means. It was my own way of devising a means to overcome the sharp discrimination that I was confronting at that point. So, yes, there is a law that says every child can go to school, but the law does not take steps to make all schools accessible. So, if you’re a child and you’re disabled, you’re blind or in a wheelchair, or using crutches, or you are deaf, then you are not going to have that specific education tailored towards addressing your need. So, there’s discrimination. And there is so much evidence, as I’ve pointed out myself. I went to school because I was so determined, and I could devise a means. If not, I should not be speaking English here with you.”

(Source: Interview with anonymous source, 3 August 2021)

Danlami Umaru Basharu said:

“Discrimination abounds within the disability community in the sense that they are usually the last to be given things or the last to be accounted for.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

4.4. Have there been increased incidences of police brutality, harassment or abuse towards children and young people with disabilities because of the COVID-19 pandemic? Have some profiles been impacted more than others?

Timothy Ali Yohanna highlighted the challenges of complying with movement restrictions for persons with disabilities and the punitive response of the authorities:

“Yes, there's been a high increase [of police brutality, harassment or abuse] when the government-imposed movement restrictions because of the pandemic. People were only allowed to go out for two hours for example, and because it takes people with disability longer to get to a place it would take others 10 or 15 minutes, they may be late returning home, and then they would be flogged, or pushed aside, causing them injuries. There is no consideration that a disabled person cannot move as fast as another person.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

An anonymous source spoke of the violence of state authorities towards children with disabilities who are begging in the streets, which has continued during the pandemic:
“You see, police brutality against the disabled in Nigeria is as old as Nigeria itself. And the reason is because disabled children are used by some people for begging. Begging on the street to get money for their mentors. Sometimes the police will come down on those innocent children. Beat them up or shoot them, pack them up, throw them away to unknown destinations. So, the police have always harassed and abused children’s rights. Instead of chasing those who put them on the street, they go after children. During the pandemic, of course, the government wanted people to stay at home. And those people who used disabled children to make money pushed those children into the streets. And, of course, the police come after those children.

So, yes, there is evidence of police brutality on children during the pandemic. Even when the pandemic stops, it continues. I tell you, police brutality against children with disabilities or young persons with disabilities is as old as Nigeria itself. It happens on a daily basis. There are reports even in the national newspapers where the police and the military brutalise young persons with disabilities. There are so many incidences of that. Many of us are victims of police brutality.”

(Source: Interview with anonymous source, 3 August 2021)

**State protection**

4.5. Do State authorities register complaints of discrimination, human rights violations, violence etc. made by or on behalf of children and young people with disabilities? Is support provided when complaints are made?

The Discrimination Against Persons with Disabilities (Prohibition) Act, 2018 empowers the National Commission for Persons with Disabilities to receive complaints of rights violations and to support victims to seek legal redress:

“[…] In 2018, the Government adopted the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018. […] The law will also establish a National Commission for Persons with Disabilities, responsible for ensuring that people with disabilities have access to housing, education, and healthcare. The Commission will be empowered to receive complaints of rights violations and support victims to seek legal redress amongst other duties. […]”

(Source: OHCHR: *Visit to the Republic of Nigeria by Ms. Leilani Farha, Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context*, 23 September 2019)

However, the National Commission for Persons with Disabilities was only appointed by President Buhari in August 2020. The Senate then confirmed the appointees in December 2020:

“[…] President Muhammadu Buhari yesterday [24 August 2020] approved the composition of the Governing Council and appointments of Chairman, Executive Secretary for the National Commission for Persons with Disabilities. The appointments are in line with the Discrimination Against Persons with Disabilities (Prohibition) Act 2019. […]”
Reports of complaints being registered by the Commission were not found amongst the sources consulted.

An anonymous source told Asylos and ARC Foundation that the National Commission for Persons with Disabilities lacks the expertise, funding and ‘moral courage’ to carry out its mandate:

“[T]here is a lack of experts working with the Commission. The Commission does not have experts on disability working there. Second, the Commission is not sufficiently funded. The foundation lacks the funds to carry out their mandate. Third, there is no strong government will to implement disability rights in Nigeria. Fourth, Nigeria is a country that is overwhelmed, overrun by religious tendencies, by religious charlatans. So, even though the Commission watches disabled people being abused by religious charlatans, because we are a nation that is neck-deep in religion, if a pastor, for instance, is violating the rights of a disabled person, the Commission is not going to intervene because the pastor is seen as a representative of God. And since the Commission will not want to incur the wrath of God according to them, the Commission is also overwhelmed by religion as well.

So, there are many challenges that confront the National Disability Commission. As I said, lack of funding, lack of expertise, lack of moral courage to do what they should do, and lack of good leadership. Because in our country one would expect some persons like Danlami Basharu and David Anyaele to be the chair or the executive secretary of that Commission. Because they are among those who drafted the law that gave birth to the Commission. And I tell you, they are not close to that Commission because of some special interests. Experts will not be given a chance to run the Commission. People like Danlami Basharu and David Anyaele would be very instrumental because these are people who feel the pain of disability. These are people that we know have the expertise, the technical expertise. So, we have people like that in Nigeria and they're being wasted. And then we have people who practically don't know anything about disability at the helm. That cannot work.

[...] In that part of the world, expertise does not count. Political connection is what drives leadership and that's wrong. That's the reason why the Commission is challenged with a lack of capacity to actually do what it should be doing. I will not be surprised if in the next 10 years, the rights of people with disability will still be a subject of discussion in the negative. Because the Commission has so many challenges to battle with.”

(Source: Interview with anonymous source, 3 August 2021)

The same source said that most persons with disabilities don’t know that they have rights or where to make a complaint and that they lack a voice and ‘suffer unheard’:

“Look, once somebody is disempowered, educationally, economically, politically, he knows nothing. Disabled persons fall within the most vulnerable who are illiterate, poor, hungry, sick, dejected, ostracized, outcast. Therefore, most of them don’t even know where to make their complaint. That is to say, they don’t have access to justice. Most of them do not even know that they have disability rights. Most of them that know, lack what it takes to be heard. Their voices are shut down. These are people that cannot raise their voices up. If not for social media, most of them don’t even have access to the press.
So, there are a whole lot of challenges and I think the worst part of it is the challenge of their economic status. Once a man is economically disabled, the person is finished. Because it automatically disqualifies such a person from promoting his or her rights. In the UK for instance, you can talk to the Citizens Advice Bureau, and they will help you as a disabled person to raise any perceived discrimination. But in countries like Nigeria, you don't have such facilities. There's no one to talk to. You are just by yourself. So, the opportunity to even amplify your voice is not there. Therefore, people just keep quiet with their pain, frustrated. And for people like us, some of us who are privileged to be educated, of course, we can't keep quiet. But it’s difficult. How many of us are educated? Very few. The majority suffers unheard.”

(Source: Interview with anonymous source, 3 August 2021)

Timothy Ali Yohanna, told Asyllos and ARC Foundation that in practice there is no protection in practice from discrimination or violent actions by state actors for persons with disabilities:

“Theoretically, yes; in practice, no. They are just treated as any other citizen. So, they get protection under the same general clause as other citizens under the constitution of the country. Because of their disability, either the Ministry of Youth and Sport or Ministry of Women Affairs is responsible for their welfare, not for their protection. The only channel they can send their complaint or report against the state to is the National Human Rights Commission. But the National Human Rights Commission is funded by the federal government. So, I’m wondering, how will you be a judge in your own case and at the same time, how will someone you funded be able to do justice for someone who brought a complaint about you. So, in practice, they do not really have any protection at all. That’s in my own understanding.

Sometime in the last two years, during the second administration of our President Muhammadu Buhari, the current president, he created a Ministry of Humanitarian Affairs, where there's a section or department that takes care of people with disability. But, that particular section only theoretically exists, to the best of my knowledge.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

4.6. Are there practical examples of legislation or policy being used to protect persons/children and young people with disabilities from State authorities?

The legal officer for Lagos State office for disability affairs reported to the Premium Times newspaper in November 2019 that no one has been prosecuted for discrimination against persons with disabilities and that persons with disabilities fail to report alleged discrimination because of the challenges they face in doing so:

“[… ] Zero Prosecution
Babatunde Fasiu, the legal officer for Lagos State office for disability affairs, said no one has been prosecuted for discriminating against people with disabilities.

Mr Fasiu told PREMIUM TIMES that many people living with disabilities fail to report cases of alleged discrimination because of the challenges militating against them in that regard. ‘To start with, it is the duty of the police to investigate such cases. But many people with disabilities cannot go to the station because they lack access. If they struggle to get there,
they are met with a brick wall because a deaf person that cannot afford an interpreter or a blind person may end up being misinterpreted at the station. There are no facilities to aid the communication needs of persons with disabilities. Yet many people living with disabilities, especially women, are discriminated against daily in countless ways,’ said Mr Fasiu.

He said for many years, until 2018, lawyers approaching the court in Lagos experienced untold difficulty while moving from the parking lot to the main court premises, until the immediate past Chief Judge of the State, Opeyemi Oke, ordered the creation of a parking lot for them close to the court entrance.

Another lawyer, Daniel Onwe, who is the National President, Association of Lawyers with Disabilities, said many affected Nigerians fail to report their cases for prosecution ‘because the system has a different view of the problem from what it ought to be. The major challenge is that Nigerian courts and lawyers do not really appreciate disability jurisprudence. They wrongly approach it as a welfare matter to be governed by chapter 2 of the Constitution, rather than as a human rights issue governed by chapter 4 of the Constitution,’ Mr Onwe said. He added that the factors militating against easy access, as well as poverty, have also contributed to the factors militating against the prosecution of defaulters. [...]”

(Source: Premium Times: Despite new law, Nigerians living with disabilities lament discrimination, 1 November 2019)

Sources interviewed by Asylos and ARC Foundation in the summer of 2021 reported similar issues.

An anonymous source said that despite the existence of protective legislation and the relevant implementation bodies, in their experience as an advocate nothing is done to provide protection from discrimination and abuse to persons with disabilities and no action is taken when complaints are made:

“In Nigeria, we have what is called the National Human Right Commission. It’s a creation of the State. Recently, we had the law Discrimination Against Persons with Disability Prohibitive Act, 2018. It’s a law that challenges those abuses. We also have a National Commission for Persons with Disabilities, which oversees the welfare and the protection of persons with disability. Then Nigeria also has the Child Rights Act, which has been signed or ratified and domesticated by some states in Nigeria.

However, all those laws that I’ve mentioned can only be seen on paper. But as a practicing lawyer in Nigeria, I have taken cases of child abuse to the Human Rights Commission and nothing was done about it. I have reported cases to the National Human Right Commission on the abuse of several young persons with disabilities, and there was nothing done about it. Those people are enjoying moving around, harassing disabled people. So yes, there are laws in Nigeria, but anything that does not have monetary reward attached to it, even when it’s an obligation on the side of the government, if they’re not going to get money doing that, not going to get a bribe doing that, nobody is going to run after people who violate children or young people.

So, yes, there are organizations that have the official responsibility of doing those things, but in reality, they do not do it. So young persons with disability suffer violence, suffer discrimination, but there’s nothing you can do about it. Nothing. There’s nothing you can do
about it because it appears that there is a conspiracy of silence. There's a conspiracy of intimidation on the side of the government. And you know, disabled children or young people with disabilities are the most vulnerable ones. These are people who society has really denied opportunities. So, they don't have what it takes to hire lawyers, to go around chasing people who violate them. Unlike in developed countries, whether you are rich or not, you have access to justice. It is not the same in countries like Nigeria.

In Nigeria, justice is for sale. It's for the highest bidder. In the next 10, 20 years, justice will still be for the highest bidder. So, when it comes to a vulnerable person who is poor, and he can't pay for justice, he can't have justice. So, no matter how his or her right is violated or breached, nothing happens. There's a conspiracy among the elite, the political elite, among those who govern us, who are privileged to be at the helms of government institutions that are meant to protect the people. There's a huge conspiracy to deny people of their fundamental human rights. This cuts across all people. But it is more devastating when you bring disabled persons and children who are the most vulnerable. The impact on them is more glaring. Particularly the issue of violations of anybody who does not have enough money or enough political power to protect his or herself in that part of the world, Nigeria.”

They also said that persons with disabilities generally do not register complaints against state authorities, and if they do, no action will be taken:

“Before the establishment of the National Commission for Persons with Disabilities, which was just two years ago, we had what is called the National Human Rights Commission, which is set up to address human rights violations generally. And of course, because persons with disabilities are human, they can take their grievances there. Now at the National Human Right Commission there is limited access to the building. If you manage to access the building and you lodge a complaint, nobody is going to investigate it. As [...] a practicing lawyer, I had the privilege of registering fundamental breaches of the rights of persons with disabilities, and nothing was done up to now. No investigation, no feedback, nothing. Absolute quietness and nothing happened.

So let me tell you this, people with disabilities in Nigeria, they do not bother themselves to go and complain when there are breaches. They don't complain. When your rights are breached, religious people will generally say, "I'll leave you in the hands of God. I will move on." So first, for you to get justice, you must be rich. And these people are poor, so they don't have what it takes to buy justice. So, they are going to be there and suffer it, and possibly die with it, if the harm is grievous. Therefore, persons with disabilities do not complain. And when they register their complaint, there is absolutely nothing that will be done about it.”

(Source: Interview with anonymous source, 3 August 2021)

Similarly, Timothy Ali Yohanna, was doubtful if people with disabilities would take a case to court:

“Well, they can register a complaint as a citizen, but they may be given the same treatment as other members of the society. But for them to be given special attention or a special court or maybe a special kind of policy that treats them differently, no, I didn't see it.

The first thing that comes to mind is that if a person living with disability goes to court they will be labelled as a beggar and stigmatised. So, I doubt very much they would go to court,
except if they have some economic resources and can make their own way, otherwise, I doubt it very much.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Danlami Umar Basharu said that persons with disabilities do register complaints, but they are unlikely to be dealt with effectively:

“Persons with disabilities register complaints. The issue is how effectively the complaints are treated. Like we said, the Commission which is the only one in the country thus far does not have the capacity to handle these complaints. Sometimes, it is better to keep quiet and try to resolve your complaint yourself. The courts or public defenders are even too busy to entertain too many complaints, as reported to me by one public defender in Lagos State.”

(Source: Written correspondence with Danlami Umar Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

A media report describes a case taken to the House of Representatives in which the Federal Ministry of Education, the Federal Capital Territory Administration and the Nigeria Police Force had investigated and confirmed allegations of the rape of children with visual impairment at their school in Abuja, but had taken no action:

“ABUJA- The House of Representatives, Wednesday, resolved to investigate circumstances behind the alleged rape of blind students in two schools in Jabi and Kuje areas of the Federal Capital Territory, FCT, by their teachers. The resolution followed two different motions brought to the House.

[...] Adopting the motion, the House urged the relevant department of the Nigerian police to carry out a thorough and proactive investigation into the matter. It also urged the House to take a firm position in support of capital punishment for perpetrators of rape and violence against under-aged girls. The committee set up to investigate the matter would make appropriate recommendations and report back to the House for further legislative actions.

Similarly, considering the second motion titled “Need to Investigate the Molestation of Pupils of the Deaf and Dumb School at Kuje, Abuja”, sponsored by Hon. Musa Mohammed Pali, the House urged the Inspector-General of Police and the Commandant General of the Nigerian Security and Civil Defence Corps to provide adequate security in schools across the country to prevent such incidents from continuing.

Moving the motion earlier, Hon. Pali said: ‘The House notes a report on tension at the School for the Deaf and Dumb in the Kuje Area Council of the Federal Capital Territory, Abuja by suspected cultists; Also notes that the school, which accommodates little children, both boys and girls of between 5-6 years who are mostly defenseless and vulnerable, is being invaded regularly by cultists who abduct and molest the children; Concerned that those children have special needs and cannot easily or freely communicate the abuses and other forms of ill-treatment meted to them; Aware that the Federal Ministry of Education had been intimated of the serious brutality and sodomy going on in the school and the Permanent Secretary led a delegation to the school which confirmed the incidents; Also concerned that since concluding investigation into the matter by the Federal Ministry of Education, the
Federal Capital Territory Administration and the Nigeria Police Force, no action has been taken on the matter. The Ad-hoc Committee would visit the school to obtain first-hand information on the matter and also interface with the Federal Ministry of Education, the Federal Capital Territory Administration and the Nigeria Police Force on the outcome of their investigation into the matter."

(Source: Vanguard: Reps launch probe on rape of blind girls in Abuja Schools, 24 July 2019)

4.7. What consequences do state actors face for discriminatory or violent actions towards persons/children and young people with disabilities?

An anonymous source told Asylos and ARC Foundation that ‘there are no consequences for violating the rights of people with disabilities in Nigeria’:

“[O]ur judicial system is moribund. Our judicial system is commercialized. Our judicial system is corrupt. Our judicial system does not work. It’s highly ineffective. Therefore, there is no way anybody will be prosecuted for violating the rights of a disabled person. Because, first, the disabled person does not even have money to pay lawyers to advocate for him or her. So, those who violate the rights of the disabled are not held accountable.

The Disability Rights Act was enacted in 2019. And since 2019 to date, we have airlines in Nigeria who violate the rights of people with disabilities, this is reported in the national dailies, and nobody prosecutes these airlines. We have seen more violations of persons with disabilities than when we didn’t have a Disability Rights Act. So, what I’m saying is there are no consequences for violating the rights of people with disabilities in Nigeria.”

(Source: Interview with anonymous source, 3 August 2021)

Similarly, Danlami Umaru Basharu said:

“State actors do not face consequences especially when it is perpetrated by one of their own. A person with a disability is usually very lucky to get his case heard by the authorities.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

4.8. Has the Covid-19 pandemic affected the ability of persons/children and young people with disabilities to seek protection from the state, or redress in cases of discrimination and abuse?

An anonymous source said that the Covid-19 pandemic has compounded the existing difficulties faced by persons with disabilities in Nigeria:

“[S]ince Nigeria got her independence in 1960, persons with disabilities have been seen or treated as a pariah group. They’re already being ostracized. Their rights have already been infringed upon a thousand times without redress. So, COVID-19 did not actually make too much of a difference. The situation continues. If you have not been enjoying any privileges, and COVID-19 came and still you’re not enjoying any privilege, the situation will continue.
A disabled person will be the first to die when COVID-19 starts spreading. Because they're the ones that are neglected. They're the ones who can’t keep hygienic because of their poverty. So, what I can say is COVID-19 has only complicated issues and sends persons with disability to their early grave. It has only compounded the issues. It has only added more salt to the existing injury.”

(Source: Interview with anonymous source, 3 August 2021)

5. Access to services and support

Health

5.1. Are legislative and other provisions in place to ensure the provision of equal access to health services for children and young people with disabilities?

This section should be read in conjunction with section 2. Legal and policy frameworks and implementation.

The 2018 Discrimination Against Persons with Disabilities Act of Nigeria contains the most up-to-date legislative provisions on the terms of access to health services for people with disabilities:

“This act provides for the full integration of persons with disabilities into the society and establishes the National Commission for Persons with Disabilities and vests the Commission with the responsibilities for their education, health care, social, economic and civil rights. (…) Part V. Liberty, Right to education health and first consideration in queues, accommodation and emergencies

21. (1) Government shall guarantee that persons with disabilities have unfettered access to adequate health care without discrimination on the basis of disability.
(2) A person with mental disability shall be entitled to free medical and health service in all public institutions.”

(Source: Discrimination Against Persons with Disabilities (Prohibition) Act, 2018 - Explanatory Memorandum, pg 1 and pg 9, 2018)

In our interview and correspondence, Theophilus Odaudu of the Disability Rights Fund and Disability Rights Advocacy Fund observed the following on the limitations of this legislation in relation to healthcare, and commented on the reasons for delays in implementation:

“The discrimination Against Persons with Disabilities (Prohibition) Act provides for the health rights of persons with disabilities. However, the provision is not very comprehensive. It is one of the provisions That I feel failed to reflect the spirit of the CRPD. Besides this, even the little it provided for is not being implemented. The provision is yet to influence legislative and policy changes, even though through advocacy work of OPDs, several commitments have been made to improve access to health services for persons with disabilities, especially women and girls, and it is not out of place to find one or two modifications here and there, no major changes has occurred in the health sector following the enactment of the Act. As part of my work with the disability Rights Fund, I am working with some grantees to advocate for inclusive health services delivery.
As mentioned above, there seem to be a lack of political will to implement the Act; and this is not just for health alone, but several (if not all) provisions. For instance, the Act provides that persons with mental health conditions are entitled to free health care in government owned hospitals. I am not aware that this is happening, and I do not have information that the Ministry of Health has taken any steps to ensure budgetary allocation for this purpose. Generally, the awareness on the Act is poor, even among government officials; and the enforcement mechanism is weak. More has to be done to strengthen the Disability Commission to take up its responsibilities to the disability community.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

Danlami Umaru Basharu of the Anglo-Nigerian Welfare Association for the Blind observed that the Commission tasked with implementing the Act has only just started functioning with ‘little or no capacity’:

“I am afraid we are expecting too much from the Disability Commission. The Commission only started functioning this last year with little or no capacity.”

When asked about the challenges he said:

“The Commission does not have support for the work it is doing. The Commission will need support from external sources.”

As far as impact on children and young people with disabilities, he said:

“This will continue to impact on children and young persons with disabilities in the fact that the Commission does not have the capacity to take on their cases.”

(Source: Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021)

Timothy Ali Yohanna described the following shortcomings in relation to provision of equal access to health services:

“There are several issues. I don’t think there is a policy for the government to take care of a percentage of the health care bills for a person living with disability, and no insurance provision. There’s not even provision for them to use their mobility equipment in hospitals and the government doesn’t have a database of how many people are living with disability in the country. So, it’s quite difficult.

The policy is outdated and was developed by the government without doing grassroots analysis. They took a top-down approach, just gathered some key people with disabilities in Abuja and other places and held a public hearing. Those people’s experience is far, far, far different from those who are sitting in poverty in the extreme northeast. To me, health care is a major concern. It’s even worse for infants and those who are below the age of 10. For instance, many of the internally displaced persons camps have no functional clinic with drugs. I can mention six or seven IDP camps. There will be a clinic there, there can be staff there, but the best you can get in that clinic is adult drugs, such as paracetamol and other things. If a child comes with some complicated health situation and challenges, the child can
die in the hospital and the government will never pay attention to them. So, it’s not working.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

He also provided the following reasons for the gap in provision:

“Three reasons. To me, one key reason is corruption, using people with disability to extort a lot of money from the government. Because people have sympathy for them based on religion and other things, the government approves provision to be made for them. But corrupt government officials divert money from that ministry and people with disability hardly see 10% of those resources.

The second and third reasons are lack of political will and poor institutional structures. So, I would not say that the President is not at all willing to help people with disability. Honestly, he is interested because he passed that bill and I was part of the process. I cannot say state governments are not willing to help people with disability. But I will say that they use those opportunities for their own selfish gain. So, they use this opportunity, when poor institutional structures are in place, to channel the funds to their illicit interests and the things they want to use the money for. For example, if there’s a good institutional structure they can make someone who is qualified and living with disability head of that ministry. How can you bring an abled person and make them head of a ministry that will be responsible for provision for disabled people? How will the person know their problems? They have never given the position of minister, commissioner or even local government chairman to a person living with disability. I only know of one local government chairman out of about 300, who is living with disability, and he became disabled after his tenure, otherwise they wouldn't have even given it to him. So, to me, corruption is one, political will is two, poor institutional structure is three. And then the fourth reason is lack of awareness about the rights and the needs of people with disability.

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

As scientific journal The Lancet points out, the legal provisions on mental health and disability are outdated:

“Nigeria’s mental health legislation was first enacted in 1916 and was called the Lunacy Ordinance. In 1958, these laws were amended to give medical practitioners and magistrates the power to detain an individual suffering from mental illness.

Renamed the Lunacy Act of 1958, these laws have not been amended since. Nigeria currently faces a global human rights emergency in mental health. Underpinned by poor societal attitudes towards mental illness and inadequate resources, facilities, and mental health staff, figures suggest that approximately 80% of individuals with serious mental health needs in Nigeria cannot access care.

With fewer than 300 psychiatrists for a population of more than 200 million, most of whom are based in urban areas, and in view of poor knowledge of mental disorders at the primary health-care level, caring for people with mental illness is typically left to family members.
The result is a chronically and dangerously under-resourced mental health system catering to the needs of an estimated one in eight Nigerian people who suffer from mental illness, poor awareness of the causes of mental health, widespread stigma and discrimination, poorly equipped services, and abuse of people with mental health problems. A reform of the mental health law that is in keeping with international standards is urgently needed to drive change.”

(Source: The Lancet, The time is now: reforming Nigeria’s outdated mental health laws, August 2020)

5.2. Is there evidence that children and young people with disabilities have difficulties accessing health care?

5.2.1. General information

Despite the policies listed above, several institutional and journalistic sources point out that the listed directives and safeguards are not being implemented, leaving people with disabilities without access to healthcare:

“Infants with disabilities lack access to early intervention services which are required to assess and respond to their impairments with a view of possible reversal and/or alignment with appropriate support.”


“Director of Centre for Citizens with Disability, CCD, David O Anyaele, during a press conference to commemorate the 10th anniversary of the law, lamented that there is weak implementation of the law as people living with disability are not benefiting maximally from its provisions. According to him, the majority of persons with disability that were engaged in focus group discussion and interview stated that access to services and programmes of the state and private organisations are still limited. Findings, he added, also showed that access to health care services, in particular, free medical treatment as provided by Lagos Special People’s law have not been implemented by the Ministry of Health. “So, persons with disability who go to a hospital be it primary health care centre or secondary and tertiary are being compelled to pay for health services,” he alleged.”

(Source: Daily Trust, 10 years after, PLWD in Lagos decry poor implementation of law, 30 June 2021)

“Findings indicate that persons with disabilities lack access to basic services and that attitudinal barriers represent a major impediment to their socioeconomic inclusion. Inclusive policies are either nonexistent, weak, or inadequately implemented. There is an urgent need to improve the current socioeconomic situation of persons with disabilities in Nigeria.

“In Nigeria, as elsewhere in the developing world, health services are seldom accessible to individuals with physical, sensory, intellectual, or mental disabilities. Barriers to accessing health services include physically inaccessible environments, negative attitudes among
health workers, low knowledge of disability issues by health care workers, inaccessible equipment, and lack of available health-related information in accessible formats.

[...] Gaps in Programming
Dearth of early intervention services
Early medical interventions, such as rehabilitation and speech therapy, are scarce in Nigeria. The lack of expertise in these areas constitutes a major challenge to early intervention, particularly for children with developmental disabilities. The experts who are available are very expensive.

Lack of training and skills in disability inclusion
Health workers lack disability-inclusion training, representing an enormous gap in addressing the needs of persons with disabilities in the health sector.

Lack of budget allocation
A lack of relevant budget allocation is an impediment to the implementation of health policies for addressing issues impacting persons with disabilities.

Lack of inclusive health policies
Health-related policies do not address the needs of persons with disabilities. The only disability-specific national-level policy on sexual and reproductive health for persons with disabilities has not yet been implemented.


When asked to comment on these gaps in programming, Theophilus Odaudu observed the following:

“The there is high level of discrimination being faced by persons with disabilities in the society, and the health sector is not immune from this. Ignorance is a great factor constituting barriers to inclusion of persons with disabilities, because, attitudinal barrier constitute a major prohibiting factor.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

Other sources also criticise a lack of implementation of legislation and policies that are supposed to facilitate access to healthcare for persons with disabilities, and give further details of barriers that healthcare facilities face in implementing disability-friendly policies:

“The Empathy Driven Women Initiative (EDWIN), a non-governmental organisation, is to raise public awareness on the non-implemented Disability Act passed by President Muhammadu Buhari earlier this year.

In a statement made available to THISDAY yesterday, EDWIN, Uri Ngochukwu, who is also the convener of the event, said despite key provision of the Act stating that persons with disability were entitled to free medical care in every government-owned health facility in Nigeria, the law had not been implemented, as many persons with disability had been unable to access medical attention at these facilities free of charge.”
“The availability of barrier-free general healthcare services and programmes taking into account accessibility aspects for persons with disabilities are below average. The Administrators of public and private health centres are mandated to construct barrier-free infrastructures by provision of ramps. However there are many structural barriers in the built environment, inaccessible service point, inaccessible entrances due to security system, poor town planning and poor interior designs of hospitals and clinics. Disability Rights Centre (DRAC) an NGO conducted an accessibility audit on the multi-sectoral services available to survivors of violence, especially women and girls with disabilities. Results showed that accessibility of healthcare to persons with disabilities is non-existent. 90% of the audited facilities in the Federal Capital Territory and suburb such as Mararaba, Nasarawa State do not provide equitable healthcare service for persons with disabilities, especially women and girls with disabilities.”

“A total of 49 facilities were audited, cutting across hospitals, police stations, courts, non-governmental organizations and shelters / rehabilitation centers. A summary of the findings from the research showed that 93% of the healthcare facilities audited had no disability friendly policies.

In terms of physical accessibility, out of the 14 health facilities audited, only 2 were accessible to PWDs. The implication of this finding is that the sexual and reproductive health needs of WGWDs are unmet leaving them susceptible to poorer health conditions. [...] Also, it was discovered that the environment of most health facilities in the six Area Councils of the FCT and Mararaba are not accessible to WGWDs. The implication of this finding is that WGWDs cannot access majority of health facilities in the FCT.”

“Healthcare Services

Disabled people in Africa, including Nigeria, are usually extremely poor, often living in rural and other areas where medical and other services are scarce, or even totally absent, and where are not detected in time. When disabled people receive medical attention, if at all, the impairment may have become irreversible.39 People with disabilities have largely been unrecognized as a population for public health attention, but recent efforts have made the poor health of this population visible.40 In their report on disability and health in the US, Altman and Bernstein (2006) stated that adults with disabilities are four times more likely to report their health to be fair or poor than people with no disabilities (40.3% vs 9.9%). 41The foregoing is indicative of the likely poor health conditions of persons with disabilities and also the need for their special healthcare provision, which unfortunately, PWDs in Nigeria say is lacking. Persons with disabilities
reported that they often do not receive the needed healthcare due to exorbitant cost of health services. Others say they are treated badly by health care workers and/or denied access to public health infrastructure. For example, mammography screening equipment requires a woman to stand, absence of weight scale that accommodates people on wheelchairs or others who have difficulty standing are hardly provided by hospitals in Nigeria.

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Our findings reveal that the major challenges PWDs in North-Eastern Nigeria face in the health sector include affordability, accessibility, mobility, availability and stigmatization.


(Source: Grassroots Researchers Association, They Called Us Senseless Beggars” Challenges of Persons with Disabilities in North-Eastern Nigeria, 2018, pg. 16-17)

5.2.2. Information relating to children and young people with intellectual impairments

News articles report that parents of children with autism face financial challenges because insufficient treatment at government institutions leads them to private institutions:

“Founder, Cradle Lounge Special Needs Initiative, Lagos, Solape Azazi, regretted that enough light is not shed on what autism is and how it should be approached in Nigeria. According to her, a lot of parents are weighed down by attendant financial challenges and are unable to get needed interventions.

Azazi, a mother of a child living with ASD, disclosed that government facilities lack adequate treatment procedures, forcing parents to seek more expensive private care. She advised government to come up with a policy for supporting parents with “disability stipends” and include ASD in health insurance schemes.”

(Source: The Guardian (Nigeria), Stakeholders canvass support strategies for Autism Spectrum Disorder, 5 August 2021)

“Experts from diverse sectors have called for the inclusion of Autism Spectrum Disorder (ASD) care in national and state health insurance schemes. They also urged government to assist people living with ASD with funds as obtainable in Canada, United Kingdom (UK) and United States (US).”

(Source: The Guardian (Nigeria), Stakeholders canvass support strategies for Autism Spectrum Disorder, 5 August 2021)
As outlined in the below excerpt from a thesis written by Gabrielle Udoka Robertson, children with autism may struggle to get a diagnosis in Nigeria, due to stigma and a lack of awareness among healthcare professionals.

“The course of ASD begins with a diagnosis, but this step is daunting in the Nigerian healthcare system. Unfortunately, many Nigerian healthcare workers are not equipped to diagnose ASD. Failure to diagnose autism has been linked to stigma and ignorance of healthcare professionals […] A study exposed that in a sample of final year medical students over 70% had not been exposed to autism […] Additionally, the majority of students were not familiar with signs of autism like abnormal eating, absence of social smile, regimented behaviors, and non-specific gaze focus […] Failure of medical personnel to diagnose ASD early can be damaging and delay the child’s success.

Due to the rural landscape and underdeveloped social services of Nigeria and similar African nations, seeking help is a complicated venture for Nigerian parents. Most commonly, care for children with ASD is received from “faith-based organizations and mainstream schools” […] These resources can look very different depending on the region and the financial capacity of their occupants. The persistence of traditional African religions has led many parents to spiritual healers.

Help seeking behavior and etiology are linked, therefore spiritual problems tend to have spiritual answers […] healers are popular in Nigeria and can provide hope to families seeking intervention. In Nigeria, there are specific traditional healers that identify and treat mental disease […] When diagnosis is left to traditional healers, it is less likely that that diagnosis is scientific and even less likely that the parents will find empirically backed solutions. Although not all of these solutions will necessarily have negative outcomes, the extremes taken by spiritual leaders to cure children with autism have been known to result in death […]

There are a limited number of autism specialists living in Nigeria. The CDC (2019) recommends that children with ASD should receive a combination of behavioral therapies, speech therapy, occupational therapy, social skills training, and even assistive technology (such as communication tablets). These fields are underdeveloped in Nigeria. For example, there have been multiple failed attempts to develop occupational therapy programs in Nigeria that have been explained away by lack of training resources and the professional brain drain in Nigeria.”


5.2.3. Information relating to children and young people with physical impairments

These news reports describe the difficulties parents have in accessing treatment for their children with Cerebral Palsy:

“Cerebral Palsy Centre has advocated for funding to help take care of children with the disability. […] “Dealing with my daughter, I couldn’t find any centres specifically for children with this disability, so I decided to create one,” she said. The centre is currently building a facility at Lakwe, to accommodate more children, and to allow for better services, and also reduce the wait list.
A mother of a child with cerebral palsy described how many children with limited mobility in Nigeria do not have access to ramps in public spaces and are carried by their parents over long distances to access healthcare. [...] Access to healthcare is another area that the government needs to weigh in. She disclosed that most mothers who live in Lagos’ outskirts have to walk long distances, carrying their children on their backs to visit public health centres. This, she said, often results in backaches for the parents. She stated that there is an ongoing conversation with the Lagos government to deploy corps members serving the state and are good in physiotherapy to go to communities to help these mothers.

Another source states that many persons with disabilities cannot afford the artificial limbs they require:

“The Executive Director, Irede Foundation, Crystal Chigbu, has appealed to the federal government to implement the Discrimination Against Persons with Disabilities (Prohibition) Act which was signed into law on January 23, 2018, by President Muhammadu Buhari. [...] She expressed frustration over the stigmatisation faced by people with artificial limbs, while calling on government to ensure that persons with special needs enjoy equal right. [...] Chigbu further called on government to support artificial limbs manufacturers, so that the price could be reduced. Chigbu noted that since the inception of the foundation eight years ago, it has educated, encouraged and empowered 103 child amputees with 186 limbs across 20 states in 5 of 6 geopolitical zones in Nigeria. According to her, "In the last eight years, we have worked with a couple of corporate organisations, SMEs, multinationals, grant organisations and government agencies to provide free limbs to children and young adult. For this year we are going to give 70 limbs. "Limbs are very expensive and depending on the level of amputation you have used. The prices of limbs ranges and the different functions of the limbs determines to a large extent, the functionality of the limbs. "The cost of the limbs can be very frustrating for a parent, when you have planned that your child will use the leg for you maybe nine months and under six months, you have to change it. "The second challenge is the availability of the component in the country that is used to create artificial limbs. Most the components used to create artificial limbs are imported, they are manufactured in Nigeria. The federal government should see how they can start manufacturing artificial limbs in Nigeria to reduce the cost of buying imported limbs."

These reports provide specific information on access to mental health care:
“One out of four Nigerians suffer from mental health issues and about 50 million people are suffering from various kinds of mental illnesses according to the World Health Organization (WHO). However, despite this alarming figure, there are only eight federal neuropsychiatric hospitals in Nigeria.”

(Source: The Guardian (Nigeria), “Most Nigerians are dealing with undiagnosed trauma that affects their everyday life”, 10 July 2021)

“Mental health-care services [for PWDs] were almost nonexistent.”


“Mental health-care services [for PWDs] were almost nonexistent.”

Other sources report that there are "not enough" (CNN 25 Sept. 2020) or "too few" (Nigeria Health Watch 15 Jan. 2020) mental health professionals in Nigeria. The founder of MANI stated that mental health services in Nigeria are limited and that there are "few" psychiatrists and psychologists (MANI 10 Oct. 2020). The website of the Association of Psychiatrists in Nigeria (APN), an association of psychiatrists and "registered affiliates" from across Nigeria and the diaspora (APN n.d.a), which is "committed to holistic care for persons with mental illness and the promotion of positive mental health" (APN n.d.b), reports that there are 250 psychiatrists and 200 psychiatry trainees who are members of the APN (APN n.d.b). A September 2019 article by the UK's Guardian newspaper notes that "[m]ental health professionals are rare in Nigeria" and reports that "there are an estimated 150 practicing psychologists" (The Guardian 25 Sept. 2019). Similarly, the Al Jazeera article indicates that there are fewer than 150 psychiatrists in Nigeria, and that the "WHO estimates that fewer than 10 percent of mentally ill Nigerians have access to the care they need" (Al Jazeera 2 Oct. 2019). A Nigerian government report on the second National Strategic Health Development Plan states that "[o]nly 20% of Nigerians with serious mental illnesses (SMI) have received treatment in the prior 12 months, showing the level of neglect for mental healthcare in the country" (Nigeria [5 Sept. 2018], 25).”

(Source: Research Directorate, Immigration and Refugee Board of Canada, Nigeria: Mental health services available; treatment of persons with mental illness by society and by the authorities; state protection, including recourse and complaints mechanisms available in cases of abuse, (2018–October 2020), 10 November 2020)

5.2.5. Information relating to children and young people with sensory impairments

No specific and relevant information within sources consulted and timeframe were found.

5.3. Reasons for difficulties accessing health care
Discrimination acts as a barrier to accessing health care, according to Dataphyte, a Nigerian online platform that publishes and analyses public data:

“Discrimination against PWDs in Nigeria stems from the negative public perception of people with disabilities in communities across the country. In many communities, PWDs are commonly viewed as accursed due to misinformed cultural beliefs. This has led to poor identification, evaluation, screening, and placement of children with disabilities.”

(Source: Dataphyte: *Over 25 Million Nigerians Excluded Due To Disability*, 21 January 2020)

As a study by Grassroots Researchers Association demonstrates, the lack of access to healthcare for people with disabilities is due to many intersecting factors, including affordability, accessibility, mobility, availability and stigmatization:

“Healthcare Services

[...] Our findings reveal that the major challenges PWDs in North-Eastern Nigeria face in the Health sector include affordability, accessibility, mobility, availability and stigmatization.

Affordability and availability

A 58-year-old blind man from Damaturu, Yobe State, narrated that getting access to medical care back then was difficult but even with the modern health facilities now, PWDs still face the same situation:

“I became blind as a result of measles. I was 17 years old then and I could remember there was no medical centre or facility in my village then. My blindness was as a result of inefficiency of our government to do the needful in the local communities. Though there is a Primary Health Centre now, medication for the illness is not free and medicine is not available. There was no time that I was given free medical care because of my disability. I have to buy medicine whenever I or any of my family member takes ill”. 42

Another 35-year-old female respondent from Yobe State told GRA that although she has difficulty walking and no sources of income, she still has to pay medical bills without any subsidy. Her caregiver lamented that accessing healthcare services is hard and costly as well.

“I don’t find it easy getting treatment when I fall sick or any of my children does. This is because sometimes I don’t have money to buy hospital card to see a doctor or buy medicine. Government claim medicines are free in its hospitals, however, when you go you have to buy and mostly you don’t find medicine prescribed by doctors in the hospital”.43

A 65-year-old leprous man interviewed in Borno state shared his experience about the Leprosy Hospital located in the Molai community in Maiduguri. He narrated that there are no drugs in the hospital. Previously, services offered by the hospital included general medical treatment, general surgeries, laboratory, eye care and physiotherapy. 44 It was considered one of the best hospitals, but the situation dramatically changed after Netherlands Leprosy Relief (NLR) stopped providing financial, material and technical support some years ago. Another factor that contributed to the failure of the medical center was conflict: The General Hospital was rocked by a bomb-blast last year. 45
“When we go to the hospital, we buy drugs ourselves; no assistance from the government. Molai hospital which was meant for the leprous has nothing working in it; no drugs, less staffs with old equipment”. 46

Mobility, Accessibility and Stigmatization

Accounts from interviewees and medical experts working in North-Eastern Nigeria suggest that PWDs have serious challenges with mobility and accessibility. Even when they get stranded at stair cases, medical workers do not promptly assist. They often face stigmatization and their disabilities are often superstitiously associated with curses. Recounting her experiences, a 33-year-old lady from Adamawa State who has difficulty walking lamented her ordeals during visits to hospitals whenever she takes ill:

“No matter how small the hospital bill is, PWDs find it difficult to raise money to pay for hospital bills. A 35-year-old visually-impaired man in Borno states that medical bills are not affordable:

“Getting access to health facilities for disabled persons in the state is pathetic. My wife had terrible abdominal pains and I took her to the hospital for treatment. As a blind man, I expected that special considerations would be given to my wife as a person with disability but, unfortunately, we were rejected at General Hospital Maiduguri when we told them we cannot afford N6,800 medical Bill”.

The below reports also cite affordability and accessibility as the main barriers to healthcare for persons with disabilities:

“Most of these vulnerable persons and children cannot afford the basic and managing disability in Nigeria is expensive, so they suffer so much from hunger to lack of adequate medical care.”
“Although the National Health Act 2014 provides that children with disabilities are entitled to free medical care, parents of children with disabilities are going through horrendous experience to get hospitals and health management organisations to ensure the application of this law. One of the greatest challenges to the health care of children with disabilities is the drudgery of the National Health Insurance Scheme. Health insurance should and must be mandatory for all children with disability as of right. With health insurance for the child, her parents, over-burdened and saddled with humongous costs for the maintenance of the child, will focus on assisting the child with her other needs rather than worry much about funding the huge expenditure bills arising from providing assistive technology, myriad health challenges, drugs, etc.”

“Prohibitive Cost of Care
The cost of medical treatment is often beyond the means of the average person with a disability. Most persons with disabilities have no access to health insurance, except the few who work for the federal government.
“It is not really affordable because by the time you check the consultation fee and other fees, not everybody can afford it. Particularly the mentally ill, who have been neglected, and nobody is taking care of them.” – a man with mental illness, Benue

Inaccessible Information and Communications
Health-related information and educational materials are not available formats accessible to persons with disabilities in Nigeria. Hospitals lack sign language interpreters, so hearing impaired patients must depend on their family members and friends to communicate, representing a breach of confidentiality. Visually impaired patients are unable to independently read their medication instructions, and must also sacrifice their right to confidentiality in some instances.

“Our major challenge is communication, I had high BP, the doctor didn’t tell me my diagnosis. Health is not accessible to us as persons with disability. It’s a big challenge, so we rarely use hospitals but rely on self-medications or pharmacies.” – a hearing impaired woman, Lagos

“For most government programs that have to do with health, whether it is reproductive health or else, most information is not in accessible format for visually impaired people.” – a visually impaired man, Gombe

“Sometimes, when you go to the hospital, you are given different types of prescription. To find the drug you need to rely on somebody else, there is no inscription on the [medication] to identify which one you need to take in the morning, which one you take in the afternoon, which one is which.” – a visually impaired man, Gombe

Inaccessible Environment and Equipment
The physical environment at most health facilities in Nigeria is inaccessible to persons with mobility and visual impairments. Also, hospital beds and equipment may not be accessible to persons with mobility impairments.
“Health is not accessible, starting from the accessibility into the facility, to their beds. This caused me to lose my child 10 years ago when I was pregnant and enrolled for an antenatal clinic. Unfortunately the antenatal clinic was upstairs, the rest rooms and bathrooms were not accessible. If the hospitals had been accessible, I would have been on bed rest for them to manage my condition; I do not have a child till now.” – a female wheelchair-user, Lagos


“Persons with disabilities are among the poorest of the poor in Nigeria. Therefore, they find it difficult to access healthcare for their basic health needs. Many find it difficult to afford even the cheapest available healthcare as they have to pay extra for services such as hiring a sign language interpreter. Lack of financial accessibility also hinders people with disabilities to acquire assistive devices as these devices are not subsidized by the government.

(...) People with disabilities in Nigeria have limited or no access to information and communication on their rights, diagnosis, medical record and available services and programmes pertaining to their disabilities as well as on those services which are generally available to the general public.”


“Many health facilities in Nigeria have no ramps for those in wheelchairs, poor signage, narrow doorways, internal steps, inadequate bathroom facilities and inaccessible parking areas for people living with disabilities.”


“Public infrastructures in Nigeria is another... let me call it a hell to persons with disabilities ranging from the school, you can imagine as a person with disabilities you're going to lectures in a four-story building.. you can imagine you want to access probably a bank, hospital, places of worship, there’s no provision for ramp for you to come in,’ he said.

According to Nigeria’s Center for Citizens with Disabilities, 98 percent of public structures and facilities are not handicapped accessible.”


5.4. Have children and young people with disabilities experienced increased limited access to health care due to the COVID-19 pandemic?

This section should be read in conjunction with sections 5.12 to 5.16. within subsection COVID-19 response.

An academic study on the impact of COVID-19 for persons with disabilities describes various ways in which access to health care was impacted by the pandemic:

“Impairment impacts
While the COVID-19 pandemic had a negative impact in general on most people with disabilities in Nigeria, it had different impacts on people with different impairments. The pandemic put a lot of pressure on the health system and many services were disrupted. People with impairments that require ongoing medical care found it harder to access their health services they needed.

“Persons living with albinism are often at risk of developing skin problems. For this, they would need to visit the medical centre. But because of the lockdown and restrictions, most of them just remain at home and those skin problems continue to grow... If there is a crisis in the future leading to a lockdown, the government should make ways for any person living with albinism and having skin issues to easily access medical help.” (man, albinism, IWCOVNGA1)

Health services that were not disrupted had to adjust their protocols to reduce social contact to avoid spreading the virus. Some of these measures resulted in services becoming inaccessible. The impact of wearing masks made interacting with medical staff particularly difficult for people with hearing impairments. People with visual impairments also faced particular challenges accessing health care due to the pandemic.

“Visiting hospital has been discouraging for me as a deaf person. Before the pandemic I tried as much as I could to lip-read while consulting a doctor, but with the new trend of prevention garments (i.e. masks) worn by doctors, interaction is impossible for me while in the hospital.” (woman, hearing, IWCOVNGA9)

“Access to healthcare was cut short... Since the lockdown has now been lifted, people can now freely go to the hospital, but still there are measures and they have to really be very careful and take great precautions.” (woman, visual, IWCOVNGA4)

Access to assistive technology and rehabilitation services also became harder during the pandemic, which had a negative impact on people who use assistive technology and these services.

“I use callipers and crutches. Then my callipers became faulty. There was no means for me to go and fix it. I have a friend who would normally help me to fix it at a place called Mowe, in Ogun State. But due to the lockdown, there was no means for me to go to Mowe. This meant I won’t be able to easily move around, and had to depend on people.” (woman, physical, IWCOVNGA6)

Other goods and services that are used by people with disabilities became very expensive to buy or hard to access. For example, due to skin complications, people with albinism require access to sunscreen.

“I don’t have sunscreen, and I cannot afford it now.” (woman, albinism, IWCOVNGA7)"

Inclusive Futures, in their situation report on organisations of people with disabilities, highlights the reduced access to skin cancer treatment for persons with albinism during the pandemic, causing at least 10 fatalities:

“Just as people with disabilities were disproportionately affected by the pandemic, members, staff and volunteers of OPDs were also impacted. For example, an organisation of people with albinism in Nigeria lost at least 10 of their members to skin cancer because during the pandemic the Government stopped providing financial support for skin cancer treatment.”

(Source: Inclusive Futures: Consequence of Exclusion: A Situation Report on Organisations of People with Disabilities and COVID-19 in Bangladesh, Nigeria, and Zimbabwe, September 2021)

A PWD describes how the hospital unit where she received physiotherapy was closed due to COVID-19 and how during the pandemic she has avoided hospitals because her weak immune system heightens her risk of contracting COVID-19:

“Ifeoma, a university student in her 30s, is a spinal injury survivor. […] She was seven months into a further two-year course when the pandemic hit. The sessions are expensive at about 22,000 naira (about $53) each, and the taxi ride costs an additional 14,000 naira ($32). The doctors say that if she can complete her physiotherapy she stands a good chance of regaining the use of both her legs. But the pandemic has put her physiotherapy, and therefore her dreams of walking again, on hold. The hospital she attends was flagged as a COVID hotspot early on in the pandemic and the physiotherapy unit was closed down. Even if it had not been, Ifeoma says, she would not want to go to the hospital and risk catching COVID there. “I have not gone to the hospital again since this whole thing began. I do not go out as often as I used to. My immune system is also low and if I am exposed, I can be infected easily,” she says. During the lockdown from April to July 2020, Ifeoma, who relies on a wheelchair to move around, fell down in her house and broke her arm. “When I called the doctor, he told me that I should try and think on what I can do on my own to deal with the broken arm. I could not go to the hospital because of the pandemic. When the pain was becoming unbearable, someone introduced me to a doctor in another private hospital who came to my aid.” The doctor visited her home to set the break and, 14 days later, returned to remove the caste. Thankfully, her arm has since mended.”

(Source: Al Jazeera, How COVID-19 has impacted Nigerians with disabilities, 4 April 2021)

5.5. Are steps taken by family or community members to ensure their health needs are met? Are these successful?

No specific and relevant information within sources consulted and timeframe were found.

5.6. Is there evidence that certain groups of children or young people with disabilities have more difficulties accessing healthcare than others?

Access to healthcare, and especially access to sexual and reproductive healthcare services is especially difficult for women and girls living with disabilities. As the Nigerian Government’s National
Policy on Sexual and Reproductive Health and Rights of Persons with Disabilities with emphasis on Women and Girls states:

“A Situation Analysis on Access to Sexual and Reproductive Health Services by Women and Girls with Disabilities in Nigeria recently carried out by DRAC [Disability Rights Advocacy Centre] highlighted the plight of WWDs [Women with Disabilities] in accessing health services in Nigeria with a focus on their sexual and reproductive health. The SA [Situation Analysis] revealed that women with disabilities experience barriers in accessing healthcare at multiple points of the healthcare process such as, lack of accessible facilities and equipment, lack of accessible communication facilities, lack of skilled medical providers, economic barriers, negative attitude of health care workers. Respondents also said there is no specific policy or framework solely aimed at enabling access to health for women and girls with disabilities.”

(Source: Government of Nigeria, National Policy on Sexual and Reproductive Health and Rights of Persons with Disabilities with emphasis on Women and Girls, June 2018, pg. 4)

A later report from Disability Rights Advocacy Centre outlines that prescriptive gender norms relegate women and girls living with disabilities to an even lower social standing than women and girls living without disabilities:

“While quality of life of PWDs is generally poor, it is common knowledge that women living with disability suffer more. The women are poorer and generally face barriers to full equality and advancement because of such factors as race, age, language, ethnicity, culture, tradition and religion. Persistence of certain cultural, legal and institutional barriers makes women and girls with disabilities victims of two-fold discrimination: as women and as persons with disabilities. Girls and women of all ages with any form of disability are among the more vulnerable and marginalized of society. There is therefore need to take into account and to address their concerns in all policy-making and programming. Special measures are needed at all levels to integrate them into the mainstream of development.”

(Source: Disability Rights Advocacy Center, A Pilot Accessibility Audit on Health, Social and Criminal justice Services in the Federal Capital Territory, February 2019, pg. 7)

5.7. Are measures in place to train doctors and other health workers on the rights of persons with disabilities, particularly children and young people?

Information from the below sources on the negative attitudes among health workers / lack of personnel who are specialised in disability inclusion and services suggests that health workers do not receive adequate training:

“Persons with disabilities face difficulties accessing adequate health services, often being limited by the availability of accessible hospitals and personnel who are aware of and specialized in disability inclusion and providing services for persons with disabilities.”


“Negative Attitudes Among Health Workers
Health workers exhibit negative attitudes toward persons with disabilities, particularly in the area of sexual and reproductive health. They generally frown upon the idea of a woman with a disability being sexual, and if the woman is pregnant, health workers will probably ridicule and blame her for it. The health workers’ attitudes reflect those of the larger society that discriminates against women and girls with disabilities. In some instances, this has reportedly led to the sudden death of the woman.

“There are instances where midwives help a woman to give birth, see a person with albinism, and are in shock. “What have you given birth to?”. And some women will just go into depression and die.” – a man with albinism, Abuja

Ignorance of Disability Among Health Workers People affected by leprosy complain that health workers stigmatize them as being contagious long after they have ceased being so, although they live with the resultant impairments caused by the infection. Such an attitude is indicative of the ignorance level among health workers on topics with which they should be familiar—they should be educating the general population to reduce stigma.

“I am a leper, when I go to the hospital, they treat me very well the first day. And, if I pass the night at the hospital, the next day they chase me out saying other patients won’t want to come because I am there.” – a woman affected by leprosy, Jos


5.8. Are legislative and other measures in place to ensure that health treatment is provided to persons with disabilities on the basis of free and informed consent, particularly children and young people?

The 2003 Child Rights Act regulates the conditions of consent for children and young people, including for those living with disabilities. It states:

“(2) The consent of a child who has attained the age of sixteen years to the taking from himself of a scientific sample shall be as effective as it would be if he had attained the age of majority and where a child has by a virtue of this subsection given an effective consent to the taking of scientific sample, it shall not be necessary to obtain any consent for it from any other person. (…)

(3) A scientific sample may be taken from a child under the age of sixteen years, not being a child as is referred to in subsection (4) of this section, if the person who has the care and control of the child consents.

4) A scientific sample may be taken from a child who- (a) is suffering from mental disorder within the meaning of any relevant law in Nigeria; and (b) is incapable of understanding the nature and purpose of the scientific tests, if the person who has the care and control of the child consents and the medical practitioner in whose care he is has certified that the taking of the scientific sample from the child shall not be prejudicial to his proper care and treatment.

Where the Court makes an interim care order or interim supervision order, it may give such directions, if any, as it considers appropriate with regard to the medical examination, including psychiatric examination, or other assessment of the child, but if the child has
sufficient understanding to make an informed decision he may refuse to submit to the examination or other assessment.


5.9. Are there examples of treatment being provided to children and young people without consent (e.g. forced sterilization)?

This section should be read in conjunction with section 8, Institutionalisation.

There is some evidence pointing to the forced sterilisation of girls with intellectual disabilities. A study carried out by Al Oufani, Lecturer at the University of Benin, and published by the African Human Rights Law Journal states:

“Adolescent girls with intellectual disabilities are highly susceptible to involuntary sterilisation in Nigeria. Existing Nigerian laws contain no provisions expressly prohibiting involuntary sterilisation and the provisions that could be indirectly applied are inadequate.

(...) evidence reveals that adolescent girls with intellectual disabilities are subjected to involuntary sterilisation at the instance of family members. Although there is a lack of data indicating the incidence of involuntary sterilisation of girls with intellectual disabilities, it can be deduced that it occurs in Nigeria. For instance, Animashaun discussed the criteria and indications for sterilisation of girls with disabilities as seen from past clinical practice in Nigeria. According to him, sterilisation can be carried out on request by parents or guardians; if there is a severe handicap so incapacitating as to impede effective parenthood; if there is a high risk of hereditary conditions such as Down syndrome; as well as the presence of a low level of intelligence or psychiatric disorders. Similarly, in a 2015 report, it was stated that girls with intellectual disabilities were involuntarily sterilised to prevent them from falling pregnant, especially in situations of sexual abuse. More so, in a recent empirical research involving 224 respondents, 87 (38.8 per cent) of respondents acknowledged that they had heard of or knew of instances where adolescent girls with intellectual disabilities had been sterilised.

Negative stereotypes and beliefs are factors that cause girls with intellectual disabilities to be involuntarily sterilised. An example of such beliefs is that intellectual disability has spiritual and/or religious inferences, and that it is hereditary. So also are the assumptions that women and girls with intellectual disabilities are ‘child-like’, ‘asexual’, ‘hyper-sexual’, ‘dependent’, ‘incompetent’ and helpless. It is also widely believed that persons with intellectual disabilities are incapable of parenthood and have the potential to harm their children.

The inability of parents and family members to provide financially for their intellectually-disabled children or their offspring is another challenge to protecting adolescent girls with intellectual disabilities from involuntary sterilisation. Empirical research shows that financial incapacity is acknowledged by parents as a reason to sterilise girls with intellectual disabilities in Nigeria.”


17 Animashaun (n 16 above) 254.
“Persons with disabilities, especially women and girls suffer several forms of violence and abuse. According to Disability Rights Centre (DRAC), these include the violations of their rights to free and informed consent regarding their sexual and reproductive health. Many women with disabilities face forced sterilization which occurs when a woman is sterilized after previously refusing the procedure without her knowledge or without been given an opportunity to give her consent. While coerced sterilization occurs when certain incentives or tactics are used to force a woman to undergo such a procedure. Many women with disabilities undergo forced/coerced sterilization mostly with the consents of others, thereby violating their rights.”


Timothy Ali Yohanna says the following about treatment without consent in a health-care context:

“I will tell you that 85% of what they do to children is without consent. For example, if a child was born in the camp of an armed group and then liberated by the government or rescued and brought into the custody of the military, so many atrocities happen to those children without consent. Even at the government hospital where, literally, you think they are now saved, so many things go on without their consent.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

5.10. Are records of treatment without consent kept?

No specific and relevant information within sources consulted and timeframe were found.

5.11. Does the State monitor and review equal access to health treatment for persons with disabilities?

Timothy Ali Yohanna told Asylos and ARC Foundation:

“I'll put the question back to you. Do they have a database to monitor [equal access to health treatment for persons with disabilities]?

[...] No, they are not doing anything, nothing like monitoring. There is nothing like a committee or tools to do that.”
COVID-19 response

5.12. What national emergency planning legislation and/or policy was in place before the outbreak of the COVID-19 pandemic?


“In addition, at risk populations, such as homeless persons, travellers, mentally ill, elderly, and persons with disabilities may require temporary shelters, increased levels of medical care, food, water and other commodities and services during an influenza pandemic.”

(Source: Government of Nigeria, Nigeria National Pandemic Influenza Preparedness and Response Plan, September 2013, pg. 59)

5.13. Since the outbreak of COVID-19 what measures (legislative and policy) have been taken to protect the lives, health and safety of persons with disabilities?

The National Human Rights Commission in Nigeria published ‘Standard Minimum Guidelines for the Human Rights of COVID-19 Patients in Treatment Centres in Nigeria (2020)’, which state the following:

“What you need to Know
What
1. The Standard Minimum Guidelines for Human Rights of COVID-19 Patients in Treatment Centres in Nigeria (the Guidelines) is a policy instrument and recommendation made by the National Human Rights Commission (the Commission) to the government and health authorities for the mainstreaming of human rights guarantees into the treatment processes of COVID-19 patients in Nigeria.
2. Issuing these Guidelines is a part of the mandate of the Commission to promote and protect human rights as enshrined in the Constitution of Nigeria, other legislations in force in Nigeria and regional and global human rights instruments to which Nigeria is a party.
3. The present Guidelines were made pursuant to the powers and functions of the Commission in section 5(a)(d)(l) and section 6(g) of the National Human Rights Commission (Amendment) Act, 2010.
4. The Guidelines contain human rights guarantees such as the rights to life, health, dignity, privacy, religion and protection against discrimination. It also contains provisions aimed at ensuring access to adequate accommodation, food, water and sanitation by patients at treatment centres and facilities (hereinafter referred to as the Centres) in Nigeria.

Why
1. The COVID-19 pandemic has taken its toll on the enjoyment of human rights. There have been restrictions put in place by governments at national and state levels, with huge impacts on socio-economic wellbeing of Nigerians.
2. Governments have set up Centres across Nigeria where COVID-19 patients are treated by medical personnel and other staff. As a result of the contagious nature of the virus, extreme care must be taken to secure the human rights of the patients in the Centres.
3. The Guidelines are aimed at ensuring that the Centres operate in line with international human rights norms and to secure the rights of the patients, medical personnel and support staff.
4. It is also important that vulnerable groups such as children, persons with disabilities, older persons and women are treated with the dignity and protection accorded their status.

How
1. The Guidelines are applicable to federal and state governments, all public and private Centres and other facilities in Nigeria where COVID-19 patients are treated.
2. It shall be the duty of governments and the Centres to implement the Guidelines.
3. The rights and guarantees enunciated in the Guidelines shall be enforceable by any patient or persons who have suffered violations in accordance with the Constitution.
4. The Commission when requested, shall provide technical support in designing systems and frameworks for implementation of the Guidelines.
5. The Commission shall monitor, investigate, enforce and issue periodic reports on the implementation of the Guidelines.


According to the Covid-19 Disability Rights Monitor, a coalition of civil society groups working on disability issues amidst the Covid-19 pandemic, and the civil society organisation Network of Disabled Women, the Nigerian government failed to take extra precautions to protect homeless children living with disabilities:

“Respondents from Uganda, Nigeria, Tanzania, and India reported that their governments took inadequate measures to protect children with disabilities living on the streets. A representative of an organisation of persons with disabilities in Nigeria said: “Children (with disabilities) and their parents are still in the street with no face masks, no social distancing. Their lives are in danger.”


“A statement signed by the Chairperson and CEO of the Network of Disabled Women, Lois Auta, noted that Nigeria has over 20 million citizens with disabilities who are much more prone and vulnerable to the pandemic.

According to the statement, “Persons with disabilities feel they have been left behind. Precautionary measures, such as social distancing and self-isolation may be impossible for those who rely on the support of others to perform their daily tasks.

The statement noted the challenge PWD’s face when trying to access health facility and other physical barriers in their daily lives, calling on critical stakeholders to create partnership opportunities for them while Federal and State Governments should ensure that their rights are given to them.
“Access to Healthcare facilities is already a big issue, other barriers include physical obstacles, discrimination, lack of access to ICT and other existing stigmas that exclude persons with disabilities. ‘Presently, PWD’s have been carried along as expected in the struggle on ending this menace, no COVID-19 disability response team that has been set up, no funds set aside by the government for the welfare of persons with disabilities during this lockdown, the isolation centres, medical infrastructures and equipment are inaccessible to PWDs,’ the statement said.

It therefore called on government to provide free mobile data and internet access as well as engage persons with disabilities in the call centres and situation rooms.

‘All updates/news/announcement on COVID-19 must be accessible and inclusive, Create prevention and awareness programs and Educate caregivers on how to treat and take care of PWDs.’

‘We want support and donations to disabled women organisations. Mechanisms must be created to provide funding to cater for the needs of persons with disabilities, Food banks that will supply foodstuffs and toiletries for persons with disabilities should be established and Engage Disabled People Organisations in the Presidential Task Force Team on COVID-19,’ the statement added.

(Source: Blueprint, Disabled network demands inclusion in Covid-19 palliative measures, 7 April 2020)

These findings are echoed by the Coalition of Disability Organisations, who issued the following statement on 4th April, 2020:

“To our greatest irritation, the government has continued to ignore us again and again by paying mere lip service for the cameras with no concrete plan to address our issues raised in this COVID-19 season which is sign of abysmal neglect and marginalization of over 25 million Nigerians with Disabilities.

By way of notice, this coalition, just as we did to push for the signing into law of our Disabilities Rights Act (2018) has resolved to demand for our rights even a great risks to our lives to disrupt the PTF briefings to show the world how insensitive our government is to the plights of persons with disabilities in the time of emergencies. No Retreat! No Surrender!!

We had informed the government through making the following demands:
The PTF on COVID-19 should present a clear-cut plan on how to provide Palliatives for persons with disabilities and the provision of the Palliatives should start immediately because persons with disabilities are most vulnerable among other social groups. Again a person with disability should be appointed to be a member of the PTF.
The Honourable Minister should as a matter of urgency include PWDs in the CCT programme and no cash payments please as we have traceable addresses, phone numbers, bank accounts and BVN.

Since they have failed to do the above, our members have no other choice than to come out enmasse and disrupt the ongoing CCT exercise anywhere it is being held and equally disrupt PTF COVID-19 Briefings here in Abuja and Nationwide.”

(Source: AllAfrica, Nigeria: Coalition of Disability Organizations Demand Inclusion in PTF On COVID-19, 20 April 2020)
An academic study, which involved interviews with persons with disabilities between July and October 2020, demonstrates that official government social protection continued to be limited further into the pandemic:

“Governance and services
Access to official government social protection assistance in response to the pandemic was noted to be a major issue for both the participants and other people with disabilities in the community. Material and food assistance (often referred to as ‘palliatives’ in the context of Nigeria) that were provided were often not inclusive and did not reach many people with disabilities.

“I was excluded during the distribution of palliatives provided by government. I was surprised at that.” (man, visual, IWCOVNGA5)

Issues included support only being provided in certain States; reduced financial support which was being provided previously due to the economic shocks of the pandemic; inaccessible distributions; people with disabilities not being included amongst the list of beneficiaries; information about relief distributions not being accessible resulting in people with disabilities not attending; the distances to distribution being too far; and being stopped by police when trying to go and get assistance due to lockdown.

“The mode of distribution of palliatives by the government remained poor throughout, and not disability inclusive.” (man, visual, IWCOVNGB5)

“During the lockdown, I only heard that disabled people would receive money help and other things from the federal and state governments, but it did not happen. I did not hear when and where to go and get it.” (man, hearing, IWCOVNGA3)

“Even with the palliatives that were shared, you hardly see an inclusive sharing formula.” (man, physical, IWCOVNGA10)

“I have been treated differently and unfairly by others when the sharing of palliative was ongoing.” (woman, hearing, IWCOVNGA9)

This has resulted in confusion about official relief efforts and the extent to which people with disabilities were being discriminated against. Some participants felt that the lack of consideration was not deliberate, but others felt that there was disability discrimination, pointing out the lack of inclusion of people with disabilities in the distribution of palliatives and feeling like they were deliberately devalued.

“In giving out palliatives, people with disability were not deliberately discriminated against. However, consideration was not given to ensuring that persons with disability were well informed, and could easily reach the locations where these items were given out.” (woman, physical, IWCOVNGA6)

“During the lockdown, relief materials meant for persons with disabilities were diverted by unscrupulous and callous people in government.” (man, physical, IWCOVNGB8)

“Persons with disabilities were completely left out. Perhaps, government officials believe that persons with disabilities are not as important as other people.” (man, visual, IWCOVNGB5)
There were some concerns about corruption amongst the interviewees and the wider community. There was the suggestion that members of the government in Nigeria are taking advantage of the situation to further their own interests, suggesting mistrust and a lack of confidence in the government to act in the best interests of the population.

“Although coronavirus is in Nigeria, the situation is being projected more than it actually is; that’s what I mean by saying that it’s over-hyped. And it is a gimmick by the Nigerian government and politicians to siphon or embezzle money.” (man, albinism, IWCNVNGA1)

“Most people believe that the government called off the lockdown because government officials have achieved their sole purpose of carting away public fund and donations meant for managing the pandemic. The whole thing just succeeded in deepening the levels of poverty, hunger and suffering of citizens.” (man, visual, IWCNVNGB5)


The below sources state the persons with disabilities were still having difficulties accessing government food distribution programmes in 2021:

“With the curfews also came economic hardship; his work dried up while his wife, a businesswoman, was unable to go outside to work during lockdown. Even though he has been told to register with the Nigeria National Association for the Deaf (NNAD) to receive palliative help, none has been delivered to any associations for PwDs yet.

“The truth is we can no longer continue to depend on government that hardly shows up for us at all times. The only body that can vouch for you when oppression and these social exclusion things begin to set in, is your own association. “So, what I expected was the government should have met with leaders of PwD groups to let them understand what exactly is going on in this world of COVID-19.”

By doing this, Ade Oba believes, they would not only have understood what their needs are, but also how to meet them.”

(Source: Al Jazeera, How COVID-19 has impacted Nigerians with disabilities, 4 April 2021)

“Members of the National Association of the Blind have been excluded from the government’s distribution of food (palliatives) to assist with the effects of the COVID-19 pandemic.

Adamu expressed concern over the fact that most of its members, the association, and lots of PLWD had not benefited from Federal Government’s COVID-19 palliatives.

“We were told that five per cent of the COVID-19 intervention fund and palliatives were supposed to be given to persons with disabilities but we got nothing.

“We were told to apply through the internet but most of our members cannot access information online, we should be considered.

“We want our own fair share of the COVID-19 palliatives,” he said”
This news article published later in the epidemic also makes the criticism that persons with disabilities have not been prioritized during the rollout of COVID-19 vaccines in Nigeria:

“Vaccines are now available globally to help protect people from COVID-19, yet many people with disabilities — who are at higher risk of adverse COVID-19 outcomes — have not been prioritised in Nigeria and across the ECOWAS region. This lack of equity overlooks persons with disabilities despite the urgency to protect at-risk individuals. Without ample vaccine supply, prioritisation, concerted efforts for accessibility, inclusion, or outreach for people with disabilities, there will continue to be challenges with access and uptake, leaving this population at risk and unvaccinated.”

(The Day Live, Black Purist ECOWAS: People with Disabilities Lack Access to COVID-19 Vaccines in Nigeria, June 2021)

Theophilus Odaudu told Asyos and ARC that policies and programming introduced during the Covid-19 pandemic did not consider the specific needs of persons with disabilities, which he relates to the prevailing culture in policy making in Nigeria, which is not inclusive for persons with disabilities:

“For COVID-19 one thing that became clear was the fact that persons with disabilities in Nigeria, and I guess it’s the situation across many countries in the globe, were left behind in terms of policies and programming because a lot of the interventions happened not to be inclusive and, in many cases, persons with disabilities were not involved or consulted or carried along. And of course, there were several regulations that were passed to kind of bring relief or help curtail the spread of the virus and all of that. And only on few occasions, only one that I remember, did it mention persons with disabilities as needing special or specific kinds of intervention. So, a lot of this has to do with the fact that it has been the usual practice to design policies and programmes without considering the implication for persons with disabilities. It is not a culture in policymaking in Nigeria to consider persons with disabilities and that thought pattern was carried into the policies, the regulations, and all that were designed in the wake of COVID-19. So, you find a situation where after every policy or every regulation, persons with disabilities do point out areas of exclusion and make their advocacy points to try to see how such can be retracted, or amended, or corrected in subsequent policies or regulations to be made.

I guess the gap is, like I said, as a result of the fact that it has not been a culture - it's not a practice to always consider persons with disabilities in policy formulation or design and that's probably the same thing that was carried into COVID-19 interventions. So, even when the government decided to do some humanitarian interventions around COVID-19, providing relief materials to persons, especially the vulnerable and the poor in the society, there wasn't specific consideration for persons with disabilities until organisations of persons with disabilities decided to regroup and began to demand for such inclusion that the government began to also consider persons with disability in that light. So, a lot has to do with, I don't want to say ignorance, maybe negligence is better, on the part of the government and those who design policies.”
5.14. What have been the practical implications and outcomes of legislative and policy measures to curb COVID-19 on persons with disabilities

A report authored by the non-governmental organisation Validity Foundation shows that the pandemic, and measures responding to it, have led to a rise in sexual and gender-based violence, committed – amongst others – against women and girls with disabilities:

“Respondents in Kazakhstan, Namibia, Nigeria, Rwanda and Zimbabwe noted significant increases in cases of gender-based violence – including the rape of a girl with disabilities by multiple men in Nigeria.”

(Source: Validity Foundation, Statement of the Coordinating Group of the COVID-19 Disability Rights Monitor at the Opening of the Twenty-Third Session of the Committee on the Rights of Persons with Disabilities, 28 August 2020)

The same source notes that the lockdown has resulted in an effective detention of people with disabilities in some of the country’s institutions:

“In Nigeria, a respondent with disabilities told us that people were “effectively imprisoned” due to a total lockdown of the institution: “A lot of people died because of this,” they said.”

(Source: Validity Foundation, Statement of the Coordinating Group of the COVID-19 Disability Rights Monitor at the Opening of the Twenty-Third Session of the Committee on the Rights of Persons with Disabilities, 28 August 2020)

The Covid-19 Disability Rights Monitor, a coalition of civil society groups working on disability issues amidst the Covid-19 pandemic, states that, as a direct result to the measures designed to respond to Covid-19, there were instances of police brutality against people with disabilities:

“There were reports of police brutality against women and girls with disabilities who broke the curfew rules to seek food. For instance, a respondent from a Nigerian organisation of persons with disabilities said that “a mother of a child with Cerebral Palsy was harassed by policemen on her way to collect food relief at one of the distribution centres.”


As reported in an Al-Jazeera news article, a deaf man who had gone for a walk was manhandled by a police officer after he unknowingly violated a curfew imposed due to COVID-19:

“The deaf person does not know if a hammer is coming behind him. Even if someone shouts to the deaf man to run, he does not hear and does not know what to do,” says Raji Ade Oba, a 35-year-old researcher and teacher.

He stresses the importance of social media messaging when it comes to advising people about new rules during the pandemic.
When the lockdown started in March, curfews were imposed in different parts of Nigeria and announced on the radio. But Ade Oba hadn’t heard them. So, when he left his house to go for a short walk in his neighbourhood, he did not realise it was under curfew.

“I almost got knocked down by one of the police officers from behind. I was arrested and manhandled, before being taken to the police station where I let them know that I am a special needs person, that I was unaware of the curfew at the time.

“Well you wouldn’t blame them, I did not write ‘deaf man’ on the back of my clothes. There is no way they could have known. My own disability is not visible,” he says.

“It was God that saved me that day. Nobody cares whether everybody has access to whatever information they pass around, but to them, everybody is a lawbreaker. How could I have been killed over a law I had no prior access to? Over a law nobody wants to hear you broke unintentionally? I almost got lynched.””

(Source: Al Jazeera, *How COVID-19 has impacted Nigerians with disabilities*, 4 April 2021)

5.15. Have children and young people with disabilities had adequate access to food and essential items since the outbreak of COVID-19?

Various sources, including the non-governmental organisation Validity Foundation and the Covid-19 Disability Rights Monitor, point out that people with disabilities had lower and/or inadequate access to food and other essential items during the pandemic.

“[…] respondents from low and middle income countries including Uganda, Bangladesh, Nigeria, and Sierra Leone said that rising inflation rates meant that they could not afford food and medicine.”


“The survey has revealed that persons with disabilities around the globe did not have access to food and adequate nutrition during the COVID-19 pandemic. Almost one third (633) of the survey respondents in 81 countries said that persons with disabilities in their country could not access food. The ten countries where the highest percentage of respondents reported no access to food were Uganda, Nigeria, Kenya, Bangladesh, India, Colombia, Côte d’Ivoire, Tanzania, Rwanda, and Peru.”


In an article published in July 2020, the Nigerian news outlet Sahara Reporters states that women with disabilities had little to no access to a government distribution of palliative packages meant to relieve the strain on the population.

“Women with disabilities across Nigeria have lamented their exclusion from intervention programmes by governments meant to cushion the effect of the COVID-19 pandemic. The women, who spoke in a virtual meeting organized by BONews Service with support from Urgent Action Fund-Africa, said the government had neglected them. They also complained that they had been ignored in designing interventions regarding issues that affect them the most. Egwu Stella Udoka, who hailed from Ebonyi State, said Governor Dave Umahi gave
N1m to PWDS across the state during the lockdown, adding that each person only got N1,500. She added that most people couldn’t go to the distribution point to collect the money as there was lockdown in the state, adding that the cost of transportation was more than the N1,500 the government was distributing.

She said, ‘Also, because of our disabilities, we couldn’t move independently and it is an extra cost to go with an aide because we want to collect N1,500. If persons with disabilities were included in the planning stage, the governor would have known that N1m might sound huge but it can’t cater to the needs of the disabled people in the state.’

Ibitoye Helen, who lives in Ekiti state, said the government excluded women with disabilities from the distribution of relief packages in the state but went on-air to announce people with disabilities were taken care of. She, however, noted that the government was forced, after public outcry, to make provisions for persons with disabilities in the distribution of palliatives.

‘When Governor Fayemi started the distribution of the palliative, we (women with disabilities) didn’t get anything, even when the government officials were announcing that they had been sharing it with persons with disabilities across the state.
‘It was when the state secretary of JONAPWD complained on social media that we were called to come and get our share’ - Helen said.”

(Source: Sahara Reporters, COVID-19: Women With Disabilities Lament Exclusion From Palliatives Distribution, 13 July 2020)

An academic source highlights that economic and food insecurity has been an issue for persons with disabilities since the outbreak of the pandemic:

“Economic impacts

In a similar way to the way many people across the world had experienced the crisis, the participants with disabilities and their families in Nigeria reported experiencing major negative economic impacts due to lockdown restrictions. Many descended into (deeper) poverty as they lost their jobs, businesses, or other streams of income.

“I have not received salary [since February 2020]. It affected both my financial and economic life.... For me, it has not been easy.” (man, albinism, IWCOVNGA1)

“Since February this year [2020], I have not received any salary. My financial stress started then and has continued to worsen by the day. I am now unable to meet basic personal needs and other responsibilities.” (woman, albinism, IWCOVNGA7)

“I am also a partaker in all the economic troubles brought about by COVID19. [He was sent home from work at radio station]. Being a private sector organisation, no payments are being made to affected workers.” (man, physical, IWCOVNGB10)

However, some employers did provide some financial support, which made life a little easier.

“During the lockdown, the school management continued to assist me financially for some time.” (man, hearing, IWCOVNGA3)
Participants with family dependants were especially affected by economic impacts due to existing financial pressures.

Participants reported reduced food consumption and hunger as they no longer had the money to pay for regular food.

“During this lockdown, it was difficult for us to find money for food.” (man, hearing, IWC0VNGA3)

“Meals were no longer guaranteed.” (man, visual, IWC0VNGA5)

“In my own family, it has not been easy as I said. Sometimes, we compulsorily fast. If we cannot get what to eat in a day, we fast. We could eat in the morning, then reserve the lunch for dinner. This is how we have been living, and to be sincere, it has not been easy.” (man, physical, IWC0VNGA8)

A knock-on effect of the pandemic was for food costs to increase, making it harder to access them for people with disabilities.

“During the lockdown, there was uncontrolled inflation. Prices of food items just went up, but government did nothing to manage the situation.” (man, visual, IWC0VNGA5)

“As a mother with kids, luxury feeding is no longer an option due to shortage of funds and high costs of foodstuffs. Prices have skyrocketed due to the pandemic. It is really devastating.” (woman, hearing, IWC0VNGA9)

Food insecurity became such an issue that some participants regarded it as a bigger threat than COVID-19 itself.

“Hunger is a greater killer than COVID-19.” (woman, physical, IWC0VNGA6)

“At a point during the lockdown, [COVID-19] became a less important issue than the widespread hunger.” (woman, hearing, IWC0VNGB9)

The financial crisis caused the participants and their families stress and pressure as they struggled to meet their and their families’ needs, including for food, rent, and utilities.

“Staying home without food or money for months was frustrating.” (man, hearing, IWC0VNGB3)

“This pandemic brought a lot of sadness; people losing their jobs, finding food to eat is a problem. As I am talking to you right now, I am owing house rents because since February [2020], I have not gotten salary.” (woman, albinism, IWC0VNGA7)

5.16. Have children and young people with disabilities been disproportionately impacted by COVID-19?

This section should be read in conjunction with all other sections within section 5. Access to services and support.

UNICEF predicted in April 2020 that children with disabilities will be disproportionately affected by COVID-19, stating that:

“The current coronavirus disease 2019 (COVID-19) context has disrupted life in every corner of the world and will likely disproportionally affect those children with pre-existing vulnerabilities. The greater burden faced by children living with disabilities means that additional efforts will be required to ensure their needs are being met when transitioning to the different pandemic phases. Programmatic actions will need to address these specific challenges during the pandemic and post-pandemic period along differentiated, inclusive policy responses.

Some underlying health conditions place children living with disabilities at higher risk for becoming infected with and developing severe illness as a result of COVID-19. Additionally, children living with disabilities, especially those with difficulties in the domains of hearing, seeing and cognitive functioning, also face important barriers in the access to inclusive public health information and communication strategies that are crucial as preventative measures during pandemic periods. Access to essential health services and WASH facilities are also important factors, not only because many children living with disabilities live in poverty contexts but also due to the intrinsic barriers in accessing these services and the limited capacities of health systems to deliver inclusive health care services.

The social distancing measures implemented by many countries have caused severe disruptions to daily routines. As of April 26, 2020, schools have been suspended nationwide in 189 countries.[1] For all children, such closures may imply a lack of access to important resources. For children with disabilities, remote home schooling not only requires access to adequate IT resources and internet, availability of books and other learning materials, but also, access to specific assistive devices or special education curriculums that allow for a continuous education at home that accommodates the child’s specific learning needs.

There are also widespread concerns about the effect of social isolation or social distancing on child wellbeing, including increased anxiety, depression, stress, and concern about exacerbation or relapse of pre-existing mental health issues, placing children at increased risk for clinically significant mental health issues, alcohol and substance misuse and suicide.[2] Children with existing mental health functioning difficulties, might be particularly affected by disruptions to services, isolation, and possible exacerbation of symptoms in response to pandemic-related information and behaviors. Quarantine constrains and overall burden faced by families might also place children with disabilities at increased risk for discrimination and of being exposed to violent discipline methods in the household.

Finally, ongoing monitoring efforts, including surveys and censuses, have been severely affected as a result of the strategies to contain the spread of COVID-19 across the globe. In many countries, National Statistical Offices are suspending or adjusting current operations to protect the health and safety of their staff and the public, trying to make sure that they still recollect data from the population using alternative methods, such as telephone and internet-based data collection. While these methods will likely provide important data to
track and capture the burden and effects of the COVID-19, there are concerns about the need to ensure that these approaches are inclusive of people with disabilities.”


Income levels and access to healthcare and basic services were negatively affected by the COVID-19 pandemic, according to the findings of a study that included interviews with fifty-four PWDs in Nigeria. The study also found that PWDs experienced more domestic violence during the pandemic and that while the government offered some food and financial assistance, many PWDs did not benefit from these programmes for various reasons.

“The assessment also reveals that the pandemic significantly impacted on PWDs access to healthcare facilities, with 71% of the PWDs reporting that they were unable to access health facilities as a result of the nationwide lockdown imposed to curtail the spread of the virus. Even though hospitals, clinics, pharmacies and other agencies, public or private rendering essential services were exempted from the lockdown imposed in Nigeria, the barriers faced when accessing health facilities is depicted in the figures below; The assessment also approached this with the aim of highlighting barriers faced before the pandemic in order to understand the barriers faced during the COVID-19 resulting from the outbreak of the pandemic. Before the pandemic 39% of informants reported financial constraint as barriers faced when accessing healthcare facilities, with 26% reporting poor quality of service. Others reported communication barrier (21%) and incompetent personnel (14%) among others. Meanwhile, out of the 29% informants who reported having access to health care facilities during COVID-19, almost half of them (41%) reported fear of contracting COVID-19 as a barrier to visiting the healthcare facilities. Other barriers faced by informants accessing health services during the lockdown include, rejection by the health facility (21%), financial constraint (13%), poor quality of service (10%), incompetent personnel and communication barrier (9% and 6%, respectively).

[...] As shown in figure 14 above, 94% responded that their access to basic services reduced during the pandemic, with only 6% responding that their access to basic services did not reduce during the pandemic. This is an indication that the pandemic significantly affected PWDs access to basic social services like transportation, healthcare, education, etc.

[...] In the same vein, figure 19 depicted the responses of informants on the difference in social relationship that could be attributed to COVID-19, 68% reported increased discrimination, 51% indicated reduction in care, 13% reported domestic violence while 26% of the informants indicated other social changes like divorce and total abandonment.

[...] COVID-19 affected several PWDs with most of them experiencing reduced income (94%) as shown in figure 20, which stems from the restriction measures imposed by government both at state and federal level to curtail the spread of the disease. Moreover, a significant percentage of the population equally experienced loss of income due to poor business activities or loss of job. Out of the 94% that reportedly experienced reduced income, 80% of them indicated a reduction of 40% to 80% of less than they would normally earn. 15% of the informants indicated a reduction of less than 40% while 5% reportedly experience a reduction of 80% to 100% in their income. The experience of PWDs calls for the need for support and government assistance or intervention, although the degree of the impact on
socioeconomic activity may differ, the paramount need would therefore be to ensure food security.

[...] As shown in figure 24, 73% of the informants indicated that the government assisted them with palliatives that consist of food items, such as rice, garri, spaghetti, vegetable oil etc. 37% reported that the government assisted them with cash during the COVID-19, while 45% of the informant indicated that they received no assistance from the government during COVID-19. The inference from this statistic shows an inadequate coverage of PWDs in terms of assistance during the COVID-19, which could be detrimental to their survival, considering the fact that they are people with disabilities.

[...] PWDs are not adequately informed about existing social protection programmes and processes on and how to access them. This has posed a major challenge to the inclusion of PWDs in most of the social protection programmes. For instance, not many PWDs are aware of the existence of the National Social Investment Programme and National Health Insurance Scheme, therefore they are unable to access these programmes. Moreover, the information on some of the social protection programmes are not disseminated in accessible formats to PWDs.


These reports suggest that the COVID-19 epidemic has had a disproportionate impact on persons with disabilities in general for a number of reasons:

“It is just over a year since the first cases of COVID-19 were reported in Nigeria. Since then, 1,923 deaths have been recorded by the Nigeria Centre for Disease Control (NCDC). For many Persons with Disabilities (PwDs), it has been a year of exclusion and isolation, with severe economic, health and psychological consequences.

While it is thought that there are some 25 million people living with disabilities in Nigeria (15 percent of the population), there are no specialist hospitals or facilities to meet their needs. Many general hospitals which might otherwise provide services have been forced to close units because of the pandemic.

It was only in 2019 that Nigeria passed the Discrimination Against Persons with Disabilities (Prohibition) Act and many people with disabilities say they are still unable to provide for themselves or obtain quality medical care.

During the early stages of the pandemic, when radio stations buzzed with news, advice and guidance about COVID-19, little of the information being provided took the needs of PwDs into consideration: How does a hearing-impaired person listen to radio jingles? How does a visually impaired person manage social distancing?

When “palliatives” – food items such as rice, spaghetti, instant noodles and garri (cassava flour) – have been distributed by government agencies and NGOs, it has been hard for people with disabilities to collect them. Many say they had to compete with non-disabled people at the collection points to get a share and would go home empty-handed.”

(Source: Al Jazeera: “How COVID-19 has impacted Nigerians with disabilities”, 4 April 2021)

“The coronavirus pandemic reveals the deep-rooted level of marginalisation and exclusion faced by persons with disabilities, many of which is occasioned by the gross lack of data on their actual number, where they live, and how to reach them.
The main challenge has been the attitude of Nigerians to the plight of this vulnerable group. Nothing has exposed that more than the current efforts to fight the COVID-19 pandemic. Nobody has factored in the reality that containment measures such as social distancing and self-isolation may be difficult for persons who rely mostly on the support of others to eat, dress and bathe, thereby making them more susceptible to contracting the virus. Also, stocking up supplies of food stuff can be difficult due to poverty as many rely on begging to survive. Besides, persons with disabilities generally are more vulnerable to the impact of low quality or inaccessible health-care services and isolation centres than others.”

(Source: This Day Live, COVID-19 And The Physically Challenged, 19 April 2020)

Betty Abah, Executive Director of CEE-HOPE, also highlighted the fact that the situation of children and young people with disabilities has worsened during the pandemic. She argued that the situation worsening is due to the loss of financial support from informal donors and lack of access to essential needs including medication:

“Yes, I think it has aggravated things for the parents, for the caregivers, because like the rest of the world, COVID-19 has worsened the economic status of most families in Nigeria. And so, they have very limited access to funding, to resources to be able to care for children and young people with disabilities. We ran a podcast series on the impact of COVID-19 on children a couple of months back and we had a particular series focused on the impact on children with disabilities and their families. We had interviews from experts, and we interviewed a particular mother who has a child with a disability. Her girl has Downs syndrome. She said they do not have the financial resources to be able to access medical care for her daughter. She had depended on individuals to assist her to get drugs and welfare support for her daughter, but those people are also impacted by the economic challenges due to COVID-19, so they are not able to help her or not able to help her as much. Many of those people have lost their jobs, and they've lost their sources of livelihood. Their businesses are not doing well. And so, she said she was really, really challenged. And she’s just one of the millions and millions of single parents who are challenged. So COVID-19 has worsened the situation of children with disabilities and their parents, especially with regards to accessing medical support and all-round welfare support. It's made things extremely difficult for many of them in an unprecedented way.”

[…] Many of them also have had issues with accessing funding. There's reduced funding for them as well.

[…] I know there's reduced funding generally for NGOs. The British government was supporting so many NGOs working on disability issues but recently they reduced their support significantly to less than 30% or 20%. So, this is going to have a very big effect.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

Timothy Ali Yohanna stated that he believes persons with disabilities have been discriminated against during the COVID-19 pandemic:

“Let me start with the vaccine. I have contact with 50 or so people with disability and none of them told me they have had the vaccine. They can't even get close to the vaccination centre and there is no effort to go and look for them to make sure they get the vaccine first. The government hasn’t prioritized people with disability. Of course, we know that health
structures and so many things are affected because of COVID. But things are even worse for people with disability because even when things were normal, they don’t get attention, and now in this abnormal situation - its discrimination, people with disability are treated like second-class citizens.

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

Some sources interviewed in the below academic study suggest that persons with disabilities are experiencing increased stigma and discrimination since the COVID-19 pandemic outbreak:

“Negative stereotyping towards people with disabilities was expressed by some participants. However, it was not always clear whether the pandemic and lockdown had exacerbated this or if the levels remained the same.

Discrimination based on disability had an impact on people with impairments finding work. While this discrimination may have happened in pre-COVID-19 times too, the extra financial pressure that the pandemic brought made securing work all the more critical for people with disabilities during this time.

Some participants reported that the discrimination they faced during the lockdown was the same as before the lockdown was announced.

“As a person living with albinism, I don’t think I have been treated differently by people ever since the advent of the pandemic. It’s been normal... Aside from the perennial discrimination of persons with disabilities in the society, their treatment during the pandemic was normal. People were just going about surviving the pandemic.” (man, albinism, IWCOVNGA1)

“During the COVID-19 lockdown in Lagos State, the experiences of persons with disability were similar. It was an experience of continued discrimination of persons with disabilities in Nigeria.” (woman, albinism, IWCOVNGA7)

“The treatment I got from others during the pandemic was just a continuation of the negative attitudes persons with disabilities have been suffering from the wider society.” (man, physical, IWCOVNGA8)

Negative stigma linked to religious belief was also reported, with one participant revealing that a family member blaming them for the situation for not praying enough. It was not clear if the family member was referring to their impairment or the pandemic being a result of the lack of prayer

“My own brother coming up to castigate me, suggesting that it’s my fault that things have been so difficult for me. According to him, I have not been praying enough, and things like that.” (woman, albinism, IWCOVNGA7)

Worryingly, the police were reported as discriminating in a negative way towards people with disabilities during the pandemic. One participant said that this experience reflects societal attitudes in general.

“I met a team of policemen on patrol. I requested them to offer me a lift since they were headed in my direction. They snubbed me and went on their way. They even threatened to
arrest me despite my disability. So generally, the treatment was harsh. It is just a reflection of how many people see persons with disability as a liability whenever any kind of help is sort from them.” (man, physical, IWCOVNGA8)

One participant reflected that the internet and technology became important ways to work, learn and interact during the pandemic. However, due to negative discrimination, people with disabilities were not included in these technological advancements.

“A major change I noticed between the last time we talked and now is that a great number of people are quickly learning to use digital technology, particularly online systems, to carry out their daily activities. This mostly are in the areas of businesses and education... Sadly, in all these developments, people with disability are still left behind...persons with disabilities are still excluded from this development in the use of technology to solve problems.” (man, visual, IWCOVNGB5)

In contrast, some participants did not feel like they were discriminated against at all and some reported positive societal experiences, even if policies are still exclusive of people with disabilities.

“I won’t say that I was treated differently since the pandemic started. Not in terms of being deliberately discriminated against.” (woman, physical, IWCOVNGA6) “Actually, my experience with the people around me is very polite. They respect and care for me... I have never been treated differently by the community, rather I have been treated differently by policies that do not include me or include persons with disabilities.” (man, physical, IWCOVNGA10)


Interviewees in the same study have mixed views on whether or not male or female persons with disabilities were disproportionally impacted:

“Some participants reported feeling that men and women with disabilities had differing experiences of the pandemic due to their gender, while others felt experiences were similar for everyone. Some stated there was no difference in how men and women with disabilities had experienced the crisis, but then went on to discuss how experience may have differed depending on gender.

In the Nigerian context men are regarded as the head of the family and responsible for financial security. As the pandemic and lockdown had an impact on work (as described in the economic impact section above), it is argued that men were affected worse than women.

“As the head of family, the pandemic affects the man’s means of livelihood, bringing hardships to the family. This is due to loss of jobs, being unable to go to work and thereby, provide for the family. Though some women are also the breadwinners, by comparison I think more men are more impacted in this way than women.” (man, albinism, IWCOVNGA1)

“If a man alone is regarded as the breadwinner of the family. If he was working, he could no longer go to work... If you don’t work, you don’t have salary. This would really affect the men because they would not have access to their jobs.” (man, physical, IWCOVNGA10)
Women are generally regarded as having a role of looking after children. The pandemic made this task harder, and this had an impact on women with disabilities in particular.

“I think men and women have experienced the COVID-19 situation differently... For a woman with disability, it has been very challenging... everything – all the responsibilities of taking care of the children - falls on their shoulders... It’s really has affected the woman with disability who has to fend for or take care of the family.” (woman, visual, IWCOVNGA4).

“Generally, it seemed that women bore more of the effect [of the pandemic].” (man, physical, IWCOVNGA8) “Wives and their respective children have to bear hunger, especially in polygamous family situations.” (man, visual, IWCOVNGB5)

[...] The impact of the pandemic on access to health services may have had a more significant impact on women with disabilities than men. This may be especially the case for women with disabilities who are pregnant and require medical attention.

“Pregnant women is a special case... It is not easy for pregnant women to get same attention before, during and after delivery as they used to [before the pandemic].” (woman, hearing, IWCOVNGA9)

[...] Several participants felt that COVID-19 had a similar negative impact on both men and women in Nigeria, including men and women with disabilities.

“I don’t think men and women experienced COVID-19 differently.” (woman, physical, IWCOVNGA6) “Both men and women are experiencing the bad things of COVID-19 in the same way. It is a health matter that affects everybody... Both men and women are responsible for providing for their families with basic needs. But during the lockdown, nobody could go out to work. So financially, it affected and still affects them the same way.” (man, hearing, IWCOVNGA3)

“It is really not easy to compare the experiences of men and women during the pandemic in terms of population.” (man, physical, IWCOVNGA8)

“I don't think there are many differences. Both men and women have almost the same experiences because COVID-19 doesn't target any gender. As it affects men, so it affects women. Everybody is suffering the hardship because their ways of surviving have suffered.” (woman, hearing, IWCOVNGA9)"

The below academic article suggests that in some ways, it may seem as if the changes that occurred as a result of COVID-19 made things easier for some persons with disabilities. However this was not the case for those who live in poverty:

“The remote working and socialization introduced by the COVID-19 pandemic may seem to have rectified or reduced these problems in some sense. However, one of the problems that the change to a remote system of living seemed to be able to solve is with a party that has physical challenges, like somebody on a wheelchair (as such needs wheelchair ramp). Then they do not need to go into the courts or MDC; they can settle their cases online. Nevertheless, for one to be able to settle cases or matters online, they have to be able to access the technology because one of the good things about COVID-19 is that it has heightened the use of technology. However, most disabled persons in Nigeria live in abject poverty, though not all, and have no access to such luxury. Moreover, what happens after COVID-19 and things go back to normal? The element of technology to deliver court sessions may remain after the pandemic but how many of such disabled persons can afford the technology, let alone knowing how to use them? The issue of poverty raises its ugly head, and it raises other problems and other needs, which will be for future research. It is evident that more sensitization from the part of stakeholders, government and the judiciary alike, are highly needed.”

(Source: Social and Legal Studies, Access to Justice for People with Disability in Nigeria: Therapeutic Day Care Centre as a Case Study (TDCC), 9 Jan 2021, pg. 53)

6. Access to education

6.1. What does the law say with regards to the right to education of children and young people with disabilities?

A 2020 World Bank report provides a summary of legislation relating to the education of children and young people with disabilities:

“National Policy on Inclusive Education in Nigeria. This policy seeks to provide unhindered access to quality education and engage the active participation of all learners in the same safe school environment. It aims to achieve these objectives with the following strategies:

- High-level sensitization and advocacy to enhance political will, acceptance, and buy-in on inclusive education by all;
- Effective stakeholder engagement and community mobilization at the local, state, national, and international levels;
- Regular capacity building for all stakeholders;
- Creation of access and safety in all schools and learning centers; Improvement of institutional support for inclusive teaching;
- Adaptation of curriculum and resource materials; Rehabilitation and upgrading of special schools to serve as resource centers; and
- Adequate resource mobilization, allocation, and utilization. It is a comprehensive policy, developed with support and based on lessons learned from ESSPIN projects in Nigeria, which includes provisions for its implementation plan and monitoring and evaluation framework.
It is a comprehensive policy, developed with support and based on lessons learned from ESSPIN projects in Nigeria, which includes provisions for its implementation plan and monitoring and evaluation framework. It clearly states how the educational needs of children with disabilities should be mainstreamed. However, implementation seems to have stalled since 2016, and it is not clear whether or not the plan has been costed. A coordination mechanism may be needed to revisit the process. Strong political will coupled with funding support will be crucial to its proper implementation (FRN 2016).

Universal Basic Education Act. This law provides for compulsory and free universal basic education for all children of primary and junior secondary school age in Nigeria. It draws on the provisions of international legal instruments, such as the Convention on the Rights of the Child, to promote universal access to basic education and equity. It therefore applies to all children, including those with disabilities (FRN 2004a).

National Policy on Education. This national-level policy emphasizes inclusive education as a way of ensuring equity in education as enshrined in the Universal Basic Education Act 2004 (Asiwe and Omiegb 2014). It asserts that the education of children with disabilities shall be free at all levels and makes provisions for all needed educational support, training, and retraining of teachers, learning materials, and assistive devices and technologies. However, the policy is weak in terms of early detection and identification mechanisms, the monitoring and evaluation system, the implementation structure, funding, and data collection. And it is only being partially implemented as is (Asiwe and Omiegb 2014; Eleweke, Agboola, and Guteng 2015). Much needs to be done to ensure the full implementation of the policy, including drafting a plan that has disability-specific indicators for monitoring (FRN 2004b).

National Policy on Special Needs Education in Nigeria 2015. This policy seeks to provide complete service delivery that encompasses physical, mental, and emotional disabilities in Nigerian children at school, at home, and the hospital; to provide adequate qualitative education to all persons with disabilities in all aspects of national development; and to ensure that all persons with disabilities develop at a pace commensurate with their abilities so they can contribute to the nation’s socioeconomic and technological development (FRN 2015a).

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg. 66)

On the National Policy on Inclusive Education in Nigeria, the World Bank Report states:

“It is a comprehensive policy, developed with support and based on lessons learned from ESSPIN projects in Nigeria, which includes provisions for its implementation plan and monitoring and evaluation framework. It clearly states how the educational needs of children with disabilities should be mainstreamed. However, implementation seems to have stalled since 2016, and it is not clear whether or not the plan has been costed. A coordination mechanism may be needed to revisit the process. Strong political will coupled with funding support will be crucial to its proper implementation (FRN 2016).”

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, p. 66)

These reports reiterate that there have been issues with the implementation of the National Policy on Inclusive Education:
“Both the federal government and about 7 States have an inclusive education policy aimed at increasing basic school enrolment of children with disabilities and promoting inclusive quality education.

[...] Although there exists inclusive education policy at national and state levels, implementation has been substandard across these jurisdictions.”


“Presenting the research findings, the Research and Senior Programme Officer of CCD, Victor Owoyomi, said it was discovered that a plethora of challenges impeding the implementation of Inclusive Education Policy in Abia include absence of legal framework to protect children with disabilities from discriminatory and other harmful practices; insufficient specially trained teachers; discrimination and stigmatization against children, learners with disabilities by teachers, planners, parents and even students without disabilities and poor parental knowledge, attitude and lack of social acceptance for Inclusive Education Policy, which is why many parents shy away from enrolling their children/wards with disabilities in school to attain basic primary education.”

(Source: CCD Nigeria, The passage of Disability Rights Bill will aid implementation of Inclusive Education Policy in Abia State— CCD, July 2021)

This report states that the National Policy on Education fails to meet the needs of the autistic spectrum disorder community:

“Section 8 of the National Policy on Education suggests for schools to make accommodations for special education, but the government has not set standards to uphold this policy or authorized the enforcement of this policy [...] Without the backing of the government, many special education programs that should be supporting the ASD community are not inappreciable but are not meeting the current need.”

(Source: Robertson, Gabrielle Udoka: Explanatory Models of Autism in Nigeria: Exploring Sociocultural Beliefs to Inform Systems of Care, 2021)

The K4D helpdesk report on Legislation, Policies and Social Exclusion in Nigeria notes with regards to the education of learners with special educational needs that:

“The National Policy on Special Needs was launched in 2015. Its aim is to create an inclusive and less restrictive environment for learners with special educational needs (Thompson, 2019a). The National Teacher Education Policy 2014 commits to producing teachers with expertise in special educational needs and to making sure teachers can respond to learners with SEN (Thompson, 2019a). It remains the fact however, that nearly all of Nigeria’s schools and teachers have inadequate capacity to provide education for people with disabilities (Thompson, 2019b).”

(Source: K4D Helpdesk, Legislation, policies and social exclusion in Nigeria, 18 November 2019, pg. 9)
A news article on Premium Times also notes with regards to legislation for children with disabilities in Nigeria that:

“In January 2019, Nigeria signed into law the prohibition of discrimination against persons with disabilities bill, after over 20 years of advocacy.

The law provides that a person with disability shall have an unfettered right to education without discrimination or segregation in any form. It further stipulates that all public educational establishments shall be run to be inclusive of and accessible to persons with disabilities.

In 2015, Nigeria adopted the National Policy on Special Needs Education. Additionally, the Child Rights Act outlines that every child has the right to free, compulsory and basic education.

Internationally, Nigeria has made a significant commitment to the right to education for children with disabilities by ratifying the United Nations Convention on the Rights of Persons with Disabilities.

But despite these local and international laws and standards, many children with disabilities remain excluded from the educational system, advocates say. For some of those within the educational system, they continue to face various forms of violence and disability-based discrimination.”


A news article on All Africa about Nigerians living with disabilities reports on new legislation against discrimination of persons with disabilities that:

“In an effort aimed at "removing those barriers," the authors of Nigeria's new law against discrimination of persons with disabilities included a requirement for all educational institutions in the country to be adequately accessible to persons with disabilities. The law was signed into law by President Muhammadu Buhari in January 2019.

According to Section 21 of the law, owners of educational institutions in Nigeria must ensure that all schools are accessible to disabled persons with the required facilities for their efficient education.

The section provides that: "all public schools, whether primary, secondary or tertiary shall be run to be inclusive and accessible to persons with disabilities. Accordingly, every school shall have at least trained personnel to cater for the educational development of persons with disabilities.

"Braille, sign language and other skills for communicating with persons with disabilities shall form part of the curriculum for primary, secondary and tertiary institutions," the section said.

The provision hopes to ensure the introduction of an educational system where physically-challenged Nigerians and those without challenges can acquire an education in the same venue and practically at the same time.
However, most Nigerian government agencies and private institutions are yet to apply provisions of this law.”


Theophilus Odaudu provides further details on implementation:

“The Discrimination Against Persons with disabilities (Prohibition) Act provides for free education for persons with disabilities. Sections 17-20 of the Act contain provisions relevant to education. It provides for free education up to secondary level for persons with disabilities; and mandates the Commission to make provision for assistive devices. It also went further in Section 18 to provide for inclusive education. However, more than two years after, these provisions have yet to translate into actual changes on ground in the education sector. Even though there is a National Policy on Inclusive Education, implementation remains very poor. In my work with OPDs, many are advocating for inclusive education at various levels, and my understanding is that there is a poor understanding among the relevant officials and department of what inclusive education entails. Also, you may want to ask: how free is the education that one has to travel for hundreds of miles to attain?

First, not all the States in Nigeria have domesticated the Child Rights Act. This means that the provisions do not apply in those states that have not ratified. Also, in Nigeria, implementation of laws is a great challenge. We may have it good on paper, but very poor at following the letters. That said, Nigeria is far from achieving inclusive education. This means that children with disabilities have to travel far away from home to attend schools. So, even though basic education is supposed to be free, families with children with disabilities still spend more money to send children to school. For instance, some fail to send their children to school because they cannot afford the cost of transportation and up keep. These costs would have been avoided if the children were to school nearer home and within the community. Again, the cost of assistive devices for the children to learn is often on the high side. Many special schools are underfunded and students are expected to buy their learning materials.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

6.2. Overview of education system

A 2020 World Bank report offers an overview of education for children and young people with disabilities in Nigeria, stating that it is inaccessible for most and usually segregated from mainstream education:

“Education is inaccessible to persons with disabilities due to the lack of adapted learning materials, inadequately trained teachers, school shortages, a physically inaccessible school environment, and inaccessible communication. Inclusive education is typically thought to aid social inclusion, but participants expressed reservations about learning outcomes and the full participation of children with disabilities when school environments, teaching staff, and supports cannot adequately meet the needs of students with diverse disabilities, such as by ensuring sign language immersion. Hearing impaired participants were particularly
concerned about the development of sign language as their mother tongue, and participants with visual disabilities expressed concerns over the availability and use of braille documents, particularly at the primary level. (pg IX)

[...] Nigeria currently operates a special school system, particularly at the primary level, including a few attempts at an integrated approach focused on specific disabilities at the secondary level. There are very few inclusive public schools in the states of Katsina and Kaduna. As awareness of inclusive education for children with disabilities has increased, a few private inclusive schools have been springing up, particularly in Lagos and Abuja. Tertiary institutions of learning are mostly inaccessible to students with disabilities. However, no official documentation exists regarding the degree of accessibility of these various tertiary schools, other than limited information from a few universities (Ahmed, Awad, and Adam 2014; Ajuwon and Chitiyo 2016).” (pg 26)

(Source: World Bank, Disability Inclusion in Nigeria - A Rapid Assessment, 2020, pg. IX - 26)

Timothy Ali Yohanna told Asylos and ARC Foundation that the provision of education usually comes from three sources:

[...] So, there are three categories of institution: government, which deliberately refuses to renovate the special schools and instead enrolls children with disability into regular schools, which is more or less punishment for them. Then on the religious side, some Christian churches give special consideration to people with disabilities, even supplying them with special materials to ease their learning, but in very small numbers based on their church ethics. And then the Muslim community takes those children into their custody. So, none of these institutions seems to be working appropriately, based on policy, constitution, and guidelines.

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

In the context of the pandemic, an opinion piece on Premium Times Opinion notes with regards to students with disabilities that:

“Sadly, however, nothing much has been said so far in the area of providing learning alternatives for students with disabilities (SwD).

[...]

Government has to create real learning opportunities for students with special needs. I think part of Nigeria’s problem is the federal government’s decision to create special schools for SwD in 2004. We still have the school for the blind and the one for the deaf. The country is still in the era of segregation, when others have long embraced inclusion. Unfortunately, this segregation policy is further stigmatising SwD by making them to be more aware of their disabilities than their abilities. This idea of segregation is probably why governments at all levels are not including them in their plans.”

Sources suggest that some legislative efforts have been made to move to an inclusive schooling system, but implementation has been poor. At a community event in Alimosho, Lagos State, on the International Day of Persons with Disability, the Executive Director of Human Development Initiatives, Olufunso Owasanoye, stated:

"In 2016, the government launched the first ever National Policy on Inclusive Education in Nigeria (NPIEN). The Lagos state government has established the office of the Disability affairs and made other deliberate efforts in ensuring that new public facilities meet the needs of some persons with disabilities.

[...] Many children with disabilities are not in school, partly because their parents are not aware of the nearest location of inclusive schools, thus the names of all the Lagos inclusive teachers should be published. The Lagos state government should make special provision especially transportation, housing for teachers posted to rural and hard-to-reach areas of the state. The Lagos state government should ensure that school infrastructure facilities and surrounding are accessible to children with disabilities."

(Source: All Africa, Nigeria: Providing Succour to Physically Challenged, 24 December 2020)

At the same event, the County Director of Actionaid, Mrs Ene Obi, stated:

“the organisation's research on inclusive education revealed that many children with disabilities are out of school.

She also stated that reason why children with disabilities are out of school, include non-enrolment in school, while those who enrol are less likely to complete their education compared to their peers.

She expressed displeasure with the issue of overcrowded classrooms, lack of facilities to support their learning as teachers are unable to give them the support they need and inaccessible learning environment.

Obi further explained that despite progress made in ratifying the policy on inclusive education in Nigeria, current education resources are insufficient to achieve education; budgets and plans are not sensitive enough to support inclusion which makes financing inclusive education very low. She hinted that Nigeria lacks the teaching workforce required to deliver inclusive education as they have not received enough training to practice inclusion.”

(Source: All Africa, Nigeria: Providing Succour to Physically Challenged, 24 December 2020)

“[...] Education Sector:

[...]PWDs lack equal opportunities for education, as their able-bodied counterparts are considered first during admission screenings. Even when they gain admission it may not be affordable to them to cope with the speed of learning with non-disabled students and might cause emotional distress due to segregation. For those able to afford the cost of education, limitations and constraints of mobility and accessibility are insurmountable daily hurdles as most school buildings or service points have no disability provisions. Coupled with untoward disposition from individuals in the academic environment, they are constantly disposed to physical, psychological trauma resulting in various degrees of self-limiting withdrawal reactions. The shortage of special education teachers (physical therapist, speech and
language teachers) in addition to often being taught by teachers without special education certification slows down the progress of the students.”


The 2019 Amnesty International Report on Nigeria notes with regards to education for children with disabilities that:

“Children with disabilities continued to face discrimination and many obstacles, despite the legal right to education in Nigeria. Amnesty International Nigeria has documented the cases of some children who have been discriminated against and abused because of their disabilities. The seven-year-old Imran Kanun Muhammad is said to have experienced sexual violence and inhuman treatment in the school for the deaf in Kufe (capital city Abuja). His case is currently being tried in court. Amnesty International Nigeria will act as a trial observer. In July 2019, allegations were made that students at the school for the blind in the capital’s territory had been sexually abused. The capital city administration suspended two teachers from the school.”


This report suggests there is lack of investment in facilitating progress:

“Nigeria is home to over 32 million people that struggle with reading, writing, spelling, comprehension, and other disabilities, The Dyslexia Foundation in Nigeria stated. Yet, not only does a majority of the nation’s population remain unaware of what learning disability is, but even those tasked with teaching and policymaking are not invested enough to facilitate leaping policy changes that will best protect children living with learning disabilities.”


6.3. How visible are persons with disabilities in schools and other places of education? If schooling is segregated, what is the impact?

This section should be read in conjunction with *section 8. Institutionalisation*.

When interviewed by Asylos and ARC Foundation, Adeyinka Ige-Onabolu stated that, given the current state of the Nigerian education system, she is of the view that segregated education was preferable for children and young people with disabilities:

“I remember in my last role where I was supporting the UK Aid or DFID funded project on girl education and we had an expert visit us. One of our partners was speaking about a girl with a disability and that through the project they had been able to link her up to a school for children with disabilities where she could get the education. And the British lady, the consultant was so horrified and said, "She should be included her the general school system." I know that should be the ideal however the real truth is in Nigeria, having children in conventional, regular schools, the teachers are not trained to be able to cater to
everybody. The teachers cannot even deal with slow learners in their class. There is little understanding of the concept that not every child is at the same level and so being able to teach accordingly. So stretching them to now accommodate a child with intellectual disabilities, or with a visual impairment, or a hearing impairment, it is not going to work. In government schools, it certainly will not work. In private schools, they might try, but the child will probably not get the best education. And because of that, that’s why when people talk about segregated education in Nigeria, they speak about it in a positive way. Because you have very few teachers that have been trained in that way. This segregation leads to stigmatization however if they’re going to get any level of education, they’re better off getting it that way. So maybe we have to think of other ways children with disabilities can be included.

Because you see the government isn’t going to pour more money in the publicly-funded schools. There are some schools with over 2,000 students. How can 2,000 students come into a school in a day? And what they then do is, and this even goes on to high school, Is you have some kids coming in the morning and some in the afternoon. So where other kids in other countries or other states are learning for 8 hours, you have kids learning for only 4 hours. And these are even children without disabilities. They are supposed to be “quick learners”. And so, put into the mix a child that is struggling. The child will not learn anything. I know it’s not the best, but in the situation we have, that’s really all there is. Also these schools are really few so it’s not like these schools are even open to everybody.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

However, Theophilus Odaudu provided the following observations on the negative impacts of a segregated schooling system:

“Segregated education have several negative impacts on children and youth with disabilities. First, at a tender age, children will have to leave their families to institutions, under the care of strangers in the name of getting education. Many children miss the early childhood bonding with parents and siblings. I remember my experience and the pain my father felt when he had to take me far away from home just to attend primary school. Again, segregated education affect the self-confidence of children with disabilities, because from such a tender age, the seed is being planted in their tender hearts that they do not fit into the regular society. Yet, there is no separate society for persons with disabilities. So, when they leave these institutions, it is usually difficult to freely mingle and function as expected. Again, segregated education contributes to the stigma being faced by persons with disabilities. Inclusive schools will pass the message to children that children with disabilities are not different. They may require special attention or facilities, but they can study together, play together and grow in one environment. This will help fight stigma. But segregated education does the opposite.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

A news article on Premium Times also notes with regards to the educational model for children with disabilities that:
“A group championing the cause of Persons with Disabilities (PWDs) says segregations in the schooling system is a gross discrimination against children with disabilities, calling for a more inclusive educational model in Nigeria.

“In Nigeria, the educational model mostly practised is segregation, where children with disabilities are educated in special schools. Segregation can often reinforce discrimination against children with disabilities, exclude them from socialisation in a diverse society and make them vulnerable to a range of human rights abuses,” Catherine Edeh, the director, Voice of Disability Initiative (VDI) said on Friday.”


When asked if there was a link between the boarding schools and institutionalisation, Adeyinka Ige-Onabolu, stated:

“So the boarding schools that support or provide education for children with disabilities, and I can just think of school for the deaf in Abuja, and all those things. It’s not that. It’s just really about going to get an education. But the problem is because these schools are not many, so, you have parents-- for example, who live in Kaduna, Kano, other towns, and they know the school for the deaf in Abuja is the only school that can cater for their child. So they have to put their child in that school because they can’t travel from Kaduna everyday for schooling. So it’s actually a regular school. Your parents are still responsible for you. You just go there to get an education.

[...] So some are just schools, you just go get an education. But some of them are actually homes. So the children live there, go to school. Some are not boarding schools. They are like homes where the children live, get an education on the same grounds, and just come back to their rooms or whatever here. So those are the different types of institutions.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Whereas Theophilus Odaudu disagreed, claiming that the special schools are a form of institutionalisation:

“A more common form of institutionalisation like you have mentioned can be seen in the special schools and this could be at the primary level or at the secondary level and we have children with disabilities in a lot of these schools across the country. You would find school for the blind, school for the deaf, school for children who have autism and those with cerebral palsy and all of that. And there are different special schools across the country where you have children with disability being institutionalised and some of them are very young children below the age of 10, some 6, and all of that and they are sent to these schools, far away from home in most cases.

[...] Most special schools for children with disabilities are boarding schools; and yes, it is a form of institutionalisation. Against their wish in many cases, children are sent off to such schools because there are no options to learning. This is common with blind children, deaf children, children with intellectual disabilities, and other developmental disabilities.

[...] And I would say that families do this most of the time because, one, there are probably no alternatives, especially at the preliminary levels. Inclusive education is still far from being
realised in Nigeria and there are really no schools in the immediate community that can provide the needed educational support to children with disabilities. And so parents who want their children with disabilities to go to school might end up having to send them to some of these special schools where they are kept in boarding homes and then they are attended to.

[...] sometimes, the families have no option as the regular schools in the community will not admit children with disabilities. The usual language is ‘we do not have facilities for them’.

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

Theophilus Odaudu went on to comment on the conditions in these schools:

“Many special schools are underfunded. They usually start up well, with good welfare packages and care for the children. But my experience and observation is that over time, facilities grow old and hardly get replaced, funding for the schools reduce, number of students increases, and gradually the initial enthusiasm dies. This is not only with government owned institutions, but also private and mission owned. Many examples of such institutions can be found in Nigeria. Hence, special schools are characterised with poor care, poor nutrition, lack of learning facilities, poor funding and so on. Not too long ago, there were reported cases of sexual molestation of girls with disabilities in some special schools by students and teachers. Many special schools here depend on charity and philanthropy to survive.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

6.4. Is there disaggregated data on the number of children and young people [i.e. tertiary education] with disabilities in receipt of ‘education’?

A 2020 World Bank assessment on Disability Inclusion in Nigeria reports that:

“The problems associated with collecting disability related data stem from a lack of understanding of disabilities as a cross-cutting development issue that requires attention. Some stakeholders view and portray disabilities as a complex issue, which may discourage the collection of data. The collection of disability disaggregated data is a low priority among stakeholders in the major sectors of the economy, such as education, health, and transportation.”


“In 2008, 29.6 percent of children with disabilities who were of primary school age were reportedly out of school (FRN 2012a). A study by Smith (2011) in the states of Kogi and Niger indicated that half of the sample had no education, while 19 percent had a primary education (of which two-third were male and one-third female), and 18 percent had an Islamic education.”


A news article on Premium Times notes with regards to official data on children with disabilities that:
“In Nigeria, which has the highest number of out-of-school children in the world, ascertaining the percentage of those with learning disabilities is next to impossible as official data is non-existent, an investigation by Devex showed.

As such, any educational plan will most likely not address the needs of those with disabilities, pushing them further to the margins of society.”


An opinion piece on Premium Times opinion also notes the lack of data regarding the number of students with disabilities in Nigeria:

“As it is, it is difficult to state the number of students with disabilities in the country, due to absence of data. The World Health Organisation has however said that of the one billion persons with disabilities worldwide, 150 million of them are children. Since Nigeria is home to thousands of special needs children, I think it is safe to assume that it would have its fair share of the global statistics.”


However, this Save the Children report estimates the following:

“Studies have revealed that up to 3.5 million children with disabilities are currently out of school.”


6.5. Is there disaggregated data on the retention of children and young people with disabilities within education and their outcomes?

A World Bank assessment on Disability Inclusion in Nigeria reports that:

“Educational attainment. According to the 2018 survey, women and girls who report having “a lot of difficulty” in at least one of the six functional domains (figure 4.5) (i.e., seeing, hearing, communication, cognition, walking, and self-care) are more likely to have an incomplete primary education or only a primary education; they are also less likely to have a partial or complete secondary or higher education. Women and girls who report that they are not able to “do at all” with regard to one of the domains are much more likely to have received no education.”
6.6. Practical challenges to education

6.6.1. Is the cost of education for children and young people with disabilities prohibitive?

A report from Grassroots Researchers Association summarises how the high cost of education and educational materials acts as a practical barrier for many children and young people with disabilities:

“High Cost of Education and Educational materials

Another challenge is the cost of education for the PWDs, especially the blind, as stated by a blind teacher in Borno state. Probably the biggest issue for the students/school is the inability to afford the learning materials. There are almost never waivers or subsidies from the government to cushion the burden for disabled students and make the materials available:

“Our study materials are very expensive. Just our pencil is ₦5,000 and yet the government isn’t doing anything to offer us scholarships. Government has forgotten the disabled in rural communities. We are left alone with the education of our children. Any education is money and there is no special treatment or waiver for us persons with disability. We have to beg before we eat, not to talk of schooling for our children”. 54

An estimated 80 per cent of all people with disabilities in the world live in rural areas of developing countries and have limited or no access to the services they need. Thus, providing decent work for people with disabilities makes social as well as economic sense. 55
A news article on Naija News quotes Malam Kamilu Ashafa, Chairman of the Group People Living with Disabilities, who states that:

“We commend the Kaduna State Government for introducing free and compulsory education from primary one to Junior secondary school, as well as free education for the girl child up to senior secondary school. “This is quite commendable, but what about people with special needs like us, don’t the government thinks that we need educational support even more than the normal people?

“Because we are disabled, we have to attend special schools, usually boarding schools and we spend about N20,000 to purchase boarding materials or items. “It is also important to know that as special students, we need more writing materials than normal students. What a normal student will write in a sheet of paper, a special student will write in five or 10.

“At the completion of secondary school, we pay the same examination fee for National Examination Council (NECO) or West African Examination Council (WAEC) with normal children. “Even when we eventually get to higher institutions, there is no form of support from the government,” Ashafa said.”

(Source: Naija News, People Living With Disabilities Cry Out Over Challenges To Fund Their Educational Needs, 5 February 2019, para. 8-10).

A news article on All Africa notes with regards to the cost of education for disabled students that:

“Adetayo Ayodele, whose 15 year old son has cognitive disabilities views the challenge of raising such children as most difficult and most neglected by government.

"The cost of educating one child with cognitive disability is equal to the cost of educating 10 children without a disability in good schools. This is to give you a hint of the burden we bear. Yet this country is more than able, if it wills, to specially attend to the needs of people with such disabilities, or even provide the structures to help their relatives do same safely and without much stress,” he said.”

(Source: All Africa, Nigeria: Despite New Law, Nigerians Living With Disabilities Lament Discrimination, 1 November 2019, para. 11-12)

6.6.2. Can children and young people with disabilities travel safely to school or to their place of education?

The World Bank report states that:
“Inaccessible environment. The physical environment in schools is often inaccessible to students with physical and vision disabilities. The overall state of buildings dedicated to impart educational services to children living with disabilities could also be improved. This poses a challenge to their participation in education at all levels and puts the health of the students at risk.

“Let’s talk about visual impaired people in the school environment. Especially in Unijos, the school environment is not adapted to the visually impaired at all. I fell into the gutter several times and injured myself, even now I still have a wound on my leg.”
 – a visually impaired woman, Jos

“I’ve been to schools where there is no ramp and the floor is so rocky that the wheelchair cannot easily move.”
 – a woman with physical disability, Lagos”


UNICEF reports that a young girl living with a physical disability in an IDP community in Maiduguri, had had to crawl to school before she was provided with crutches by a community mobiliser:

“[..] Two months earlier, the six-year-old girl had no crutches and had to crawl on the floor to reach her destination, including a community classroom for out-of-school children established by UNICEF in the camp [...]”

“I discovered Sadiya when I went to monitor how the project was going,” said Phillip Gana Malgwi, a community mobiliser. “One day, I saw her limping to class. When she got tired, she sat on the bare road to rest before proceeding. I decided to get her a set of crutches, to encourage her. Schools in Borno will reopen next week, and I know that without help, Sadiya might not attend because it is a little further than the community classroom near her house’ [...]”

(Source: UNICEF, Sadiya goes to school: Displaced and living with physical disability, a little girl takes her first steps into the future, with support from UNICEF and Education Cannot Wait, 25 January 2021)

6.6.3. Can children and young people with disabilities access toilet facilities, move around the school or their place of education in wheelchairs or otherwise?

The Grassroots Researchers Association details how mobility and accessibility issues act as a practical barrier to moving around schools:

“Mobility and Accessibility
There are no services available to PWDs in both private and public schools. Our findings reveal that there are no structural considerations to ease the mobility of PWDs in public schools as such building were not built with them in mind. Adapting to such environments is a huge challenge to students with disabilities, as recounted by 27-year-old physically challenged student of Modibbo Adama University of Technology Yola of Adamawa state:

"As a student, arriving at lectures on time is always difficult for me due to the
discriminating way most buildings were constructed with no considerations for students with disability. Sometimes I make it to exam halls late.”

One of the prominent issues that was noted regarding mobility and accessibility is the lack of coordination between the school administration and the families of PWDs. In many of the instances, the schools were constructed without considerations for the groups. Over 11 million children are out of school due to armed conflict with Boko Haram, and a considerable number of these children have disabilities with special needs of education. Even when they get into public schools, they face a lot of mobility challenges. Narrating her challenges while at the University of Jos doing a National Diploma in Special Education, a lady from Adamawa State explained that:

“Ever since I gained admission, considering the rocky undulating Jos terrain, I find it so difficult moving around with a wheelchair that sometimes I had to forfeit lectures. Hostel accommodation are built without support paths for PWDs. Some students see us as third class citizens and some see it as a taboo making friends or dating a disabled lady.”


53 Grassroots Researchers Association interview with PWDs in Yola, Adamawa State, February 11, 2018.

(Source: Grassroots Researchers Association, “They Called Us Senseless Beggars” Challenges of Persons with Disabilities in North-Eastern Nigeria, January 2019, pg. 20)

This source reiterates that accessibility is an issue:

“Public infrastructures in Nigeria is another... let me call it a hell to persons with disabilities ranging from the school, you can imagine as a person with disabilities you're going to lectures in a four-story building.. you can imagine you want to access probably a bank, hospital, places of worship, there's no provision for ramp for you to come in,’ he said.

According to Nigeria’s Center for Citizens with Disabilities, 98 percent of public structures and facilities are not handicapped accessible.”


6.6.4. What measures are in place to ensure that places of education and materials are accessible to the needs of children and young people with disabilities?

The World Bank report states that:

“Inadequate learning aids. Learning materials, including assistive devices and technology, are not available in adequate quantities for effective learning.

“They are not really available, you take your recorder to class, then you have to get your own scanner to scan. If you cannot afford to have your own scanner then you have to go to shops to get online materials. Your source for all these things is yourself.”
– a visually impaired woman, Jos


This report also states that appropriate materials and learning aids are not available to students with disabilities:

“B Educational amenities not provided for disabled persons:

The directress offers insights ‘that the disabled persons want to have their school leaving certificate and BECE.’ She went on to point out that

“Now tell me a child with cerebral palsy that cannot write but he has the knowledge in his head however there is no provision for them to be able to write under WAEC or under BECE. So what do we do? We have been going to the BECE office. The Manager had been fighting for this particular boy so that they could use a recorder and record him. There is hardly any provision for children with such disability. However, they have for the blind for BECE and extra minutes for the blind and deaf that is just it – they are not the only form of disability.”

Another example given by the Manager is a ‘child that has muscular dystrophy.’ She states,

“His whole body shakes, and his mother has lost her husband and even one of his siblings to the same illness – it is genetic in their family. He needs to be recorded, then transcribed into a paper, and the paper needs to be submitted, but there is no provision for this. No government has passed this into law because, in the WAEC script, no provision was provided for children with cerebral palsy or muscular dystrophy. There are no provisions for individual cases with different forms of disability.

In the western world, there are provisions, and they have their exam tailored for speech and hearing impaired. They have sign time interpreters because sometimes they need someone to interpret, like a sign language interpreter, to interpret the instructions and all those kinds of things. Here in Nigeria, there is no provision for these officially in WAEC guideline.”

On the other hand, teacher 2 supported the overhead views. She opines

“These disabled people want to be integrated into society later, for them to be able to get a job and feel proud that they have what another person of their age have. Even in exams, there is no proper awareness that they are children with disability. Also, they have to write exams; the general exam organized by the Basic Education Certificate Examination (BECE) does not take into consideration all of these. There are other forms of impairment other than visual impairment. These children also deserve to be able to write their exams and have their certificate given to them.”

What this means is that the disabled persons are currently given the same exams that a non-disabled person is given. There is no provision for support during the exams, which is needed as a result of their disability.”

(Source: Social and Legal Studies, *Access to Justice for People with Disability in Nigeria: Therapeutic Day Care Centre as a Case Study (TDCC)*, 9 Jan 2021, pg. 44-45)
This report states that even where assistive technology has been provided to children with intellectual disabilities, it has been misused:

“[...] the special education sector in Nigeria has been expanding in recent years. Some schools have been able to provide assistive technology to children with intellectual disabilities, but many of these programs have been only partially successful due to poor teacher training and failing electricity reliability throughout the country [...]”


This report criticises the government for not providing reading materials that are accessible to visually-impaired students:

“In commemoration of this year’s World Braille Day, members of Nigeria Association of the Blind (NAB) have stressed the need for government to make budgetary provisions to make reading materials accessible to the blind.

Speaking during the programme held in association with the Nigerian Copyright Commission (NCC) and Nigerian Publishers Association in Lagos, the members argued that less than one per cent of published books was written to comply with standards of visually-impaired people.

National President of NAB, Mr. Adamu Ishiyaku, said the visually-impaired should not be looked down on in the society adding that they are people who are excellently endowed and their potentials should be harnessed in order to make the country great economically.”

Adamu Ishiyaku, *NAB wants government to make budgetary provisions for the blind*, 15 January 2021

An article published on the International School of Disability Studies refers to the experience of blind students in Zuba:

“For Ishaku, the study conditions of People Living with Disabilities (PLWDs), especially the visually impaired in Nigerian tertiary schools, can be ameliorated if better facilities are available.

[...]

John Paul, 29, another partial blind student of FCT College of Education, Zuba, said that [...]”

“Whenever handouts are distributed, I translate it to a brailing form, study by myself and during examinations, I use the manual typewriter in answering my questions.”

Similarly, Abdulraman Lawal, a blind student of National Open University of Nigeria (NOUN) in Minna, Niger, said that [...] while he was in the school, NOUN had a few assistive technology tools which helped in studying but getting people to supervise the usage was always a problem.”

6.6.5. What measures are in place to train teachers and other education professionals or providers on the rights of children and young people with disabilities?

The World Bank report lists a ‘dearth of resource persons’ as a barrier to training education professionals on the rights of children and young people with disabilities:

“Dearth of resource persons. There are too few resource specialists, even at special schools. Sometimes specialists are posted to the wrong schools, impeding learning and participation in the classroom and eventually having a negative impact on performance.

“I may be specialized in vision impairment, another person in hearing impairment. I witnessed a situation where a visually impaired person who studied education for the visually impaired was posted to Wesley school for the hearing impaired to teach.”

– a visually impaired man, Lagos” (pg. 26).

“Inaccessible communication. Hearing impaired students in schools face communication barriers. Some teachers are not proficient in sign language, even in special schools. Students with albinism are cut off from classroom communication due to their eyesight, particularly if a teacher refuses to acknowledge the issue and does not let them sit at the front of the classroom.

“Many teachers in schools for the hearing impaired nowadays cannot sign. Employment of the hearing impaired teachers has become something else. They just receive notes from politicians and take them to schools for the hearing impaired for immediate employment, even though they are not trained in sign language. In my state, Kwara State, many teachers of the hearing impaired cannot sign. They will just write on the board and they leave. The same in Osun State and Lagos State.”

– a hearing impaired teacher, Oyo

“Some of us [people with albinism] are short sighted and this affects our education. Teachers ask you to sit at the back of the class, knowing full well that you cannot see.”

– a woman with albinism, Lagos” (pg 27)


A news article on Nigeria World notes with regards to access to education among disabled people that:

“Also, the Chair of the United Nations Committee on the Right of Persons with Disability, Danlami Basharu, lamented the lack of access to education among disabled persons.

"The facilities for the education of disabled persons are not available and their teachers are not properly trained. They (disabled persons) should be provided with the same inclusive, quality education like all other children in the same environment. It is not enough to have children with disability in a classroom with children without disability, without providing them with the necessary wherewithal for their education.”"

(Source: Nigeria World, *NGO seeks support for inclusive education*, 10 May 2019, para. 4-5).
This report states that there is a lack of understanding amongst teachers about autism spectrum disorder:

“Considering that most parents send their children to school, teachers are often the first one’s to confront a child’s ASD symptoms. According to the informants, lack of understanding of ASD in schools has led to abuse of corporal punishment and almost no advancements in behavior or coping skills of children with autism.”


The study echoes issues around lack of understanding:

“This study showed that there is poor perception of the concept of disability among the teachers, as the majority of them understood disability to be basically a physical impairment. However, most of the school teachers had positive attitude towards children with physical disability.”


6.6.6. Is there evidence of bullying, discriminatory or violent behaviour by teachers against pupils with disabilities?

These reports suggest that teachers frequently bully and discriminate against students with disabilities:

“I am a Teacher by profession, and I got into the teaching profession as a zeal I have for teaching, which was further influenced by my friend who had a disability during my secondary school days; I watched how she couldn’t get the adequate and efficient education during our school days. Teachers would rather not have her in their classroom and she most often does not come to school at all.

[...] After going through my University Education, I discovered that my teachers then could not teach my friend because they do not have the knowledge and skills to teach children with disabilities.

[...] [My NGO has] trained over 1000 teachers on skills needed to include children on the spectrum in their classroom

[...] Finally, I am faced with the challenge of lack of trained teachers to facilitate learning in the classroom. I have been able to overcome these challenges through training and holding meetings with school owners to explain that disabilities are not contagious and children benefit more when they learn in inclusive settings.”


“Negative attitudes among teachers and peers.
Negative attitudes toward children with disabilities are widespread among teachers and peers, particularly impacting children with albinism, children affected by leprosy, and children with epilepsy. Name-calling, bullying, and teasing are common at school. This relates to the issue of child protection and the fact that children living with disabilities experience higher vulnerabilities compared with other students. This issue should be further explored and researched to inform educational programming in Nigeria.

“So you understand, it starts at home and continues at school. In school, […] we go through all kinds of teasing, name calling, all sorts of humiliation. The teachers do not help, the teachers will call you names, “you, this blind man”, you know. All of that brings its own untold pressure that many of us, at a certain point, drop out of school and never want to go back to school.”
– a man with albinism, Abuja


“Discrimination

Although inclusiveness is practiced at primary, secondary and tertiary institutions, there are a lot of challenges, as reported by most of the respondents. The findings reveal that negative attitudes towards the PWDs is paramount in schools. These attitudes are displayed by teachers and nonteachers as well. Cultural beliefs play a significant role in worsening the situation.”

(Source: Grassroots Researchers Association, *They Called Us Senseless Beggars* Challenges of Persons with Disabilities in North-Eastern Nigeria, January 2019, pg. 20)

### 6.6.7. Is there evidence of bullying, discriminatory or violent behaviour by pupils against their fellow pupils with disabilities?

Adeyinka Ige-Onabolu told Asylos and ARC Foundation about some reports of abuse in ‘special schools’ and that in her view this system increases the risk of abuse:

“We thought everything was going on fine, until I think two years ago, when there was a big case of a boy who had just been at the school for the deaf for one term. I think he had spent about six weeks there, and went home for the mid-term break and he opened up to his grand mum of how he had been sodomized. I mean, he couldn't even use the words or describe it because he was 6. And that was really a time when the government started an investigation into this school because other than that, everybody almost praised the schools before for being able to admit these children, where they get an education. But then we now start hearing over the last year that they were actually exploiting even the girls, bringing men for them to sleep with, and all these things. It was that case that made the government more aware about what was going in these schools. And I know from then they started doing a lot of investigations, and that's when things started coming up. But then it also shows, really, that there was really no government oversight because-- even the teachers were seen as people helping, so you really don't investigate them so much. Don't hold them to too much accountability because they're helping.

[...] Segregated schools increase the risk of abuse a lot. A lot. Especially the ones that are boarding the risk is heightened. And typically, children won't talk about it once they're out. Because for them, that community is one that accepts them, right, with their disability, so,
even when they go back home they don’t talk about it. After the abuse case, they started speaking to kids that were in older classes, and they’re saying to them it’s normal or they just thought it was something they had to do being in that community where at least you could have people communicating with you in a language you understand. You could have people that understood you as opposed to when they’re at home. So it was so sad that they just accepted it. I said I was so sad that the children just accepted is what they had to do to be part of that community. A wider issue — was also a lot of abuse going on between the students. And this is also because unlike your typical secondary school where you have kids between the ages of 11 and 17, for the schools for children with disabilities, you have a lot of older kids entering. So for example, you have maybe a child that is born blind, one typically starts primary one at six. They might have been home until they're eight or something before starting. So you have older kids in that school. So for example, instead of a child of 11 to go into form one, you might find there are kids already 15 maybe because their parents tried to take them to regular school before and then it just was not working. So you have mixed ages. You have some people that are a lot older, and then you have instances like that boy who was just a 6 year old. And so, I think the fact that you have students at different ages, students have been exposed to different traumatic experiences coming in and being all in that community. So you have a boy that is 17 in the same class with a boy that is 10. It just creates that space for that abuse to happen. And they also have the abuse that were caused by the staff. And this isn't just sexual abuse. A lot of physical abuse. A lot of using the children for house chores. Because no one is going to report. The parents have entrusted them into your hands because they can't sort of care of them at home, and they are providing them the kind of education they need. So you see the abuse between students and even from staff.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Following the interview, Adeyinka shared the following news reports confirming that abuse took place:

“The seven-year-old had spent just one academic term at his new school in Abuja when he told his mother he would not be returning to the institution, a special facility for children with disability. Using sign language, the boy, born with speech and hearing impairment, said he feared he may be killed.

“They will kill me if I return to that school,” Hannatu Usman recalled her son saying. Alarmed, Mrs Usman, a medical doctor, pressed for details. The boy motioned about being sodomised and being forced to perform oral sex on older school mates. He spoke about being driven in the night to a gathering where men killed and conducted rituals, drew children’s blood and forced them to perform erotic acts. The boy said he was brutalised whenever he refused to do as instructed.

On March 26, the minister of education, Adamu Adamu, said after weeks of investigation, a government panel had found no evidence of occult or cannibalism in the school. He dismissed the claim by the Usman family as “unfounded and baseless”, and said the panel based its conclusion in part on the fact that no other parent reported missing children at the school at Kuje, about 37 kilometres from the Abuja city centre.

Mr Adamu said the allegation of sexual abuse could not be confirmed because Mrs Usman had refused to meet with the panel, alongside her son. “However, the doors are still open for her to come forward and testify,” the minister told a news conference. “This is because as things stand today, this report is inconclusive as her major allegation of her son’s abuse has not been conclusively established nor can it be dismissed with a wave of the hand.”
He, however, acknowledged that a police investigation had confirmed the boy had been sexually assaulted. The Abuja police commissioner, Bala Ciroma, confirmed the finding to PREMIUM TIMES.

The report, first by the Abuja-based Human Rights Radio, that a child with a disability was sexually abused at a school his family hoped will help him with care, terrified parents and angered rights advocates, not less because it happened in the nation’s capital. Ahead of the announcement by the minister, a civil society group, Human and Environmental Development Agenda, said in a petition to the National Human Rights Commission that “the case is one deserving of immediate and urgent intervention and investigation.”


“The Minister of Education, Adamu Adamu, on Tuesday, said the allegations of cannibalism, sexual abuse, sucking of human blood and existence of a cult at the School for the Deaf, Kuje, Abuja was unfounded and baseless.

Mr Adamu, however, confirmed that a police report as part of the investigations confirmed that a student was sexually assaulted by a staff of the school.

The minister said this in Abuja after receiving the report of the special committee of investigations on allegations of sexual abuse of vulnerable minors at the FCT (Abuja) school for the deaf.”

(Source: Premium Times Nigeria, *Education minister confirms student abused at school for the deaf, denies other allegations*, 27 March 2019)

6.6.8. Is there evidence of additional practical challenges that affect certain groups of children or young people with disabilities more than others to attend schools?

This reports states that few girls with disabilities attend school in the Sahel region, including in Nigeria:

“Few girls with disabilities attend school in the Sahel Region, which stretches through parts of [...] Nigeria, [...].

“When they manage to attend school, girls with disabilities [in the Sahel region] face many obstacles. They often drop out of school early as they approach puberty, due to the family’s concern to protect them from sexual violence and early pregnancy. The lack of adapted toilets is also a cause of repeated absences and abandonment.”


6.6.9. Are steps taken by their family or community to ensure the education of children with disabilities?

One educator of and advocate for children with disabilities stated that many parents in her community do not want their children with disabilities to go to school:
“One of the challenges I faced is the stigmatisation and marginalisation that comes with working with children with disability, which is a big problem of acceptance and inclusion. Another challenge is the myth associated with children with disability as a punishment from God. As such, most parents in my community prefer to keep their children at home and lock them inside rather than bring them out for assessment and therapy, as most schools won’t accept them. Even when schools finally accept them, other parents in the school sometimes withdraw their children from the school, saying they don’t want their children to catch the disability.”


An academic article reiterates that parents not wanting their children with disabilities to go to school is an issue:

“C Investing in the Education of the disabled is a waste:

Head teacher 1 elucidated that ‘must parents do not want to bring their disabled children to the school, so they rather withdraw them from our school and leave them at home to deteriorate.’

[...] However, teacher 2 revealed that ‘parents do not like paying for these services.’ In her words, the “parents find it difficult to agree to pay school fees for their disabled children. They would pay for their nondisabled wards but would owe the school fees of their disabled child. To these parents, they feel that investing in such a child is useless.”

Following through teacher 1 indicate “that some parents do not like to send their disabled children to school, and even when do they would refuse to pay their school fees.”

The school’s manager provided additional evidence for the above stated views

“It takes a lot of sensitization and counseling through the directress, head teachers, parents-teachers association to achieve progress in that regard.”

Conversely, the directress elucidated, “that in Africa, there is a general attitude that you train a child so that later the child can take care of you. However, since many disabled persons may not be able to meet these expectations, some parents feel no need to bring their disabled children to school. They feel it is a hopeless cause.””

(Source: Social and Legal Studies, Access to Justice for People with Disability in Nigeria: Therapeutic Day Care Centre as a Case Study (TDCC), 9 Jan 2021, pg. 46 -47)

This report states that deaf children are often prevented from attending school by their families:

“There are several Deaf schools in Nigeria. These schools are usually boarding schools and are frequently supported by the government. However, because parents see their Deaf children as a shame on the family, they are often prevented from attending. Deaf children are often seen as cursed or demon possessed. Less than 40% of Nigeria's Deaf children are enrolled in primary school and even fewer are allowed to continue to secondary school.”
6.6.10. How has COVID-19 affected access to education for children and young people with disabilities?

Theophilus Odaudu describes some of the ways in which the COVID-19 pandemic impacted upon the education of children and young people with disabilities:

“Of course, with COVID-19, schools were closed down and various home learning methods were designed. Children with disabilities were left out in all of these. If schools and curriculum were inclusive, the need for inclusion would have been factored into whatever is being designed. But because children with disabilities were segregated, they were forgotten. Also, learning platforms were largely inaccessible […] So the thing around COVID-19 is-- so there are a couple of information out there and couple of things that I have heard about and because we still have this issue with data like I always say it’s difficult to speak with certainty on some of these issues. But I know that due to the pandemic a lot of children in institutions have to return to their families. Especially in special schools and all of that. And going back to the families where there is no alternative arrangements to provide continuous support to the children just like there was for other children from their various schools and all of that and the various platforms were also not accessible. So a lot of children with disabilities were left behind in terms of their educational needs and other support that were needed”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

A news article on All Africa notes with regards to alternative forms of communications for disabled students that:

“Students with disabilities are said to be receiving inadequate learning support during the COVID-19 lockdown due to lack of inclusive learning environment.

Students with special needs, parents, teachers and interest groups are also reportedly left out in the COVID-19 lockdown plans.

In Nasarawa State, broadcast lessons are made available to students who have radio and television, but there is no provision for students with disabilities.

[...] The Chairman of Niger State Association for the Blind, Mr. Abdulrahman Awal, said blind students were idle at home as there was no provision for their learning.”

(Source: All Africa, Nigeria: Students With Special Needs Left Out Of Lockdown Plans, 4 June 2020, para. 1-3)

A number of disability activists wrote an open letter to the Minster of Education raising issues COVID-19 and school closures were having on children with special needs:

“During the 2020 lockdown, the Engraced Ones wrote an open letter to the minister of education, Mallam Adamu Adamu. “Families had over the years grappled with the
challenges of access, quality and relevance of the existing curriculum of mainstream schools to their children,” they wrote. “In addition to these worries, at the moment, we are concerned about the effects the closure of schools may have on our children...” They went on to express their concerns about the possibility of children regressing in school, of parents not being able to afford the fees charged by private special needs educators during the pandemic, of the importance of parents getting trained to meet the needs of their children at home, and so on.

They copied the Ministry of Communication and Ministry of Women Affairs and Social Development in the letter, but no substantial steps were taken. The only response they received from the Ministry of Education was that they should take advantage of the TV programmes that the children might find helpful. Al Jazeera reached out to the Ministry of Education for comment on this story but received no response.”

(Source: Al Jazeera, “How parents and teachers empower Nigeria’s children with special needs children”, July 2021)

7. Access to child protection

This section should be read in conjunction with sections 1.6 – 9 with subsection Exploitation and other types of harm and sections 4.5-4.8 within subsection State protection.

7.1. Are child protection/social services available and if so what kind of assistance is provided?

The provision of child protection services is defined in the Child Rights Act 2003 and is available [here](#).

However, a report produced by UNICEF in 2017, as part of a project to support the government to improve the child protection system in Nigeria, found that many of its states had not domesticated the law and even in those where it had been, implementation was extremely limited. The report states that this, combined with ‘dominant social norms create an environment in which violence against children is able to continue largely unchecked’:

“Most child protection issues in Nigeria are covered by the 2003 Child’s Rights Act, which explicitly prohibits all forms of violence, abuse, neglect and exploitation, although only 23 of the 36 states have domesticated the law, which is required to give it legal effect at state level. In 2013, the Federal Government adopted the National Priority Agenda on Most Vulnerable Children, 2013-2020, which committed the Government to ensuring that all children are safe from abuse, violence, exploitation and neglect. The Violence Against Persons Prohibition Act was adopted in 2015, providing robust sanctions for violence against children, including FGM/C and child marriage. Child protection issues are complex, multifaceted and covers a wide range of interventions, as such, there is an equally wide range of government partners engaged with addressing child protection issues at state and federal levels, including the Office of the President, Federal Ministry of Women’s Affairs and Social Development, state ministries responsible for children and social welfare, Federal and state Ministries of Justice, Federal and state Attorneys General, National Judicial Institute, the Nigeria Police Force, Nigeria Prisons Service, Federal and state Ministries of Education, Federal and state Ministries of Health and Federal and state Ministries of Information and the National Orientation Agency. Priorities for the new country programme were discussed with the Federal Ministry of Women’s Affairs and Social Development and other key counterparts during the midterm and annual reviews (pg 1).
The national legal umbrella for child protection which sets the framework for the provision of prevention and response services is the 2003 Child Rights Act. Domestication by the States is required for it to be in force. However, to date, only 23 of 36 states have domesticated the Act. In states that have domesticated the law, implementation remains extremely limited and most mandated bodies are not aware of their duties under the law. With no regulatory framework to operationalize the law, the mandates, powers and duties of key actors remain unclear. As a result, provision of child protection services by the justice, social welfare, education and health sectors remain limited across Nigeria. Prevention interventions to address social norms that condone violence are limited as well as services to support child victims and survivors of violence to allow them to be protected from harm and recover. There is no clear standard minimum package of child protection services provided across LGAs. There is a reliance on CSO services, which are limited in coverage, capacity and coordination. Among the contributing factors to this is the weak coordination between key sectors – including, but not limited to, social welfare, health, justice and education – for the delivery of a comprehensive and holistic child protection response as mandates are unclear and overlap. The institutions that should provide these services are ill equipped as they are understaffed, broadly untrained and significantly financially constrained. The social welfare system is acutely understaffed with merely 8,497 social welfare officers for a nation with over XX children.

These constraints similarly affect the justice system which often fails to hold perpetrators accountable. Consequently, there is a lack of trust in the justice system. In addition, the justice system is not providing the critical support to social welfare services to enable children to be supervised in situations of risk or to be removed, by child protection services, from situations of harm and placed with appropriate alternative care. The absence of an effective child protection and alternative care system also results in the justice system, and places of detention, being used in lieu of emergency care, resulting in unnecessary deprivation of liberty for minor offences.

Dominant social norms create an environment in which violence against children is able to continue largely unchecked and in a culture where silence prevails, incidents remain underreported. Some forms of violence continue to be socially acceptable as a form of child rearing and discipline, and some of these perceptions are considered to be rooted in religious and traditional beliefs. The DHS 2013, MICS 2011 and the Violence Against Children Survey 2014 highlighted high levels of tolerance for violence, especially intimate partner violence, with levels of acceptance for violence against partners as high as 79 per cent. Common drivers of non-disclosure and low service-seeking behaviour include stigma, pressure from family not to report, fear of not being believed and being refused help. Interestingly, children also did not report because they did not see violence as a problem, even in cases of sexual violence. The findings of the Violence against Children Survey alludes to the fact that, to some extent, violence is an ingrained part of childhood.”(pg 2-3)


The sources that Asylos and ARC Foundation interviewed in the summer of 2021 were all of the view that there is no functioning child protection system across Nigeria that is available to protect children with disabilities from violence, abuse and discrimination:
“There is no mechanism created at the National or state levels specially to respond to abuse of CWD or in charge of protection issues. The Child Rights Act is applicable to all children however some states have women affairs departments.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

“Not all states have such laws where it exist, there is little enforcement and implementation”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

“There's this Child's Rights Act, which just a few states domesticated, and they refused to completely domesticate it in some states, especially in northern Nigeria. They cannot accept the policy about child marriage for example, because of the cultural issue, and so there is no political will to domesticate the law. It's even worse for children living with disability because there was no specific provision that could protect them. So, I don't think there's any child protection bill that is working. Just patches of NGOs that are trying to see how they can work with that policy.”

(Source: Interview with Timothy Ali Yohanna, Researcher and author of ‘They call us senseless beggars’, 29 May & 18 June 2021)

“So there are no child protection systems for children with disabilities. At least none in the formal sense of it, and a lot of the time children with disabilities, except those protected by the family, do not really have access to any level of protection from the government. We do have some-- you may have organisations and people stepping into perform some certain roles that are akin to protecting the child, like I said in the previous section that to a large extent, issues around disabilities are usually talked about without little action. That's also the same thing that applies to children with disabilities. So even in terms of policy, you may see a lot of policy around protecting children but nothing specific on children with disability. And then even on a general note, for child protection, there is little implementation of any existing policy.

There are different departments that are supposed to play different roles ranging from trafficking, exploitation and all of that, but no disability-specific service. So they sometimes do this on a case by case basis. You'll sometimes hear of one case that comes up and how the department stepped in to play a certain role and all of that but nothing broad. Nothing that one can easily point to as a structured arrangement to offer any form of protection to children with disabilities.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

“The only law known so far is the Child Rights Act which has not been domesticated by all states in the Country. Different states have their own laws, like the Lagos State Special People’s Law which, in itself, is a complete misnomer. The Act uses terminology that is inappropriate to persons with disabilities, such as “people living with disabilities”. To what extent the law, i.e. the Child Rights Act and the Lagos State Special People’s Law is being applied is not yet known.”
These views were shared by lawyer and human rights activist, Ugochukwu Amasike, quoted in an Al-Jazeera news article:

“Lawyer and human rights activist, Ugochukwu Amasike, blames the lack of implementation of such laws on a shortage of trusted systems to protect children. “These policies cannot work without a system that can provide the child’s basic needs. Are there decent public schools providing free education to enrol them in? Can they get decent healthcare? When are the children taken from these homes are they taken back to the same environment that drove them into the industry in the first place?”

(Source: Al Jazeera, “A long way from home: The child house helpers”, 15 July 2021)

Betty Abah explained the context in Nigeria. She outlines that the issues of children’s rights, child protection, welfare of children, ‘let alone children with disabilities’, are not given ‘particular attention’. This is particularly grave where children with disabilities are discriminated against even within families:

“I think it’s important to note, in general, that Nigeria is not a very child-friendly country for some reason. We've had issues with child witchcraft branding, a lot of discrimination against children, which the authorities haven't made a conscious effort to address and which the rest of the society tends to look away from. And so many of these factors affect the general ways in which we respond to the abuse of children. And then even if you raise the alarm about the abuse of children, there is general indifference in the rest of the society, except when such abuse becomes really, really, gross. For instance, we're very much interested in child trafficking, children being used as domestic workers, and so we monitor the trend. So last year there was a major news story about a couple in the southeastern region of the country who put a nail on the skull of a child, on the head of the child, a house help, a six or seven-year-old house help. It was just horrible. And I think the entire country was outraged. Apart from instances like that, we don't tend to pay particular attention to issues of children's rights, child protection, children's welfare, let alone children with disabilities. Even within family circles, children with disabilities are discriminated against. It's something that is extremely prevalent in the country.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

She went on to reiterate the view that there is not a functioning child protection system, despite the existence of legislation such as the Child’s Rights Act:

“In Nigeria, we don't have a functioning child protection system. We have different laws, different acts, the Nigerian Child’s Rights Act of 2003, which has also been domesticated by several states across the country, including in Lagos where I live, with the largest population, with the most active civil society sector, in 2007. But it is not active, it's not functional. Most of the laws are not implemented. Most of the sections are not implemented. And there is very little attention to the sections on children with disabilities. And I think that is because on a general note, laws in Nigeria are not enforced; most of the time they're not implemented by the state actors. We have so many laws that at the end of the day, they're just there to beautify the shelves of the lawmakers or to make them look good in the eyes of the society, in the eyes of the world, especially when it's a global trend.”
She stated that there are three main factors that account for the lack of implementation of legislation on child protection: low awareness, lack of political will, and corruption:

“And I think, for me, there are three major factors. Number one is low awareness. Majority of the society are mostly not aware of these developments, of the existence of such laws. They’re just published in the newspapers or in the news media. And then a great percentage of the populace are not very literate or completely illiterate, and so they cannot even comprehend or access the language in which these laws are written. The laws are not broken down in the language they understand. And most of the time, people are generally detached when it comes to anything about government, so they’re not even aware that these are the laws, these are the privileges they have. And then there’s a lack of political will. Majority of the politicians are just there for personal gains or personal enrichment, so they don’t go all the way to ensure that this is done for the good of the society. Just completely detached. Most are completely detached from the populace. And then a major factor is corruption, especially with the law enforcement agencies. When cases are reported, the agencies involved do not take up the case or they are bribed to leave the case, or most of the time they are bribed, especially if the perpetrator has a higher economic power than the abused. So low awareness, lack of political will, and corruption, especially with the law enforcement agencies, a major factor, and I’ve encountered this on several occasions working on child sexual abuse especially. So, this applies both to children in general and to children with disabilities. And abuse of rights of children with disabilities is even worse because those children are discriminated upon even within their family circles. So, when their rights are abused, the families, most of the time, do not think it’s necessary to take up the enforcement of their rights.”

7.2. Are child protection/social services available and accessible in all regions of the country?

Sources indicate that there are gaps in child protection services in conflict affected areas of Nigeria:

“Children continue to remain vulnerable to a multitude of threats in Borno including abduction, violence, child labor and child trafficking. There continues to be an increase in gaps and needs for child protection (CP) services in Borno state with increased threats and risks exacerbated by recent attacks along with the influx of IDPs into Bama. Recent camp closures by the government, where IDPs have been relocated to other LGAs, has had a negative impact on the delivery of child protection services.”

“NSAG [non-state armed groups] attacks, abduction and forced recruitment are major concerns for affected populations in the BAYstates. Insecurity, overcrowding in camps, ongoing displacements and the continued harsh economic conditions are all driving the exploitation of women and girls and the adoption of negative coping mechanisms. Lack of sufficient child protection services in the face of large-scale needs is also a particular worry.”
7.3. Are there any obstacles in accessing social services/child protection services?

Regarding the barriers young people might face in accessing protection, Theophilus Odaudu stated:

“So there are several barriers that might prevent children with disability from accessing services like they have to. One of these has to do with communication barrier especially for persons that use the sign language. A lot of the time when there's abuse whether for children with disability or even adults or young persons with disability who are deaf you always have that issue about how they communicate with the relevant authority and most of the time they're not able to fully express themselves or fully state their case. And sometimes they're not even heard or given the opportunity because it is just generally assumed that they won’t be able to communicate fully. So this creates a lot of barriers. The physical environment can also be prohibiting especially for persons on wheelchairs. Accessing some of those buildings and trying to go and file reports that could be an issue. There’s also this educational gap because then you need to write your report, you need to be able to state your point, and sometimes the necessary assistance to help people do this are not available. There have been cases of persons with disabilities who are violated. Either being harassed sexually or different kind of abuse and rather than reporting to the authorities the families will sometimes step in and try to do a mediated kind of settlement internally maybe because the perpetrator is a family member or someone who is close or perhaps there has been some offering of monetary benefit to the family in order to forget about the case. And because the persons involved are probably young persons that cannot ordinarily step up to speak for themselves the case ends up dying. So there have been several of such cases that have been in the public in the past and all these combined together do usually serve as a barrier for persons with disabilities to access justice especially for children with disability who in most cases will need to rely on someone to provide necessary support for them in the process.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

When asked if the support available from the government is accessible for children with disabilities, Theophilus Odaudu said that they suffer a ‘higher level of discrimination and lack of access’:

“It’s limited, yes. And yes, children with disabilities have the most obstacles to accessing it. And you mentioned trafficked children. This girl was trafficked to work as a house help. She spent two months with the government anti-trafficking agency, but she was malnourished because she wasn’t well fed, and then they returned her to me and said, "We can’t keep her anymore. You come take her." I mean, how did they expect me to have the resources? How would the government hand over someone, a minor, to a private individual and say, "We don't have the resources to keep her anymore"? So, this happens to street children, to
trafficked children, to children with disabilities. And then children with disabilities even suffer a higher level of discrimination and lack of access.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

When asked if private organisations meet the demand for support, Betty Abah stated that their resources are insufficient and that government resources, including from foreign donors, are not well utilised due to corruption:

“No, they do not. The government is the one that has the biggest resources, and so it’s just ironic that they expect us to do everything, and they do very, very little.

[...] The government doesn’t want to be involved, even though they get a lot of funding from international organizations: EU, UNICEF. They say they use this for training, they use it for monitoring. Then they use it to buy very expensive vehicles, official vehicles. And then, of course, I think part of it is diverted by the officials because corruption is quite a systemic thing here. So, the funds are not well utilized, especially for the interests of these very vulnerable children and their families.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

Betty Abah also stated that because of the lack of a government welfare system, people are reliant on private organisations, religious organisations and private individuals:

“We don’t have any sort of welfare system here in Nigeria. So, families are not able to access welfare, and then families with disabilities cannot get any kind of child support for those children. So, people are generally left to their own devices. Sometimes the religious organizations help, sometimes private individuals that are well-to-do, and then sometimes the NGOs. And most of the time, the NGOs are starved of funds themselves, and it’s a difficult situation.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

When asked what support would be available if a child with disabilities experienced abuse, perhaps within the family, went missing, or was abandoned by their families, Theophilus Odaudu and Adeyinka Ige-Onabolu, stated that:

“So nothing exists that’s different from what's in the general framework and that if there is an abuse there's always the department that one can make reports to. The human rights commission, the agency against trafficking and persons, and then even the Nigerian police, and all of that depending on the nature of the abuse or exploitation or the nature of violence that's been committed against the child. But there is nothing specific for a child with disability. And even on that general note like I’ve earlier mentioned that of course these instruments or departments or institutions are there but the way they function not too many people access their services and not too many people benefit from what they do.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)
"The reporting is also dependent on the level of knowledge of the person making the report. They'll probably just, say, go to the police station and make the report. And it's also dependent on who they reach at the police station. A lot of times, what happens is the police go in and arrest the adult who is responsible for this child. But we've seen instances where these cases don't even go to court, or they get settled, or the child doesn't get taken away from them because the adult ends up begging saying, "oh, you know what? I'm just helping their parents by taking them off them," or, "taking care of the child is also very burdensome for me." And I mean, you find a lot begging, and then they allow the child to go back to the home. It's in very rare cases, and maybe cases that come on social media or have been taken on by an NGO, do you actually see the social welfare department going in and taking the child. The honest truth is I think the conflict is, sometimes, when you take the child, what do you do? Does the government have the capacity to take in the child into the very limited number of homes? Or is it just a case of sending the child back to the village where their parents are? So that conflict, that tension ends up being there. And then, that's why a lot of times, you really don't see anything happening or these cases progressing. And this is dependent also on where in Nigeria you are, which specific state in Nigeria. In the smaller states the knowledge level even amongst the social welfare departments is quite low. So even within Nigeria, there are differences."

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Betty Abah said that if a child went missing, it may be reported to the police and via social media:

“I think what is done most of the time is that people report it at the police station. And sometimes they’re lucky. The police take up the case and try to look for the missing child, or they put up notices. And especially with social media now, I think it makes things easier because it's taken up by social media influencers, and then notices are spread round. And somehow it has worked, with some of the kidnappers being spotted when pictures of the lost child are all over social media. So social media and then reporting to the police."

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

If a child with disabilities experienced abuse, Betty Abah stated that unless families are able to bribe the police, the police will not pursue an investigation:

“Okay. So, most of the time, it’s reported at the police station, and then most of the time, the police do not go all the way to ensure justice, especially if the family of the abused child is not able to bribe the police. Because you get to a police station to report a case, and then they say you have to bring 1000 naira, 2000 naira; they need to buy a pen to be able to write down the report; they need to buy a notebook. I mean, it’s that ridiculous. So, you have to be in a position to give money to the police. Or they say they’re trying to get the person arrested, but there’s no fuel in their vehicle; you have to give them money. It’s that ridiculous. That’s what we face most of the time. And so, what happens is because of the dysfunctionality of the system in terms of the law enforcement agencies and even the ministry. We are supposed to have a ministry of welfare, ministry of women’s affairs, but most of the time, they do not really provide the support that is necessary. They say there’s no funding and all of that.

[...] So, most of the time, those who intervene are the private organizations.”
Timothy Ali Yohanna reported that there is no way in which a child can complain and get justice for abuse by a family or community member:

“If, for example, a child complains about an atrocity done to him by either his father, uncle, mother, or any of the relatives, the community members will address that child with all sorts of bad names such as: stupid, bastard, infidel etc. Some NGOs get involved and get the parents arrested by the state, and then put them in custody for some time, and then they pay their way out and that's the end of the story. So, to me, there is no way a child can complain and get justice for what has been done to them.”

7.4. What alternative care is available for children who cannot live with their family? Is such care accessible and adequate for children with disabilities?

A 2021 country report from the Netherlands Ministry of Foreign Affairs states that there are various care options available for children in Nigeria who cannot live with their family, including care from extended family, NGOs, religious organisations, and private and state-run orphanages. According to the report, based on a number of sources, the quality of care provided in these alternative care settings is highly variable, and children may be subject to abusive, violent and exploitative treatment:

“Care for unaccompanied minors
The latest population survey shows that 6% of Nigerian children under 18 are orphans or have lost one of their parents. However, a higher proportion of children (8%) live without both biological parents. In the 15-17 years age category, 20.2% of respondents were in this situation.886 The previous country of origin information report indicated that the care of orphans is mainly a matter for the extended family.887 For children for whom this care option does not exist, the government, NGOs and religious organisations all offer care options. Sources consulted for this report indicated that this is still the case,888 but that there are differences between urban and rural areas and the Christian south and Muslim north of Nigeria with regard to the care of orphans.889 These will be discussed in more detail in the following paragraphs

Geographical differences in the care of orphans

According to a confidential source, community life in the countryside ensures that there is a better safety net and more support for orphans and vulnerable children in rural areas than in urban areas. Family members are more likely to take care of orphans in rural areas. In cities, where individuals from different backgrounds live together, the chances of family members taking care of orphans are fairly limited. In such cases, orphans may be sent back to the villages where their parents came from, if there are relatives willing to take them in. If not, they sometimes end up in orphanages, which are mainly located in urban areas.890 According to the same source, there is also a great difference between the situation in the north and south of Nigeria with regard to the care of orphans. In the predominantly Muslim north, the system of almajiri boarding schools exists.891 This is a network of Islamic boarding schools where children – usually boys between the ages of 4 and 18 – can study
the Quran. These teachers sometimes have hundreds of children in their care and generally lack sufficient resources to take care of them. Most of the children attending almajiri schools therefore have to beg or perform other forms of child labour in order to support themselves and maintain the school.892 This almajiri system hardly exists in the south of the country. Orphans and vulnerable children in the south therefore generally end up with members of the extended family, in orphanages or on the street.893

Care with extended family

Orphans taken in by extended family run the risk of being subjected to various forms of exploitation and child abuse, but it is not known to what extent this occurs. According to a confidential source, the situation of children who are taken in by extended family depends on the intention with which the family members take the child in and the family’s socio-economic position. Many family members will take in children out of altruistic motives,894 but there are also cases where families take in orphans in order to use them as domestic help or as an unpaid worker in, for example, a family business.895 The confidential source cited above stated that orphans taken in by family may be subject to the following forms of abuse and exploitation: denial of access to education, malnutrition, domestic violence, sexual exploitation and abuse, and child labour. Even if the family has good intentions, poverty may leave it unable to provide for the basic needs of orphans. Care in the family is not subject to any form of government supervision, nor is there any financial support from the state for families taking in minor relatives.896

Presence and capacity of care homes

For orphaned children who do not have family to go to, there are care homes run by the state or private organisations. Boys and girls of different age groups can go to these.897 According to a confidential source, there is no unified register of all orphanages across the country.898 Registration and licensing for such homes is carried out by the relevant state government through its Ministry of Women Affairs and Social Development (MWASD). Recent research into conditions at orphanages in four Nigerian states (Cross River, Lagos, Gombe and Plateau) suggested that there are significantly more care homes in southern Nigeria and that private organisations are responsible for looking after most unaccompanied minors in Nigeria.899 Each state investigated in this study (Cross River, Lagos, Gombe and Plateau) had a single facility for orphans run by the state MWASD. In Gombe, the facility in question was not in use,900 and in the other states there was insufficient capacity at these facilities. As a result, juvenile detention centres were used in Lagos, Gombe and Plateau to look after non-delinquent minors.901

Conditions at care homes

The previous country of origin information report stated that the conditions at and the quality of care homes for neglected children and orphans varied from austere to poor. A confidential source confirmed that the situation in most orphanages in Nigeria is still ‘appalling’, with a lack of basic services and numerous cases of abuse and exploitation of orphans.904 The above-mentioned study of the quality of orphanages in Lagos, Cross River, Plateau and Gombe showed that the quality of care varies greatly from facility to facility.905 According to this study, care at private facilities is generally better than at state-run facilities.906 The study identified several private facilities that were able to provide for the basic needs of children. Examples of such care homes in Cross River state are Blessed Hope and Faith Foster Family, Gapolunya Children’s Residential Home, Mother Elizabeth
Redeemed Home, Society for Youth Development and Rescue Initiative. Examples of such shelters in Lagos state are Don Bosco Boys Street Children Home, Motherless Babies Home Lekki, Bales of Mercy Children’s Home Kosofe.

While this study indicated that some private care homes met minimum standards for care of unaccompanied children, it also stated that both private homes and those managed by the MWASD lacked resources and were largely dependent on charity. In some homes this led to a lack of basic facilities such as a separate bed for each child, sufficient food and clean sanitary facilities. Access to medical care and education was also not always available.

Corrupt adoption practices

In addition to the inadequate quality of care in many orphanages in Nigeria, the Nigerian media reported on orphanages that were guilty of corrupt adoption practices. The study on the quality of care of unaccompanied minors cited above stated that there is always a risk with private childcare in Nigeria that it is really a business rather than a care facility. According to this report, ill-intentioned individuals can set up a care home as a source of income.

Supervision of care homes

In 2007 the MWASD published national guidelines for the treatment/care of orphans and vulnerable children. In this document, authorities at local level are designated as the institutions with primary responsibility for overseeing the welfare of orphans. In practice, both the police and Commissioners for Women/Gender Affairs are responsible at state level for inspections and for closing facilities if abuses are found. Several facilities were closed during the reporting period.

Street children

It was not possible to find precise figures on the number of street children in Nigeria, but various sources speak of large numbers of street children, especially in large cities.

Theophilus Odaudu stated that there was no functional alternative care available for disabled children who cannot live with their family, and as such homes are usually ran by non-government agencies:

“So here in Nigeria, we do not have such structure. Of course, there is the department of social development that’s supposed to provide such kind of protection to children and even children with disabilities who are in such a situation. They are homeless or they have difficulty living with their families. But the social development department also does not have shelters that can accommodate children with disabilities. I know and I’ve heard of temporary accommodation being provided for persons with disabilities especially women with disability who suffer violence - maybe domestic violence or intimate partner violence and all of that but nothing too specific on children with disability. There's probably one or two centres that existed in the past which I'm not sure if they still do and the level of awareness among persons with disabilities and such existence is very poor. We also have organisations stepping in to provide some of those shelters trying to accommodate children and bring children with disabilities that are on the streets or that do not have a home or cannot live with their families. But in most cases, these are NGOs or individual family charities that do provide such level of protection. So you get more of that than anything from the government.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

If a child with disabilities was abandoned by its family, Betty Abah stated that they might be taken to a shelter, although ‘most of the shelters are not functional’ due to corruption and lack of political will:

“Most of the time, it’s reported to the police station. And then if the police are not able to trace the parents, they talk to the government agencies involved, and then the government agencies get in touch with the Child Protection Network, which is actually very active in Lagos. And then the Child Protection Network tries to put them in shelters and all of that. But the sad aspect of it is that the government should take those children into their shelters in Lagos, and Lagos is supposed to be above average, but most of the shelters are not functional. We run a shelter for women and girls who are abused, and most of the people in the shelter were referred by the Lagos State government, when really the state has all the resources in the world to be able to afford to run several shelters for children, for women,
but they do not have a single functional shelter. They do have shelters, but most of the time, most of the year, they're shut down. They're not functional because of corruption and because of a lack of political will to funnel more funding to the shelters.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

Betty Abah also reported that male children would be placed in juvenile homes, which are run by the general prison service:

“So, there are juvenile homes for children, especially for boys. To some extent, those ones are functional, so you have boys in those juvenile homes. They are provided by the government, especially by the federal government. It's an arm of the general prison service. [...] They're just like the general juvenile home or prison system in Nigeria. It’s mostly for children in conflict with the law.

Most of the homes for the children with disabilities are run by private organizations. We hardly have a functional home for children with disabilities.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

Adeyinka Ige-Onabolu reiterated the view that there is a lack of formal alternative care:

“We don't have many government-run alternative systems. We have a lot of them being funded by religious organizations, private individuals, and non-governmental organizations. And as you can imagine, the fact that they're being mainly funded or supported by private donations means a lot of times they're not even very adequate to cater to children without disabilities. So it becomes much more difficult for them to be able to support children with disabilities. They may accept the children but being able to support children with disabilities based on their needs, it becomes harder. Even though there are some, I can think of the home for the blind or the school for the handicapped. Many are supported by churches or private individuals. And the funding is not consistent. They try their utmost best, but even at the home for the blind, which is specific to children with visual impairment, they still cannot 100% cater to their needs because they are restricted by funds. So the children get as much as they can get in the situation but there are very little of those types of places. The most commonly found is the informal one where you just live with somebody.”

Adeyinka Ige-Onabolu went on to state that as a result of a lack of formal alternative care, families might rely on informal support, which can put children with disabilities at risk of exploitation:

“The most common type of alternative care system available in Nigeria is the informal one. This is where children live with extended family or people who they are not related to. This is mostly children coming from the villages and the rural communities, and they send them into the cities and towns to live with people either related to them or not related to them. The idea is supposed to be in exchange for an education, like a person in the city providing them an education, and they have to do the house chores, take care of the home in that sense. So fetch water, wash, do all those things. And that’s the most popular form of alternative care arrangement. Although there are some formal ones, but they’re not all run by the government.
So that's for children generally. It's not very common with children with disabilities because they are seen as a burden. So if you're going to send a child from the village to come and stay with me in Lagos, and I'm going to send that child to school, the child must be able to help me with work. You're not going to send a child that is physically challenged because the child probably cannot do much. And it has an impact on the type of school they can go to. Most people that have this type of arrangement just send the children to government schools which are the public-funded schools which cannot even cater to regular children, never mind children with disabilities.

So the most prevalent form of disability where this arrangement occurs is with children with intellectual disabilities. And mostly, they are used for house chores. So they probably are not going to school because their parent as they may have made very little academic progress. For example they may have been in the same class for a number of years. So they send them to the city to be used for chores. So people who engage in this sort of arrangement don't feel obliged to send the child to school because the child has been termed one that is unable to learn. So they just put them in their houses or store to work. They leave them to take care of their store, to make sure nobody comes into their store, they can count on them to give the right amount of change back and all those little things. But they don't think they're worth sending them to school. If you compare it to visually impaired children and children with physical disabilities, you find that it's children with intellectual disabilities that are used in this way in most alternative care situations.

These cases don't get treated through a child exploitation lens. Typically, the government doesn't come into this. The only time you probably have reports being made is if there are concerned neighbors who see something and speak up. If it's just a situation where you're not sending a child to school or the child is just doing chores at home, that doesn't trigger anything. But what probably triggers something is if there's a lot of violence against the child. And that, also depends on your neighbors if they are people who see that as abuse. So sometimes, you have instances where people are report child neglect to the police and say, "this child is sleeping outside," and, "this child is being beaten too much. This child is not given food." It's those types of instances that might trigger people coming forth saying, "this is wrong, and something has to be done." But if it's just the minimum of the child doing the chores, and the child is at home, it's still exploitation, but they do not see that as violence, then everybody's fine. In fact, some people interpret it like they're helping the child. And the problem is because all this is undocumented. There's no record that the child has come from this particular town and is now here. The child is slipping through the cracks. No one is looking out for them and nobody is accountable if anything happen to them.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

The latest report from the US Department of State on human rights practices, covering 2020, also states that in the absence of social welfare programs, children with behavioural or mental health problems are sent to become ‘almajiri’ (emigrants), staying with Islamic teachers who claim to offer treatment. Many almajiri are subject to forced labour and do not have their basic needs met, with many becoming effectively homeless:

“In 2010 the Ministerial Committee on Madrasah Education reported 9.5 million children worked as almajiri, poor children from rural homes sent to urban areas by their parents ostensibly to study and live with Islamic teachers. Since government social welfare programs were scarce, parents of children with behavioral, mental health, or substance abuse
problems turned to the almajiris of some mallams who claimed to offer treatment. Instead of receiving an education, many almajiri were forced to work manual jobs or beg for alms that were given to their teacher. The religious leaders often did not provide these children with sufficient shelter or food, and many of the children effectively became homeless. In April governors of 19 northern states agreed to ban almajiri schools, and during the COVID pandemic they repatriated thousands of students across state lines. By year’s end there were reports that almajiri schools had resumed in some states.”


7.5. What happens to children with disabilities in alternative care arrangements when they turn 18?

Sources interviewed by Asylos and ARC Foundation explained that alternative care is usually provided by non-government agencies, and children in this situation are unlikely to be accepted back by their families, or by society. They will often remain in the institution:

“[Can you tell us what happens to young people with disabilities who are living in alternative care facilities when they turn 18?]

Oh, that’s extremely difficult. I just can’t imagine it because most of the time they do not go back to their families, they’ve not bonded with their families, and so they’re not used to them. So, I don’t know. I know that in some orphanages that have children with disabilities, they try to ensure that those children access some kind of education, and then they go on to stay in those orphanages because they’re not accepted back with their families and the society is not very friendly to them. Some of them stay and work at the orphanages as staff. Some get married there. I would assume that some of them that are able to get some education, some skill, are allowed to live on their own because they have some skill and they’ve been trained. They’re better off than they were when they were young as a result of the training and the care they receive in those homes. So, I think they’re left to live on their own. But I know that the government is not involved in any way in the welfare of these people and their future.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

“A lot of these formal arrangements are provided by private donations. So it really doesn’t matter. What they just try to do is ensure that you’ve gotten an education by that time, and then maybe you can learn a skill. You find that when you visit the homes, kids who grew up in the homes still come around. They sort of are just part of the family permanently. In fact, some of them have been educated. Some of them are working. But because that’s the only home they’ve known, they just still come back and live there. They’re still around. So they don’t get thrown out in that sense when they turn 18. They’re still very much-- and that again is probably because it’s not being provided by the government.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)
8.1. In what circumstances are children and young persons with disabilities deprived of their liberty and/or institutionalised?

Several sources provide information on the circumstances in which persons with disabilities, including children and young people, may be institutionalised and deprived of their liberty:

An OHCHR Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context, found evidence that persons with disabilities were often held by the state against their will in punitive custody and commonly arrested en-masse and transferred to “rehabilitation centres”, with deplorable conditions:

“Persons with disabilities
Although Nigeria ratified the 2006 Convention on the Rights of Persons with Disabilities and its Optional Protocol, established an Office of Disability Affairs, and although some States have adopted laws protecting persons with disabilities, they are often held against their will in punitive custody, are frequently regarded as sub-human, and often not provided with any social protection or support.

Persons with disabilities are commonly arrested en masse by government officials and police, and transferred to “rehabilitation centres” which, according to information I received, are tantamount to the poorest prisons, with extremely overcrowded rooms, deplorable conditions, lack of access to showers and insufficient food. I was told that residents contract preventable diseases such as tuberculosis, and often die prematurely while in the centres.”

(Source: OHCHR: Visit to the Republic of Nigeria by Ms. Leilani Farha, Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context, 23 September 2019)

Human Rights Watch reports that people with actual or perceived mental health conditions may be placed in formal and informal institutions / facilities without their consent, where they are detained indefinitely, shackled and experience physical and emotional abuse:

[...] Between August 2018 and September 2019, Human Rights Watch visited 28 facilities ostensibly providing mental health care in 8 states and the Federal Capital Territory, including federal psychiatric hospitals, general state hospitals, state-owned rehabilitation centers, Islamic rehabilitation centers, traditional healing centers, and Christian churches. Human Rights Watch interviewed 124 people, including 49 chaining victims and their families, staff in various facilities, mental health professionals, and government officials. The names of the victims have been changed to protect their safety.

Deep-rooted problems in Nigeria's healthcare and welfare systems leave most Nigerians unable to get adequate mental health care or support in their communities. Stigma and misunderstanding about mental health conditions, including the misperception that they are caused by evil spirits or supernatural forces, often prompt relatives to take their loved ones to religious or traditional healing places.
Human Rights Watch found that people with actual or perceived mental health conditions, including children, are placed in facilities without their consent, usually by relatives. In some cases, police arrest people with actual or perceived mental health conditions and send them to government-run rehabilitation centers. Once there, many are shackled with iron chains, around one or both ankles, to heavy objects or to other detainees, in some cases for months or years. They cannot leave, are often confined in overcrowded, unhygienic conditions, and are sometimes forced to sleep, eat, and defecate within the same confined place. Many are physically and emotionally abused as well as forced to take treatments.

[...] In psychiatric hospitals and government-run rehabilitation centers, staff forcibly administered medication, while some staff admitted to administering electroconvulsive therapy (ECT) to patients without their consent. (pg 2)

“Nigeria has fewer than 300 psychiatrists for an estimated population of over 200 million. Several mental health professionals told Human Rights Watch that quality mental health services are available only to wealthier citizens who can afford it. The lack of quality mental health care and its prohibitive cost often drives people to consult traditional or faith-based healers.

[...] Nigeria’s 1958 Lunacy Act allows the detaining of people with mental health conditions in mental health institutions, even without providing medical or therapeutic treatment. People spend years in institutions – sometimes decades – because Nigeria lacks adequate services to support them in the community. In all but one of the facilities Human Rights Watch visited, people were not allowed to leave or to challenge their detention.

Unlawful Detention
In 27 of 28 facilities Human Rights Watch visited, all residents had been unlawfully detained. They did not enter the facilities voluntarily and could not leave if they wished to do so.” (pg 8-9)


Media reports indicate that people with mental health impairments (including children and young people) who lack financial, familial or community support and those who live on the street are particularly vulnerable to being deprived of their liberty and institutionalised:

“Condemnations have trailed the indiscriminate arrest and dumping together of beggars and mentally ill persons picked from the streets of Enugu State at a psychiatrist facility by the state’s Ministry of Gender. It was learnt that officials of the ministry in an attempt to sanitize the state have continued to raid major streets for beggars and mentally derailed persons. But rather than separate them, when they are caught, they are being lumped together at the Neuropsychiatric Clinic belonging to Enugu State University Teaching Hospital, Emene due to the dilapidation and non-functionality of the state’s rehabilitation centre. The Neuropsychiatric Clinic is meant for mentally derailed persons.

The Guardian, which visited the neuropsychiatric clinic at the weekend discovered no fewer than 30 beggars including elderly men and women, children and youths as well as disabled persons, locked up and waiting to be “bailed” with many mentally derailed persons at the facility.
Further investigation revealed that the inmates are fed together even as some of the beggars claimed they had spent more than a month in the facility. They claimed that to regain their freedom, officials of the ministry are demanding a “bail fee of N10,000”. They further alleged that during the arrest, they were thoroughly ransacked with every kobo on them taken away by the officials. Uche Mbam, from Abakaliki, Ebonyi State, who said he resorted to begging following a car accident that chopped off his two legs in 2016, said he was caught on Ogui road on August 13, this year adding that the N15,350 on him was taken away.

[...]When contacted, Permanent Secretary, Ministry of Gender, Enugu, Dr. (Mrs) Chinwe Anibeze, confirmed dumping the beggars and mentally ill persons together but attributed it to the dilapidation of the rehabilitation centre in the state. She said that the state government was on the verge of rehabilitating the centre after Governor Ifeanyi Ugwuanyi visited the premises recently. Anibeze, who expressed shock over allegations that the beggars were being dispossessed on arrival in the facility by her staff summoned the officers in charge of the raid to her office, where each took turns to explain their role.

She also ordered them to produce receipts and bank tellers to authenticate their claims that the money realized was from the beggars were paid into government account as claimed.”

(Source: The Guardian (Nigeria): Dumping of beggars, mentally ill persons in psychiatric facility raises concern, 23 September 2019)

“Kano State Emergency Management Agency (SEMA), says it has registered 790 mentally unstable persons in 13 rehabilitation centres in the state. The Executive Secretary of the Agency, Dr Sale Jili, made the disclosure in an interview with the News Agency of Nigeria (NAN), on Wednesday in Kano. Jili disclosed that mentally retarded persons were evacuated from streets by the Agency while others were referred to the centres by members of their families. He said that the Agency also run a centre to take care of the needs of the persons with disability evacuated from streets and other strategic places in the states. The Secretary listed the centres to include: Bichi; Danbatta, Minjibir, Gaya, Wudil, Sumaila, Rano, Tudun Wada, Karaye, Gwale, Dawakin Kudu and Kano Municipal.”

(Source: The Herald: 790 Mentally Retarded People Registered By SEMA in Kano State, 12 August 2020)

Sources report that children, including unaccompanied, separated or orphaned children, children with disabilities and those with ‘difficult behaviours’ or mental health impairments, have been placed in Islamic ‘Almajiri’ schools that claim to offer education and treatment, but where forced labour is widespread:

“In 2010 the Ministerial Committee on Madrasah Education reported 9.5 million children worked as almajiri, poor children from rural homes sent to urban areas by their parents ostensibly to study and live with Islamic teachers. Since government social welfare programs were scarce, parents of children with behavioral, mental health, or substance abuse problems turned to the almajiris of some mallams who claimed to offer treatment. Instead of receiving an education, many almajiri were forced to work manual jobs or beg for alms that were given to their teacher. The religious leaders often did not provide these children with sufficient shelter or food, and many of the children effectively became homeless. In April governors of 19 northern states agreed to ban almajiri schools, and during the COVID
pandemic they repatriated thousands of students across state lines. By year’s end there were reports that almajiri schools had resumed in some states.”


“ [...] 2.35 In northeastern and northwestern states, 29 per cent and 35 per cent of Muslim children, respectively, receive Koranic education at ‘Almajiri’ schools, which focuses on religious instruction and does not include basic skills such as literacy and numeracy. The government considers children attending such schools to be officially out-of-school. Activists have reportedly lobbied the government to reform or end the almajiri system, arguing it fails to provide children with a basic education. Since government social welfare programs are scarce, many parents of children with behavioural, mental health, or substance abuse problems reportedly turn to almajiris that claim to offer treatment. Instead of receiving treatment or an education, however, the children are forced to work manual jobs or beg for alms that are then given to their teacher. Almajiris often do not provide these children with sufficient shelter or food, and many of the children effectively became homeless. In September 2019, police raided an almajiri in Kaduna and rescued nearly 400 men and boys, many of whom were kept in chains. Some had open wounds from being beaten.”


“ [...] Child trafficking
13. [...] Most child beggars from the north-western and north-eastern regions come from the Islamic Qur’anic Schools. This is an informal school system, known as almajiri, which dates back to the eleventh century and applies the concept of educating young children in Qur’anic studies away from home. Children, including unaccompanied, separated or orphaned children, are increasingly given into the care of religious teachers (mallams) who run such informal schools. The use of children by religious teachers for child labour has been widely reported.
14. In Nigerian society as a whole, child begging is widespread. Victims of child begging also include children with disabilities, who are lured into the major cities. Poverty, conflict and displacement in the north, as well as reluctance or sheer negligence by the Federal Government to act on this issue, are other contributory factors.”

(Source: UN General Assembly: Visit to Nigeria: Report of Special Rapporteur on trafficking in persons, especially women and children, 16 April 2019, pg. 4)

“With mental health and substance abuse programs scarce, some mallams in recent decades have offered to treat behavioral problems including drug addiction and delinquency, attracting students from across West Africa. Each raided school had presented itself as a place of Islamic learning that also could heal unruly loved ones. Parents pay as little as 500 naira ($1.38) a month for children to study in almajiri schools, said Sabo Keana. But some pay tens of thousands more to treat what they see as unacceptable behavior. One father told Reuters he paid 50,000 naira ($163) in registration fees plus an additional 10,000 naira a month to send his adult son to the Daura school for drug treatment - a significant sum in a country where the average monthly wage is $163. “The government is supposed to handle the (drug) situation, but the burden is too much for them,” said the father, who, like some others interviewed, declined to be named for fear of government retribution. As for the now-shuttered school, he said, he’d send his son back if he could.”
The anonymous source we interviewed, a disability activist, lawyer and published author, told us that in the name of Islamic education, children with disabilities are ill-treated in ‘Almajiri’ schools:

“Nigeria has 36 states, and in most of the states where Islam is a dominant religion, children are grossly abused with the practice of Almajiris. In the name of Islamic education, the Almajiri children are often subjected to all manner of pains, starvation, beating, hunger, lack of care. As a matter of fact, especially in the northern states of Nigeria where Islamic religion is very popular, you see a whole lot of Almajiri. The disabled kids who are Almajiris are used as an object of charity to beg for alms. And most of the time, they're deprived of western education, and therefore in my opinion, they are denied their right to education. And again, they are even denied their right to parental care. So, they suffer a lot, and they're being used as an object of begging for alms on the street in order to bring income for people who are mentoring them. So, you can see, because we practice three legal systems, it's difficult to prosecute people who are practicing that kind of Sharia law. Because under Sharia law, they are permitted to do that. So, it is difficult to prosecute people who violate children’s rights in geographical locations where Islamic law or Sharia is being practiced.”

(Source: Interview with anonymous source, 3 August 2021)

Theophilus Odaudu also explained that families often resort to informal institutions when they cannot afford the treatments available from formal institutions:

“many who cannot afford treatment in formal institution end up taking their family members with disabilities needing such care and treatment to other alternative care and healing arrangements. And this leads to a conversation around other forms of institutionalisation besides the formal one like the hospitals and those that are led by NGOs and other organisations. So you have religious centres, you have traditional healing centres and these are spread across the country and here you find persons with disabilities kept in undignified state. A lot of them being shackled as they try to get some kind of healing either spiritually or through traditional forms of medicine and all of that. And that's also another way that family do resort to if they cannot afford the cost for the formal type of care. And this leads to further violations, and in a way it takes the burden from the family such that they don't have to provide that daily care for these persons, not minding the deplorable conditions that a lot of these centres are.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

Adeyinka Ige-Onabolu talked about orphanages and homes as a form of institutionalisation:

“Another big piece is actually just regular orphanages and homes. So they are not specific to children with disabilities, but a large number of children with disabilities are in these homes. This is because a lot of them-- especially when they are born with disabilities at birth are dropped off by their parents or families who’ve abandoned them. So these homes take them, but they are actually not specialist homes.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)
When asked what profiles of children and young people with disabilities are more likely to be institutionalised, she said:

“I think the most prevalent type, and this is just even thinking from my engagement at work, or just visiting homes just my family and myself, is the children with intellectual disabilities and chronic mental health conditions. And that's because there's a very low level of education and there's also a lot of cultural, traditional, religion stigmatization. And then, the fact that they are really no facilities to support system. When people have children with this challenge, it's like they want nothing to do with them. So you find a higher rate of abandonment for those children. There has been a mind shift in terms of physical disability. While with intellectual disability, is still so very low education, and where people are just like, "I don't know what to do with this child." So you find a high rate of abandonment.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Reports from Amnesty International and Human Rights Watch below detail the lack of state protection and psychosocial support and the use of arbitrary detention in 'shelters' for women and girls who have been trafficked within and outside Nigeria. The information is not specific to persons with disabilities, though the report states that the survivors are reported to have long term mental health and physical health problems attributed to trauma.

Human Rights Watch interviewed 76 survivors of human trafficking in Nigeria, 20 of them girls between the ages of 8 and 17, detailing the struggles they face upon return:

“[...] Survivors often experience depression, anxiety, insomnia, flashbacks, aches and pains, and other physical ailsments, often limiting their ability to work and take part in society. [...] Disturbingly, the Nigerian authorities are actually detaining trafficking survivors in shelters, not allowing them to leave at will. It's a violation of the country's international legal obligations - and re-traumatises women and girls who have already been locked up in horrific conditions by traffickers and captors. Some survivors in shelters complained about not even being able to receive visitors or contact their families. [...]”


Reports from Amnesty International and Human Rights Watch detail the lack of protection and psychosocial supports for women and girls, many having suffered trauma after fleeing situations of captivity, through trafficking or detention by Boko Haram:

“(Abuja) – Many survivors of sex and labor trafficking struggle with unaddressed health challenges, poverty, and abhorrent conditions upon their return to Nigeria. Nigerian authorities have failed to provide the assistance that survivors need to rebuild their lives and have unlawfully detained many of the already traumatized women and girls in shelters. [...]”

“Women and girls trafficked in and outside Nigeria have suffered unspeakable abuses at the hands of traffickers, but have received inadequate medical, counseling, and financial support to reintegrate into society,” said Agnes Odhimbo, senior women’s rights researcher at Human Rights Watch. “We were shocked to find traumatized survivors locked behind gates, unable to communicate with their families, for months on end, in government-run facilities.”
However, the authorities rely too heavily on shelters, as opposed to community-based services, as the primary means of providing services to survivors. Nigerian authorities have also detained trafficking survivors in shelters, not allowing them to leave at will, often for many months, in violation of Nigeria’s international legal obligations. Protection should not be an excuse to arbitrarily detain women and girls and deprive them of their liberty and freedom of movement, Human Rights Watch said. Such detention conditions risk their recovery and well-being.

[...] Some women and girls said they suffered long-term mental and physical health problems and social stigma upon returning to Nigeria, where they struggled to get support and services. [...] Some reported long waiting periods without assistance after they contacted service providers to ask for help.”

(Source: Human Rights Watch, Nigeria: Anguish, Poverty Confront Trafficking Survivors, 27 August 2019)

“Stigma seems especially likely to affect women and girls whom the Nigerian military detained after they fled Boko Haram. An 18-year-old woman said she was abducted by Boko Haram as a girl and forcibly “married”; after escaping, she was detained in Bama Prison and Giwa Barracks. [...] In Amnesty International’s interviews, almost none of those who were abducted as girls and forced to be “wives” had benefited from psychosocial support since escaping. One exception was two girls who were Christians and had been sent to several days of faith healing after escaping; they were primarily told to forget about what happened and to accept their children born of rape (see E.G.’s story, on page 19). The mother of one girl, 17, who had been forcibly “married” and held in captivity for 18 months when she was 13 and 14 said that when the girl returned, after escaping, she suffered from a serious psychosocial disability. The girl tried to return to school, but the school kicked her out for being violent towards the teacher and other students. Three years after her escape, she has received no psychosocial support.94

94 Amnesty International interviews with 17-year-old girl and with her mother, 2 January 2020.”

(Source: Amnesty International, “We Dried Our Tears”: Addressing the Toll on Children of Northeast Nigeria’s Conflict, 27 May 2020, p. 26)

8.2. Do family members of persons with disabilities or the community more widely seek their institutionalization and what are their reasons?

The US Department of State reports that in the absence of social welfare programs, children with behavioural or mental health problems have been sent by their parents to become ‘almajiri’, with Islamic teachers who claim to offer treatment.

“In 2010 the Ministerial Committee on Madrasah Education reported 9.5 million children worked as almajiri, poor children from rural homes sent to urban areas by their parents ostensibly to study and live with Islamic teachers. Since government social welfare programs were scarce, parents of children with behavioral, mental health, or substance abuse problems turned to the almajiris of some mallams who claimed to offer treatment.”
Theophilus Odaudu suggested that families feel unable to provide adequate support to their relatives with disabilities:

“[...] So of course, sometimes we have families seeking to have their family member institutionalised maybe because the person has been diagnosed to have a mental health condition and because in most cases they feel they don’t have the capacity to provide adequate care for this person. They try to take them to institutions where they believe they can be better cared for. A lot of this is because, one, sometimes they feel it is expensive to be able to provide the needed care. Depending on the level of the disability some require round-the-clock support and constant surveillance and all of that and the families may not be in a better position to do that and they sometimes they prefer that they go to institutions where such support can be provided”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

Betty Abah said that families place children with disabilities in institutions because of discrimination, shame and stigma:

“It's largely because of discrimination, even within family circles. We've had families who have children with Downs syndrome, children who are autistic, hiding away those children from the public. They have a room in the house where they put those children, hoping maybe they would die or just to shield them away from the public, from their neighbors and their relatives, because they are embarrassed that they have children with disabilities. Some people think it's because they are cursed, it's because they've committed a sin against God, against the gods, or they are bewitched - that's why they have these children with disabilities - and they give them all kinds of labels. And so, some families who can afford to, place them in institutions, especially in private institutions, just to take them away from the family space, to take them away from the family environment because they're embarrassed that they have that kind of child. They do not want them, and they do not want to kill them, so that they are not accused of murder or so that they will not feel guilty of murder. So, they take them away.

So, it's all about the stigma, the discrimination from within the family circle, and to reduce the stigma from the world some people take these children to institutions, and then they move house so that in the new location they go to, people see that the children they have are "normal children," in quotes. And then in other cases, children with disabilities are placed in institutions, in homes, away from the prying eyes of the public because they're embarrassed. So, it's all about discrimination. It's all about the discrimination from families and the stigma from the rest of the society.”

(Source: Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021)

8.3. What protection measures are available to a child or young person, or their family, if they are held in an institution against their will?

Theophilus Odaudu tells us that he believes the following procedures are in place in government run institutions:
“Well, usually in most cases the individual is not given that opportunity to make their choice as to what they want. Most of the time the decision is made on their behalf by the family.

[...] So usually there are supposed to be some documents that legally where the caregiver for the person who is to be institutionalised, will sign indicating their consent

[...] where someone is recommended for institutionalisation but the family or anyone wants to oppose it, they're usually allowed to sign an undertaking that they are doing that against professional advice and that they are taking the patient home based on their own conviction and not because the hospital or the institution did advise that.

[...] in most cases the institutions cannot legally override the wishes or the decision of the family but I know that they do deploy a lot of methods, a lot of things to try slow down the process or look for other ways that they can prevent that from happening. But at the end of it, families can still succeed in taking their patient away.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

8.4. What are conditions like for children and young people with disabilities who are institutionalised?

A U.S. Department of State report, covering 2020, claims that many ‘almajiri’ are subject to forced labour and their basic needs are neglected, with many becoming effectively homeless:

“[...] Instead of receiving an education, many almajiri were forced to work manual jobs or beg for alms that were given to their teacher. The religious leaders often did not provide these children with sufficient shelter or food, and many of the children effectively became homeless. In April governors of 19 northern states agreed to ban almajiri schools, and during the COVID pandemic they repatriated thousands of students across state lines. By year’s end there were reports that almajiri schools had resumed in some states.”


A Human Rights Watch report documents evidence of human rights abuses against persons with disabilities, especially those with mental health impairments, and including children, in many institutional settings. This includes the use of chaining, violence, the unsanitary and degrading conditions, and evidence of forced treatment:

“Chaining
In 28 out of 29 facilities visited, staff chained, shackled, or locked up adults and children. The youngest child chained was a ten-year-old boy and the oldest person was a 86 year-old-man who also had a visual disability. Typically, staff fasten a chain to a person’s both ankles or to one ankle and connect it to a heavy or immovable object, such as a bed, a tree, or a car engine. In some cases, shackles consisted of an iron bracelet around both ankles, making it difficult for the person to move around. Some people are chained for a few days at a time as punishment, or for weeks or months to prevent them from moving or leaving.

Shums, a 27-year old man with depression, was shackled by his leg to another man’s leg in an Islamic rehabilitation center in northern Nigeria. "We are like this all the time. Even when
we have to use the toilet or sleep," Shums said. Two other men there were also shackled together. The center’s healer said one man had suicidal thoughts, "So I chained him to another person who is responsible, to prevent him from killing himself." 8

In a government-owned rehabilitation center in northern Nigeria, Human Rights Watch saw dozens of men and women chained. Many were chained by one ankle to a piece of iron welded to the concrete floor. Most had lived there for years, some for up to 15 years.9

Staff at a psychiatric hospital in northern Nigeria insisted that chaining did not occur on the premises, but a researcher discovered a ward where people had iron shackles around their ankles. 10

Despite repeated requests, Human Rights Watch was not allowed to meet or speak to people held in federal psychiatric hospitals in Kaduna, Lagos, and Abeokuta. Two psychiatrists, one psychiatric nurse, and one mental health activist said that shackling occurs in federal psychiatric hospitals across Nigeria.11 A doctor who works in a psychiatric hospital in southern Nigeria said, "We have to use chains in some cases." 12 A psychiatrist in a hospital in Lagos said that the staff there use handcuffs.13 Tightly bound chains cause painful wounds as well as emotional suffering.

[...] Unsanitary and Degrading Conditions
People who are chained are forced to live in unsanitary conditions. Many must eat, urinate, defecate, and sleep in the same place, usually within the same place where they are confined.

Staff often provide a bucket or plastic bag to urinate and defecate in, usually in full view of others.

[...] The government-run rehabilitation center southeastern Nigeria had functioning toilets. Yet staff denied those chained there access to the toilets and instead left them a bucket next to their beds.

In three facilities staff did not allow people to bathe regularly. A traditional healer in Abuja said:

> When people are locked up ... they don’t bathe sometimes for months until they feel better ... We just pour water with herbs on them without going very close to them ...

22

Human Rights Watch also found that people with psychosocial and intellectual disabilities were denied food in some Christian healing centers. Akanni, the 22-year-old woman who had been detained in a church in Abeokuta for five months, said:

> When I first arrived here, I was tied with chains for three days straight so I could fast. For the three days I had no food or water. It wasn’t my choice, but the pastor said it was good for me. Sometimes if they say I should fast and I drink water or take food, they (staff in the church) put me on a chain. The chaining is punishment. I have been put on chain so many times I can't count.23

Another 27-year-old woman held in the same church said:
When I came here, I started screaming. They took me to the prayer room, where I was chained and forced to fast for seven days. After the first seven days they released me for a little bit and then again chained me for seven days.24

Staff in the church and two other churches in the south confirmed the practice.

Violence
People in Islamic "rehabilitation" centers said that staff whipped them. Khalil, who was shackled for six months in such a center in northern Nigeria, showed researchers scars on his left arm that he said were from whipping.

An Islamic faith healer in northern Nigeria said:

If you are treating someone who is mentally unwell and he acts in a way that is causing disturbance, you will have to treat him. Some of them might be talking to themselves or suffer from lack of sleep ... For some of them, getting enough sleep will help. For others, we need to whip them - once, twice ... up to seven times. 25

A dozen people in that center showed researchers scars on their arms, chests, and backs that they said were from floggings by staff.

[...] Forced Treatment
In psychiatric hospitals and government-run rehabilitation centers, staff said that people are given oral and injectable medication without their consent.28 In two psychiatric hospitals visited, patients were given electroconvulsive therapy (ECT) without their consent.29

In many traditional and religious centers visited, healers forced herbal and other non-medical treatment on people with mental health conditions. One traditional healer in Ibadan said that four people would hold a person down so that he could administer herbs.30

Another traditional healer in Ibadan said: We have to force them to take the herbs that will heal them. Sometimes we get strong people, strong boys, to hold them down so we can put the chains on them and give them herbs.31

A Christian pastor in Ibadan described using chains as a threat to make people take herbs.32
In front of a traditional healer’s home in Abuja, researchers saw several women holding down a 12-year-old girl and making cuts on her back with a blade. They then smeared ground herbs into the cuts. The healer justified it by saying the girl has been stealing from her mother, and they have to let the evil blood come out of her.33

8 Human Rights Watch interview with [name withheld], Kano, June 30, 2019.
9 Human Rights Watch interview with [names withheld], Kano, July 1, 2019.
10 Human Rights Watch interview with [names withheld], Kano, September 20, 2019.
11 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019; Human Rights Watch interview with [name withheld], Enugu, October 3, 2018; Human Rights Watch interview with [name withheld], Kano, DATE; Human Rights Watch interview with [name withheld], Lagos, September 25, 2018.
12 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
13 Human Rights Watch interview with [name withheld], Lagos, September 26, 2018. [...] 22 Human Rights Watch interview with [name withheld], Abuja, April 2, 2019
23 Human Rights Watch interview with Akanni [pseudonym], Abeokuta, March 27, 2019
24 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
25 Human Rights Watch interview with [name withheld], Kano, September 21, 2019 [...]
This paper reports on how persons with mental health impairments are mistreated in a religious institution:

“Further evidence of a systemic neglect of mental health in Nigeria is found in religious and spiritual circles. Located in the interior of Ogbunike in Anambra state Nigeria, a religious ministry specializes in deliverance of mentally ill patients and boasts of being registered with the state government. On entering the ministry, the first sight that accosts one is typically a number of patients, chained to the ground, under the trees or in some uncompleted and unroofed structures. These patients are not released from the chains no matter the weather conditions.

On the days of deliverance, the patients are soundly beaten with palm-fronds which are acclaimed to have the power to drive away the demons that cause mental problems. After the beating, the proprietor of the Ministry will apply certain “holy” pungent liquids into the eyes and nose of the patients, commanding them to sniff it in or else face more beating. This is apparently painful and I later discovered that the “holy” liquids are compounded with alcohol and can harm the eyes. The rights of the patients to a dignified and effective treatment are clearly non-existent.”

The sources Asylos and ARC Foundation interviewed for this report confirmed that persons with disabilities are being mistreated in institutional settings, and that there is little accountability:

“So like I already mentioned there's a lot of rights violations that do go on in these institutions. Even in the formal institutions, we've had cases of people being shackled or chained to their bed to prevent them from moving. We have cases where persons because they're in the institutions where their bodies are being violated as several procedures are carried even against their will or without their consent. For instance, currently, we are funding an organization that's working with persons with psychosocial disabilities, and by we, I mean the Disability Rights Fund. And as part of their work to document abuses, there was case of a lady who reported the level of violation she was exposed to at the medical facilities where she was taken to for care and even when she opted to leave, she discussed with her mother that she needed to leave. Her mother saw reasons to take her out, the institution resisted this by bringing several forms of delay tactics to keep her and she was not allowed access to her phones, for example. So she could not make real-time reports. And at the point when the mother did smuggle a phone for her to use the nurses on duty kind of tried to search her things without her consent and even tried to search her body down to her panties and trying to discover if she hid the phone there. And in doing this she was held down by a male guard and while this was going on in the full view of everyone.

So this is just one case out of the many types of violations that go on in such institutions. More often than not persons with disabilities are treated with lesser dignity in a lot of the institutions where they're supposed to be getting care. There is a report of I think it's Human Rights...
Rights Watch. Their research in Nigeria in 2018 and '19 I think and that did provide a comprehensive insight into how persons with disabilities in institutions across the country are being treated.”

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

“It largely depends on the type of institution. So even for the private institutions, there are different levels. There are the types that set up in a proper way, accountable to the government, have the funding. But then you also have people who set up these institutions just for sinister purposes to have access to children, to be able to trade children, to be able to use children for house chores, and all those types of things, and there’s really no accountability. So for example, if a bank is going to set up that kind of home, they've probably got the government on board, they probably have government officials there at the launch of the home. So you have that level of government involvement. But when you just have people just doing sinister things, and they just say, “we care for children.” There have been newspaper reports where they'll report about orphanages that are not even registered. You don’t even have the license but then you find 50 children there. You have all those type of things happening. So in those type of homes, they’re outside the purview of the government, and a lot of abuse and exploitation go on. And people are not going to respond because people are like, "Yeah. We know these children are abandoned. We can't take care of them. So if we someone that is willing to take care of them, that's fine. We just maybe, once in a while, give them some money. Well, it takes the children away, we don't have to feel bad." But then in those type of institution, you find a lot of exploitation, a lot of abuse, a lot of neglect. And it might also be because they are low on funds so they start doing all sorts of things. And they have to cut corners and all those things.

And then, you have some that have been established 20, 30 years ago by a church or by individuals, but then they don't have as much as access to funds again. And so, they're basically just running on the last wheel. But they keep going. But of course, in those kind of homes, it gives the opportunity for abuse first of all because you can't even employ the adequate number of staff. And you need everyone's eyes on the ground. But then, if the funds are only able to employ two staff and you have 50 children, how are you going to do it? Even if you have good intentions, you're just not going to be able to deliver what you should.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

8.5. If evidence is found of ill treatment from State or non-State sources within institutions etc, how has the State responded?

Human Rights Watch notes that the Nigerian President said he would not tolerate torture within Islamic rehabilitation centers but has not acknowledged abuse in government-run facilities.

“[...] President Muhammadu Buhari said in October 2019 of the Islamic rehabilitation centers that he would not “tolerate the existence of the torture chambers and physical abuses of inmates in the name of rehabilitation.” But the government has yet to acknowledge that this abuse is rife in government-run facilities too”
Human Rights Watch further reports that the government did not respond to requests to discuss findings of their report on mental health conditions chained and abused, although several Islamic rehabilitation centers have been closed since they began their investigation:

“[...] Recent Government Action

On June 17 and September 12, 2019, respectively, Human Rights Watch sent letters to the federal government in Abuja requesting to meet with officials of the Federal Ministry of Health and the Federal Ministry of Women’s Affairs and Social Development to discuss the findings but received no response. The two federal ministries have also not responded to an October 24 letter setting out concerns about chaining and abuse.

Since Human Rights Watch began investigating chaining in Nigeria in August 2018, several facilities have been closed. In September 2019, police closed an Islamic rehabilitation center in Kaduna that Human Rights Watch had visited in March. Another Islamic rehabilitation center in Kano was closed preventively in October.

While closing abusive facilities is a positive step, the government should ensure that it provides adequate psychosocial and mental health support in the community to people who have been freed. Otherwise, closing down these centers does nothing to address the desperate moves by families to look towards traditional and faith-based centers for loved ones with mental health conditions because of the lack of rights-respecting alternatives.”

Media sources report that Islamic rehabilitation centres operating under inhuman conditions were shut down in Oyo, Kaduna, Zamfara, Katsina and Kwara states. Hundreds of people, including many children were released:

“The Zamfara state government on Tuesday, shut a rehabilitation centre in Gusau for operating without legal approvals from the authorities. Alhaji Mohammed Maiturare, commissioner for special duties told newsmen in Gusau that there were laws guiding the establishment of such facilities. He said that the proprietor of the centre, Malam Iliyasu Abdullahi has been operating illegally, adding that “we shall relocate all 57 inmates made up of adults and children.” According to him, the centre is in a messy state and lacks basic hygiene and sanitary measures suitable for such a facility. Maiturare said that inmates below 18 years of age would be taken to remand homes while those above 18 would be moved to the state-owned rehabilitation centre in Bungudu. The commissioner further said that the state government would hand the owner of the centre over to the police for investigation and prosecution. Meanwhile, the owner of the centre, Abdullahi told newsmen that the facility had been functional for about 30 years.

“We have rehabilitated several persons with different challenges, everybody in the centre was brought by their parents, guardian or relative,” he said.”

(Source: The Daily Times: Zamfara closes illegal rehabilitation centre in Gusau, 1 April 2020)
“Ilorin – The Kwara State Police Command has uncovered another rehabilitation center, Sumuratu Mumeen Arabic Centre, Gaa-Odota Area in Ilorin, where 108 people detained under inhuman condition were rescued. The State Commissioner of Police, Mr Kayode Egbetokun made this known on Thursday in Ilorin while briefing newsmen in his office. Egbetokun said the command acted on an intelligence surveillance and raided the centre where 103 males and five females were discovered unlawfully detained in the centre. “Some of the victims were observed to be have some forms of infections and diseases and were not treated while some others were mentally ill. “Some of them during interview claim they were brought to the centre by their parents,” said the CP. He said investigation was ongoing and that the police command would take care of the victims until their parents come to fetch them. […]

NAN reports that a similar camp was recently discovered by the police known as the Mallam Niga Rehabilitation Centre, at Rigasa, Igabi Local Government Area of Kaduna State where 147 detainees were rescued. Consequently, President Muhammadu Buhari on Oct. 19 directed the police to uncover all illegal detention (rehabilitation) centres and rescue those held there.”


“The Kaduna State Police Command has raided another rehabilitation centre in Kaduna, where 147 inmates mostly in shackles were found. The Command Public Relations Officer, DSP Yakubu Sabo confirmed the raid in a press statement issued on Saturday in Kaduna. He said that the police raided NIGAS Rehabilitation and Skills Acquisition Centre located at Rigasa in Igabi Local Area, at about 8am on Saturday. According to him, Gov. Nasir El-Rufai led the operation at the had male and female inmates Sabo explained that during the raid, some of the inmates made certain allegations of sexual molestation particularly by the female inmates against some male inmates. “Following this discovery, the governor directed that all the inmates be evacuated to Hajj Camp located at Mando Kaduna for proper profiling and safe custody. “Similarly, the Police have arrested one Dr Lawal Muduru, also known as Malam Niga, the owner of the Centre to investigate him on the said allegations. “He is currently helping with investigation at the State Criminal Investigation and Intelligence Department of the Command.”

(Source: The Daily Times: 147 inmates evacuated in another Kaduna rehabilitation center, 20 October 2019)

“Nigerian police freed 259 people, including women and children, from an Islamic "rehabilitation center" in the southwestern city of Ibadan on Tuesday following a tip-off a day earlier. Images from local television showed the captives, a group of mostly young men, being released. The inmates were locked up in a building where they were "held as slaves and engaged in forced labor," Shina Olukolu, police commissioner for Oyo state told journalists. Images of the captives' release from local TV station TVC showed a group of mostly young men and teenaged boys, many of whom were emaciated. "We eat one meal a day," freed captive Olalekan Ayoola told TVC, adding that the food wasn't fit for a dog to eat. Olukolu said the police suspect some of the captives could have died while being held because authorities found a grave on the site, though no deaths had been reported previously. The facility's owners told police they had been running a rehabilitation home where inmates learned the Koran. The owners claimed to police that the inmates' relatives brought them there. At least five people were arrested at the site, a police spokesperson said. This most recent rescue brings the number of people freed from abusive institutions
since September to nearly 1,500, when the country began a crackdown on informal Islamic schools and rehabilitation centers. The crackdown was sparked by a man being refused permission to visit his nephews at one institution and complaining to police. Many captives have said they were sexually and physically abused, and chained up to stop them from escaping.”

(Source: Deutsche Welle: Nigeria: 259 people freed from abusive Islamic institution, 5 November 2019)

 Reuters provides a timeline of the raids from September - November 2019:

“[...] Sept. 26, 2019 - More than 300 boys and men, some as young as five, were rescued in a raid on a building that purported to be an Islamic school in northwestern Nigeria’s Kaduna city. Many were in chains and bore scars from beatings. Some had been there for years.

Oct. 14, 2019 - Police rescued 67 men and boys aged seven to 40 from an Islamic school in the town of Daura in northwestern Katsina state, where the captives had been shackled. Former students said instructors had beaten and raped inmates.

Oct. 16, 2019 - Police freed about 500 men and boys, many of whom had been chained to walls, molested and beaten, from an Islamic school in the northwestern city of Katsina in its eponymous state, law enforcement sources said.

Oct. 19, 2019 - Police freed nearly 150 students from a reformatory school Kaduna. At least 22 of the 147 released captives were female. Many of those freed had scars from abuse.

Oct. 24, 2019 - Police rescued 108 malnourished and sick captives aged from six to 45 from a so-called Islamic reform center in Ilorin in central Nigeria’s Kwara state.

Nov. 4, 2019 - Nigerian police released 259 people held captive at an Islamic rehabilitation center in the southwestern city of Ibadan, saying some had been chained.”

(Source: Reuters: Timeline: Captives freed from abusive Islamic institutions in Nigeria, 5 November 2019)

Many Nigerians blame the government for failing to provide accessible and affordable alternatives to care, and failing to provide any oversight of the centres:

“As shocking as the revelations about these schools were to people in Nigeria and around the world, they have not shaken the underlying devotion of some northerners to the religious leaders who ran the raided centers, nor to the centuries-old Islamic education system from which they emerged, according to Reuters’ interviews with 17 current and former students, parents and community leaders. Many of those interviewed blame the government of Africa’s most populous nation for failing to provide the formal education and services young people need in this impoverished region. And like Burhani and his father, they tend to attribute troubles in the raided schools to lower-level teachers, rather than to the revered mallams. State institutions cannot meet the educational or social welfare needs of the booming, mostly Muslim population in the north, experts and child advocates say, largely because of limited and poorly distributed resources. Fewer than half the children in the region attend government primary schools, according to the latest official figures, from 2015. Islamic schools, known locally as almajiri schools, help fill the void, enrolling an estimated 10 million students. “If today we decide to close all of the almajiri schools ... there would be an educational crisis, said Mohammed Sabo Keana of the Abuja-based nonprofit group Almajiri Child Rights Initiative, which advocates for better conditions in the centers. The office of the presidency repeatedly declined to comment on Reuters’ findings. Officials at individual ministries responsible for overseeing the schools declined to comment or
referred Reuters to other ministries that did not respond. President Muhammadu Buhari, a Muslim, said in an Oct. 19 statement that the government would not tolerate “torture chambers” that mistreat young people.

[...]

PILLARS OF THE COMMUNITY
Some child advocates told Reuters that the schools receive little, if any, oversight from the government. The head of the Presidential Advisory Committee on the Elimination of Drug Abuse, Mohammed Buba Marwa, visited three schools in the months before they were raided, according to two former students and a mallam who helped at one of the centers. One of the schools, in Kaduna, touted the event on its Facebook page, posting photos of Buba Marwa with the mallam, Salisu Hamisu, on April 15. Also on the page were photos underscoring the respected role of the mallam in the community. He is shown officiating at weddings, appearing on local radio and receiving a certificate of recognition from the city’s football club. Hamisu, known locally as Mallam Nigas, was arrested and charged after police said they found men and boys who had been chained, molested and beaten at the Kaduna school and a sister school in the city of Katsina. Hamisu could not be reached for comment and authorities would not say whether he has a lawyer. Buba Marwa, the presidential committee official, did not respond to requests for comment.”

(Source: Reuters: “Some Nigerians blame government, not religious leaders, for shocking school abuses”, 6 November 2019)

Adeyinka Ige-Onabolu stated that any investigations are the result of a tip off, as opposed to any form of monitoring:

“Even within the state institution, you find that a lot of investigations are triggered by a tip-off as opposed to regular monitoring that is supposed to happen periodically. So even if they have plans to do that, the monitoring team does not do it. Nobody checks that. Nobody raises an alarm like, ”You have not come for inspection in six months, in eight months. And we don’t know what is happening.” So most of the investigations, for example, in the school for the hearing impaired, it was when the boy told his grand mum who told his mum. And of course, his mum is a medical doctor working in the government. She was able to raise it. If it was a home where the parents were not educated, we might not have heard anything. And that’s when they started investigating. So most of it is actually reactive as opposed to proactive.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

8.6. How has COVID-19 affected children and young people with disabilities who have been institutionalised?

Theophilus Odaudu tells Asylos and ARC Foundation that due to a lack of data collection it is difficult to know what impact the COVID-19 pandemic has had on those who have been institutionalised, but that unconfirmed reports have suggested that there have been further restrictions to certain freedoms previously enjoyed and a lack of risk management:

“And also the various institutions like for those with psychosocial disabilities ,there is actually no record on the prevalence of the pandemic in such institutions but unconfirmed reports have it that to a large extent the children with disabilities in those institutions were
prevented from moving around especially those that did not return to their families. And access to such children, even to access the level of care that they receive or for people to even come in and provide certain support were highly restricted in some cases, and in others, children were exposed to more risk because the institution depended on outside support to be able to provide care for the children. And so these people need to also come in contact with the children. And because they’re coming from outside this also expose the children to a number of risks.

There is a centre for children with autism here in Abuja where even during the pandemic they did welcome visitors because the visitors bring food items and other essential needs for the children and the children, of course, have to interact with these visitors and this exposes them to risk. While like I said a difficulty in speaking about this is the absence of specific data on perhaps how some of these activities have led to increased cases of COVID-19 among children with disabilities or quantifying the amount of risk that these children were subjected to. Such information is not available."

(Source: Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021)

9. Situation of children and young people with disabilities who are returned to Nigeria

9.1. What legislative and policy measures are in place to support children and young people who voluntarily return or are forcibly deported to Nigeria by immigration authorities?

One source states that there is reintegration support for those who return to Nigeria voluntarily, unlike those who are returned forcibly. It also highlights the challenges for returnees in general, including social stigma and rejection by their communities, as well as economic struggles:

“Back in their home country, little distinction is made between voluntary returnees and deportees. Both are often socially stigmatised and rejected by their communities. Having a family member reach Europe and be able to send remittances back home is often a vital lifeline for people living in impoverished communities. Returning – regardless of how it happens – is seen as failure.

In addition to stigmatisation, returnees face daily economic struggles, a situation that has only become worse with the coronavirus pandemic’s impact on Nigeria’s already struggling economy.

Despite facing common challenges, deportees are largely left to their own devices, while voluntary returnees have access to an EU-funded support system that includes a small three-months’ salary, training opportunities, controversial “empowerment” and personal development sessions, and funds to help them start businesses – even if these programmes often don’t necessarily end up being effective.

[...] Voluntary returnees are put up in a hotel for one night and then helped to travel back to their home regions or temporarily hosted in government shelters, and later they have access to IOM’s reintegration programming.”

(Source: Giacomo Zandonini, The New Humanitarian, *Nigerians returned from Europe face stigma and growing hardship*, 28 July 2020)
A COI report for the Netherlands Ministry of Foreign Affairs also indicates that unaccompanied minor returnees, particularly victims of trafficking, may be supported by orphanages or NGOs:

“There are different care options for unaccompanied minor returnees, depending on their gender and whether they belong to a vulnerable group. In general, unaccompanied minors can go to orphanages in Nigeria [...] Minor female and male victims of human trafficking can go to special facilities or shelters run by NGOs. Minor male victims of human trafficking have their own wing in these facilities. A confidential source noted that more than 90% of the victims in these shelters were women and girls. Sources also criticised the fact that underage and adult victims (mostly female) are housed in the same NAPTIP shelters. Since this reporting period, there have also been two shelters for (adult) male victims of human trafficking in Lagos and Edo state [...] It is not known whether these facilities also offer shelter to underage male victims.”

(Source: Netherlands Ministry of Foreign Affairs, Country of origin information report Nigeria, March 2021, 5.6)

According to Grace Jerry and Olawunmi Okupe, sources interviewed by Asylos and ARC Foundation, the rights of returnees to Nigeria are covered by the Child’s Rights Act:

“The Child’s Rights Act provides for all the rights of children in Nigeria and it doesn’t matter if they are returned alone or part of a family. Their rights are guaranteed as citizens of this country. But they are not implemented in all the states in Nigeria”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

However, Adeyinka Ige-Onabolu told Asylos and ARC Foundation that despite the provisions of the Child’s Rights Act and the existence of reintegration support, there are no specific measure in place to accommodate the needs of children with disabilities who are returnees, which makes it difficult for them to access support:

“There are a number of national and international agencies involved in reintegration. The National Commission for Refugees Migrants and Internally Displaced Persons (NCFRMI) an agency of the Federal Government among other mandates supports returnees with counselling, skills acquisition, and reintegration. The IOM also supports reintegration efforts for returnees while the NAPTIP (for trafficked persons) does the same specifically for returnees who have been victims of trafficking. However, there are no special measures in place to ensure children with disabilities can access this support. Although the National Child Rights Act states that children are entitled to a number of rights, children with disabilities may be unable to access these. The Child’s Rights Act talks in section 13 about the right to health and section 15, the right to education, however it really doesn't recognize there might be children with special needs that need to be accommodated within this. So even though you say there’s a Child Rights Act and you have a right to free universal education, it doesn't demand or require that there should be special measures in place to accommodate children with varied disabilities. So, on the surface, the rights are there, but we know they are not able to access it if there is no special accommodation.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)
Theophilus Odaudu said that he was unaware of any structured measures in place to protect and rehabilitate persons who are forcibly returned to Nigeria generally, let alone designed to meet the needs of children and young people with disabilities:

“So generally, I’m not aware of any structured measures for protection or rehabilitation for persons who are returned to Nigeria. And if the general policies or legislation are dicey then we can imagine what it would be for a child or a young person with disability. There is no structured arrangement for such rehabilitation or measures to integrate returnees into the community or into the family. None of such that I know about, and most times persons are left to their fate when they’re returned, and they have to struggle to fit in and find their ways around.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

9.2. What are the impacts of any gaps in legislation and policy for returnees?

Theophilus Odaudu describes the situation for returnees to Nigeria as ‘survival of the fittest’:

“So, as for support from the government there’s really not anything on the ground that I’m aware of as way of policy or programs that are specifically designed for children in that category. So, it’s going to be a situation of maybe survival of the fittest. It depends on how well and how fast that individual can blend with the society and move along with the trend. So basically, persons are left to their fate and to their ability to fully integrate themselves into the society.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

And, according to Adeyinka Ige-Onabolu, the lack of support makes children and young people with disabilities particularly vulnerable:

“Children with Disabilities who are returned in these circumstances, will experience extreme difficulty as there is no mechanism in place for their support or reintegration. They may be forced to go back to family members or inappropriate situations from which they may have fled or end up in places that leave them vulnerable and exposed. There are also very limited services which are appropriate for persons with disabilities which will create additional hardship especially for a child. Such as accessing appropriate education, health services and functional social/support services.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

Theophilus Odaudu told Asylos and ARC Foundation that persons with disabilities who are returned alone face a particular struggle to reintegrate, while families who are forcibly returned also face a high level of stigma:

“So, the difference that will make if they return as a family is probably the ease at which such children might be able to fit in because when they come back as a family it’s no longer an individual struggle and the family could more easily find acceptance in the community. It’s different if a child or a young person with disabilities is returned as an individual. They have to struggle for reintegration first of all into the family or his own immediate relative circle before the issue of reintegrating into society, and because persons with disabilities are
already struggling to get along in the society due to various barriers, it creates a difficult situation for someone who just returned and is struggling to fit in.

[...] So it’s easier for those returned as a family when compared to an individual. Of course, there are still those challenges. So usually, and I’m trying to be a bit practical about what normally happens, when someone is abroad, the expectation here generally in the community is that the person is doing well and so the expectation also is that when such persons return they’re also supposed to be in the upper class and are supposed to be well-to-do and to also be of help and support to others who are on ground. So, when people return in a state that are not able to provide such support it becomes difficult because then they face a lot of stigma and there’s a lot of stereotype around someone who travelled and got returned. Issues around whether they were deported or whatever the situation is. So, it’s also not going to be easy for even if you return as a family. But because you are back in a family and the family is a group then it’s easier for them to identify with the community and get absorbed than when you struggle alone as an individual.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)

9.3. Does the State monitor the number and situation of returnees to Nigeria?

Two sources informed Asylos and ARC Foundation that the number of returnees is recorded by state authorities:

“At the state levels they can get record of the number of returnee children at the point of entrance like the borders or airport from immigration officers charged with that responsibility.”

(Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021)

“The government does this through the National Commission for Refugees Migrants and Internally Displaced Persons (NCFRMI) and NAPTIP.”

(Source: Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021)

However, Theophilus Odaudu said that whilst there is a commission that is supposed to oversee the situation of returnees, records are not available in the public domain, and data collection is generally poor in Nigeria:

“Well, I know that they are supposed to be doing that because we do have a commission for refugees and there’s a commission that’s supposed to be in charge of persons that are returned to Nigeria. They’re supposed to keep that record. But it’s not in the public domain. It’s not something that is generally known or information that’s out there for persons to access. So, I do not have any clear knowledge as to if that record is available because in the public domain, we are not aware of such record. We are not aware if such matters are being monitored. Of course, when we listen to news sometimes, we hear statistics being thrown about, numbers being put out there, but there are no indications as to how these are collected. We don’t actually see all these numbers. They’re just based on estimates. But generally, the issue around data collection and tracking numbers it’s actually a serious issue
in Nigeria, and on a general note the government is not doing well in that regard. So, I don't expect that there will be anything different in this situation.”

(Source: Interview with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, 1 June 2021)
Appendices

A. Methodology

Step 1: Scoping for research topics

The scoping phase will identify what the most pressing COI gaps are for UK asylum applicants and therefore which topics of Strategic COI reports have the potential to benefit both a large number of applicants and those most vulnerable to poor decision making.

To identify the most pressing topics for our research reports, ARC Foundation and Asylos will both:

- regularly consult their networks of legal representatives and refugee community organisations that support asylum seekers in the RSD procedure (asking partners to specify why exactly the topic is so important, asking them to point to Home Office country specific asylum policy known as Country Policy and Information Notes (CPINs) and Reasons for Refusal Letters (RFRLs) where appropriate)
- launch an open call for topic suggestions and disseminate it to its respective lists of subscribers.

In addition, Asylos will:

- monitor such forums as the Refugee Legal Group and the Refugee and Migrant Children’s Consortium on an ongoing basis
- monitor the requests it receives for research assistance on individual cases
- record the statistics for common themes in the reports it produces for individual cases
- invite suggestions from partners who have requested our services as part of the ongoing feedback collection.

ARC Foundation and Asylos will assess which topics to select on the basis of greatest potential impact, with reference to analysis of:

- the number of asylum seekers generated by nationality (UK asylum statistics are not published on convention ground/profile)
- Appeal success rates by nationality
- any existing upcoming Country Guidance (CG) cases that the Tribunal is to hear [to avoid duplication]
- A need for an evidence base to challenge existing CPINs [e.g. where it relies on outdated or uncorroborated COI].

Throughout the scoping exercise, we will approach actors that represent groups particularly vulnerable to information gaps and thus poor-quality decision-making, such as women, children and young people.

In addition, ARC Foundation and Asylos will set up a project review committee who will assist in the selection and prioritisation of strategic research report topics, as well as manage any risks arising from the project. Members of the committee will be approached at least once during the early project phase in order to review and comment on the planned methods and execution. The review committee consists of the following members: Colin Yeo, immigration barrister (and Asylos Advisory Committee Member) and Christel Querton, Lecturer in Law at the University of the West of England and Barrister at Lamb Building (door tenant) (and ARC Foundation trustee).

Step 2: Identifying preliminary Terms of Reference (ToR)
Once a research topic has been chosen, the following steps will be taken in order to identify the preliminary research headings (i.e. draft ToR):

- Read relevant Country Guidance (CG) cases from tribunal (identifying which evidence is outdated)
- Read relevant Home Office Country Policy and Information Notes (CPINs)
- Reference other COI guidance/policy publications from international organisations such as EASO, UNHCR as well as sources from media, human rights organisations and academic research
- Include input from other stakeholders (project partners).

The draft ToR will be drawn up jointly by ARC Foundation and Asylos, each providing input from their topic scoping activities.

**Step 3: Training session for Asylos volunteers**

Asylos will source from its volunteer network a group of volunteer researchers for each report to conduct the COI desk research and to assist with interviewing stakeholders.

Volunteer researchers will be fully briefed on the project purpose, design and research methodology. They will then be required to attend a skype training session facilitated by ARC Foundation which will cover the following:

- Advanced COI research techniques
- Conducting stakeholder interviews
- The nature and scope of the research gap that the report aims to address
- Any Home Office guidance and policy related to the topic
- How experts are instructed in the UK, including how to ensure experts are aware of guidelines for expert testimony in a UK court

**Step 4: COI Desk Research**

For each report, we will undertake a review of the publicly available COI. This desk research will be coordinated by Asylos’s UK Project Coordinator(s), working with a team of volunteers.

Before the research begins, Asylos and ARC Foundation will devise and commit to consulting an agreed list of sources from an agreed period of time. This list will be divided among the volunteers to consult and to submit any relevant findings which will be included in the final report. When any additional sources are identified in the desk research volunteers will record them alongside the initial list, and submit any relevant information.

Once this list has been exhausted, each volunteer will also be designated several of the ToR and asked to do some final research on those topics to ensure that any further sources are identified and included.

Research will be conducted in line with Asylos’s internal COI research training and handbook and adhering to accepted COI research standards, including elements of the EASO country of origin information report methodology (EASO, 2012), the ACCORD COI training manual (ACCORD, 2013) and the Common EU Guidelines for Processing COI (European Union, 2008). Researchers should consult
these documents throughout the research process and training sessions with volunteers will reflect these standards.

To support the collection of research data, researchers will submit their sources using Ultradox (an online template engine).

**Step 5: Finalising ToR and drafting interview questions**

Once the researchers have submitted all of their sources, Asylos’s UK Project Coordinator(s) will generate a report using ultradox. Whilst editing the report, the coordinator will finalise the ToR and arrange the findings according to the headings that were identified. Whilst doing so, the coordinator should assess which topics do not seem to be adequately covered in existing COI and consider where expert evidence would be particularly helpful in order to fill these gaps, for example where there is a total absence of COI, a lack of corroborative COI or where there is contradictory COI.

Once the gaps have been identified, Asylos’s UK Project Coordinator(s) will draft a list of interview questions for stakeholders to send to ARC Foundation alongside the ToR for review. The interview questions will address the gaps identified and will be carefully phrased to generate the most accurate and useful answers. These will be approved by the project review committee.

**Step 6: Identifying interviewees / stakeholders**

The aim is to identify stakeholders that have extensive professional experience or recently published credible research on the topic and those that have recently been in the country of research.

The [EU Common Guidelines on (Joint) Fact Finding missions](https://www.refworld.org) suggest that:

- Possible sources may include academics, research institutes and think tanks, NGOs, INGOs, UN agencies, experienced news reporters and journalists, community leaders or other representatives, religious authorities, or political parties, government representatives
- It is important that a variety of sources are identified and interviewed so that information can be cross checked
- The guidelines state “try to avoid sources with too similar agendas, standpoints, backgrounds and interests, which can be a challenge – especially when using the ‘snowballing’. It is generally useful to consult at least three different sources that are independent of each other on each main topic of the ToR”
- It also suggests that interviewing mid-level staff, rather than those in more senior roles, may be more helpful as they are likely to have more experience working on the ground / in the field.

Asylos and ARC Foundation will source relevant stakeholders by reference to those cited in UK case law, those having published academic material on the issue in question (e.g. JSTOR search), those recommended on the Refugee Legal Group, Electronic Immigration Network (EIN), and the Refugee Rights in Exile Programme.

Relevant organisations will be sourced and relevant representatives from these identified by reference to human rights material or media sources, for example published on COI databases such as the Austrian Centre for Country of Origin and Asylum Research and Documentation’s (ACCORD) ecoinet, UNHCR’s Refworld or Reliefweb.
Asylos and ARC Foundation will also seek recommendations from their respective boards of trustees and networks of legal representatives.

To broaden the radar as much as possible, Asyllos’ project coordinators will in addition seek the input of the Dutch Council of Refugees (DCR) and ACCORD, who have agreed to participate in the project pro bono to help identify stakeholders. Other project partners with relevant specialist knowledge may also be consulted.

All individuals and organisations contacted will be asked to recommend other potential stakeholders for interview.

**We will include in the final report a list of all places in which we looked for stakeholders. All researchers will be required to keep a record of any websites, organisations or other sources consulted when identifying stakeholders.**

In order to assess the validity of individuals and organisations as a potential source, the following questions will be considered:

- Who is the source and do they have specific knowledge / experience which makes them have expertise on the topic?
- What context do they work in and to what extent might this context influence them or create any bias?
- How does the source formulate any information they present? Is it presented in an objective, neutral and transparent way?

It is anticipated that all stakeholders with the relevant knowledge/experience in question may be contacted for interview unless there are compelling reasons not to do so. It is our aim to conduct at least 5 interviews per report, from a range of different disciplines. Given that not all stakeholders will respond, a maximum of 15 will be initially contacted by email requesting interview. ARC Foundation and Asylos will aim at ensuring that represented in this 15 is a balance between those who are academics, professionals on the ground and government representatives.

**Step 7: Instructing interviewees**

Once a list of potential interviewees to contact has been agreed, Asylos’s UK Project Coordinator(s) will send an initial email introducing the project and asking if they would consider contributing their expertise. They may ask project partners for support in making first contact with potential interviewees where their connections may increase the chance of a positive response. Where the coordinator does not receive a response from potential interviewees, she will follow up with them by email and/or phone.

If a stakeholder provisionally agrees to take part, the coordinator sends a follow-up email attaching the following documents:

- an edited version of the ‘*Asylos and ARC Foundation information sheet for interviewees*’ [which explains how responses will be used and how the preferred level of anonymity and confidentiality will be guaranteed]
- a copy of the ToR and the interview questions.

The coordinator will also ensure that they are aware that the following can be made available to them on request:

- the COI desk research report
The Strategic COI Report Methodology.

Once a stakeholder has had sight of this further information and confirms their willingness to take part, arrangements will be made for how they will submit their answers. The information sheet asks the stakeholder to indicate if they would prefer to submit their contribution in written form or through an oral interview. If possible, the coordinator will encourage each participant to agree to an interview (unless interviewees are very experienced in providing written expert testimony for RSD procedures) as we have found that interviews are more likely to yield usable information. Once these arrangements have been made, each participant is asked to provide a short bio, or link to their CV, which will be published alongside the final report.

Step 8: Interviewing stakeholders

Interviews will primarily be conducted by Asylos’s UK Project Coordinator(s) with assistance from ARC Foundation and Asylos volunteers where appropriate. Each interview should be recorded, unless interviewees have indicated that they do not wish for this to happen. In this case interviewers should take notes while conducting the interview. Volunteers conducting the interviews are asked to stick to the following guidelines:

At the beginning of each interview, the interviewer should start by introducing themselves, thanking the interviewee for taking part, and asking for permission to record the interview. Once this has been agreed they should check that the interviewees have received, and have reference to, the report containing our findings from the desk research and have read and understood ‘Asylos and ARC Foundation information sheet for interviewees’ (contained in appendix 2) which sets out our recommendations for supplying their evidence. All interviewees have received these guidelines but should be reminded of following key points during the introduction:

- Interviewees should not attempt to answer any questions which fall outside of their expertise or about which they have insufficient information
- Interviewees should make clear if the information they are providing is based on direct experience or other evidence throughout the interview
- If interviewees have obtained the information from other sources they should make sure they confirm where they obtained that information
- Interviewees should not withhold any information on the basis it may detract from their view, rather if interviewees are aware of information conflicting with their views, they should be asked to acknowledge it and explain why their opinion departs from this information.

Before launching into the questions, the interviewer should double check how the source wants to be referenced in the final report and whether or not they would prefer to be anonymous. The interviewee will have already indicated this in their Confidentiality and Anonymity agreement, so this serves to ensure that interviewees are still in agreement with what they initially indicated.

Once the introduction is over the interviewer may commence asking questions, working through the questions in a structured and methodical way. Whilst doing so, volunteers are asked to pay attention to the following points on interview techniques:

- Ensure that your manner remains impartial at all times. Do not use ‘leading questions’
- Be mindful that certain topics might be sensitive to ask
● Do not be afraid to interrupt! This may mean asking for clarification or politely suggesting to move on to the next question if the interviewee goes off topic or it becomes apparent they do have the appropriate expertise or sufficient information to speak authoritatively on the topic.

● If it is unclear what information the interviewee is basing their statements on, seek clarification.

The EU common guidelines states:

"Additionally, it may also be useful to ask a respondent to clarify or give more factual background to support a statement. This will often be the case where a declaratory statement or Policy position has been given on a particular topic. Requesting additional factual information to back up a statement or position will help give a clearer perspective or a rationale to what has been said, and may also remind the respondent why they have a particular viewpoint. In some instances it may challenge their own assumptions or bring out any potential bias or advocacy on the part of the respondent in a neutral, non-confrontational way." (Pg 20-21)

In the interest of source validation, ask the interviewees to identify where any information they rely on can be found by our researchers after the interview.

Step 9: Citing the interviews and writing up the full report

After each interview, the interviewer will transcribe the recording in full and verbatim, with only very minor adaptations being made to enhance comprehensibility. Interview transcripts will be saved under a unique reference number, rather than using interviewees’ names if requested. The document which links interviewees’ names to each unique reference number will be password protected and only accessible to project staff. This transcript will then be returned to the interlocutor, giving them 14 days to sign it off. This transcript should then be sent to the project coordinator which will be appended in full in the report. If the interviewee wishes certain excerpts to be made anonymous, they will be cited as such in the body of the report and not included in the appended full transcripts.

The report drafters will select relevant excerpts from the interviews and present these under the corresponding research headings in the report alongside the findings from the desk review. The coordinator should use this opportunity to add any additional COI that was mentioned in interviews and then make any further edits to the report, ensuring that the following points have been addressed:

● General formatting should be in line with Asylos’s ‘research handbook’

● Each source should be introduced separately with a concise summary identifying any patterns in convergence or disagreement in the sources consulted, rather than summarising the content of the sources

● Ensure the list of sources consulted is complete, with access links and information about when the sources were accessed (this is crucial for the user of the report to trace back the original source)

● To further aid transparency, it is crucial to provide page numbers for each excerpts to facilitate access to the original source

● The final report should include a note on who instructed the interviewees and when (month and year), and a list of the documents the interviewees were provided with

● A full transcript of each interview should be included as an appendix at the end of the report, excluding any excerpts that the interviewee wished to keep anonymous.
• Fully anonymous interviews are included as an appendix without any further identifying information

Following final edits, the report will be sent to ARC Foundation for review. ARC Foundation will use this opportunity to revise and update the findings from the desk based research. Once ARC Foundation have made their edits, the full report will be sent to each stakeholder detailing how they have been cited, with a copy of their interview transcript / written submissions, to sign off. Stakeholders should be given a 14 day deadline for this, after which we will assume that they are satisfied.

Once the report is published, interviewees can no longer withdraw but we will be able to make additions by issuing addendums, should they wish to provide more up to date sources or information which was not previously available to them.

Step 10: Dissemination

Once the report has been signed off, the UK Project Coordinator will be responsible for publishing it on Asylos’s and ARC Foundation’s website, ecoi.net, Refworld and EIN (Electronic Immigration Network). Efforts should also be made to promote the report through sharing the report via the RLG mailing list and other platforms such as the RMCC (Refugee and Migrant Children’s Consortium). The coordinator may also consider promoting it through written blogs on websites such as Free Movement and EIN.

Step 11: Evaluation of impact

This information will be made publicly available to all, so that it can be reviewed and used by asylum seekers, Home Office case workers, legal representatives and appeal court immigration judges alike. The reports will be accessible internationally, meaning they will also be used by and influence institutions like the UNHCR and European Asylum Support Office, as well as decision makers in other countries’ asylum determination systems.

Asylos will track progress and impact throughout the project cycle by:
• Recording the number of downloads from its website and asking ACCORD for data from ecoi.net
• Collecting feedback from Asylos’ networks of legal representatives to review how well the report met the information need we identified, as well as how the report has been used.

ARC Foundation will be responsible for measuring impact by:
• Recording the number of downloads from its own website
• Consulting members of the international COI Forum which it moderates and its COI Update subscribers to review how well the report met the information need we identified, as well as how the report has been used
• Tracking how the reports have been used by decision makers (e.g. in Home Office policy documents, UK case law, EASO reports).

Learning will be fed back into the project on an ongoing basis and an evaluation of its overall impact will be shared with interested stakeholders on its completion.

Further reading:
- Tribunal’s Practice Directions on instructing experts from the outset (Section 10)
- Best Practice Guide on expert country evidence in asylum procedures
- EU Common Guidelines on Joint Fact Finding Missions
- European Asylum Support Office’s research guidelines, Country of Origin Information report methodology (note that a revised methodology is due to be published soon)
- ACCORD COI Training Manual
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All sources were consulted between 27 December 2020 and 31 August 2021

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C. Interviewee Biographies

Disclaimer: Please note that all interviewees have provided their own biography details. These have not been authored by Asylos or ARC Foundation and, as a result, they do not follow a standard format.

Anonymous

This source is a trained lawyer with a specialist interest in, and lived experience of, disability. Their career as a disability rights activist, published author, and international development expert has spun over two decades. They seek an egalitarian society where true justice will reign supreme and the cause of humanity will be promoted against injustice. They currently live in the UK where they work in academia, researching disability rights in Nigeria.

Adeyinka Onabolu

Adeyinka Onabolu is a human rights and development expert with experience in advocacy, litigation, research and project implementation. She holds an LLB in Law from the University of Ibadan, Nigeria and an LLM in International Human Rights and Humanitarian Law from the University of Essex, United Kingdom. Her work has focused on gender, disability, economic and social rights and the African human rights system. Previously work experience with Mercy Corps Nigeria, Women Advocate Research and Documentation Centre (WARDC), Centre for Citizens with Disabilities and the African Commission on Human and People’s Right Banjul, The Gambia supporting the Special Mechanisms on Older persons and Persons with Disabilities.

Betty Abah

Betty Abah is a women and children’s rights advocate. Abah founded the Centre for Children’s Health Education, Orientation and Protection (CEE-HOPE), a non-profit working for the rights and development of marginalised young people, especially girls as a response to wide-spread violations of the rights of young people across Nigeria. She also coordinates the Hearts of Hope Shelter, Lagos a safe home for women and girls impacted by Sexual and Gender-based Violence (SGBV) in Nigeria and established in 2021.

She obtained a BA in English and Literary Studies from the University of Calabar (1999) and an MA in Literature in English from the University of Lagos (2012). She worked with the Environmental Rights Action/Friends of the Earth Nigeria where she headed the women’s campaign desk and coordinated projects on women’s environmental rights across the Niger Delta region and the African sub-region. In 2020, she was named by Nigeria’s National Human Rights Commission (NHRC) as one of ‘21 Eminent Nigerian Women’ in celebration of 21 years of Nigeria’s return to democratic rule and also as ‘One of the 60 Prominent Nigerian Women’ in celebration of Nigeria’s 60th Independent anniversary by the BusinessDay Newspaper.

Abah was awarded a Visiting Fellowship (Human Rights Defenders Fellowship) by the Centre for Applied Human Rights at the University of York, England in the 2019/2020 session.

Abah has authored six books including Go Tell Our King (poetry), Sound of Broken Chains (poetry), and Mother of Multitudes (biography).
Danlami Umaru Basharu

Danlami Umaru Basharu was Chair of the United Nations Committee on the Rights of Persons with Disabilities (CRPD), for two years, between 2019 and 2020. He commenced his services in 2015 and was again re-elected for a second term in 2018 to finish his term on 31st December, 2022. Danlami has been country rapporteur for Uganda, Morocco, Oman, South Africa, Senegal and Niger republic.

Danlami is a lawyer who obtained several educational degrees from the UK, including from Cambridge University and is a fellow of the Cambridge Commonwealth Trust. Besides his work with the CRPD, Danlami is the Director of the Anglo-Nigerian Welfare Association for the Blind (ANWAB), an organization he founded after resigning from a successful employment with the Nigerian Television authority and which continues to transform the lives of hundreds of blind Nigerians. Danlami has served in different capacities, particularly in disability development and has travelled widely in Europe, America, Africa and Asia both as a student and disability advocate to promote the rights of persons with disabilities. Apart from being immediate past president of the Joint National Association of Persons with Disabilities, Danlami served as a member of the 2005 Nigerian Political Reform Conference Committee where sign language interpretation for the deaf was, for the first time, brought into national limelight; is an alumnus of the United States International Visitor Leadership Programme; was a member of the Technical Committee of the House of Representatives Committee examining the bill on the rights of persons with disabilities in Nigeria; represented Nigeria at the UN High Level Meeting on Disability and Development in 2013 and several of the Conference of States Parties, especially that in 2010, where he successfully got the Nigerian government to ratify the United Nations Convention on the Rights of Persons with disabilities. Danlami strenuously continues to champion a rights-based approach to the full inclusion and participation of persons with disabilities, including older and indigenous persons with disabilities, in political and public life, through several speaking engagements at conferences both within Nigeria, the African Continent and internationally. Danlami has received several awards for his work on promoting the rights of the poor and disability rights, both from his local community and nationally.

David O. Anyaele

David O. Anyaele is a disability activist, motivational speaker, and development consultant with over 15 years of experience with focus on inclusion and rights of persons with disabilities. He is the founding Executive Director, Centre for Citizens with Disabilities (CCD). CCD is the premier organization of, and for persons with disabilities (PWD) in Nigeria. He coordinated the campaign by CSOs for the passage of two Disability Rights laws at the national and state levels. The laws are: Discrimination Against Persons with Disabilities (Prohibition) Act 2018, and Lagos State Special Peoples Law 2010

Mr. Anyaele is an International Visitor Leadership Program (IVLP 2020), Gold Star alumina, organized by the State Department, United States of America with focus on Commemorating the 30th Anniversary of the ADA (Nigeria), July 8 - July 22, 2020. He has won different Awards. The recent among them are Merit Award 2020 by Conference of Non-Governmental Organizations, Edo State; Disability Champion Award, 2019 by Project Enable Africa, Social Responsibility Award of Excellence 2018 by AS+A Communications, Lagos State.

He is a board member of different Coalitions and Not-for-Profit organisations in Nigeria
Grace Alache Jerry and Olawunmi Okupe

Grace Alache Jerry is a human rights/disability advocate, peace promoter, recording artist and a strong gender advocate with special interest in democracy and ending violence against women and girls with disabilities. She is working to create an inclusive world where everyone counts. Within the last few years Grace has brought freshness to advocacy efforts in Nigeria through her unique blend of passion and music, bringing prominence to the important roles persons with disabilities can play in national development. She is the founder and Executive Director of Inclusive Friends Association.

Olawunmi Okupe is a social development worker, an activist, a gender-based violence expert and researcher, a women and girls rights advocate, an advocate for the inclusion of women in politics and public offices, and an advocate fighting against violence against PWDs.

Olawunmi is currently working at the Inclusive Friends Association, as a Programs Officer, Gender.

Timothy Ali Yohanna

Is an author of a field research work, conducted in North- Eastern Nigeria titled: “They call us senseless beggar” a study that examined a challenge of person living with disabilities. Over the past 10 years of the Boko Haram insurgency in northeast Nigeria, he has been committed to documenting and reporting cases of human rights violations and abuses, as well as early warnings of conflict. He holds master’s in Research and Public Policy.

Theophilus Michael Odaudu

Theophilus Odaudu is a Nigerian lawyer with expertise in human rights and Democratisation, with particular interest in disability rights. Presently, he works with the Disability Rights Fund and Disability Rights Advocacy Fund (DRF/DRAF) as Programme Officer for Nigeria. He has at different points worked with the National Human Rights Commission, and the Kogi State Ministry of Justice in Nigeria. He volunteers for several organisations, including Cedar Seed Foundation, and African Kids and Women Initiative. He has over 10 years’ experience working with the disability community in Nigeria. Theophilus has an LLM in Human Rights and Democratisation in Africa from the University of Pretoria, South Africa, and another from the University of Ibadan, Nigeria. He has published articles on disability rights, and Democratisation.
D. Interview records

Interview with anonymous source, 3 August 2021

Discrimination by state actors

Are children or young people with disabilities subject to discrimination, exclusion, humiliation, violence, or other actions by the state authorities? And if so, what examples can you give?

Let me start by saying, Nigeria as a country operates what we call a tripartite legal system. That is to say we have three legal systems in one country. We have the sharia law, we have the customary law, and we have the English law. The English law supports the rights of a child, which talks about the best interests of a child, what should be done to children and what should not be done to children. Thus, the Child Rights Act 2003 is the law that guides and protects children in Nigeria. Under sharia law, they have their own rules on how to bring up children. What could be labelled as a violation of children rights under the Child Rights Act 2003, under the common law, is not regarded as an offence under sharia law. Nigeria has 36 states, and in most of the states where Islam is a dominant religion, children are grossly abused with the practice of Almajiris. In the name of Islamic education, the Almajiri children are often subjected to all manner of pains, starvation, beating, hunger, lack of care. As a matter of fact, especially in the northern states of Nigeria where Islamic religion is very popular, you see a whole lot of Almajiri. The disabled kids who are Almajiris are used as an object of charity to beg for alms. And most of the time, they're deprived of western education, and therefore in my opinion, they are denied their right to education. And again, they are even denied their right to parental care. So, they suffer a lot, and they're being used as an object of begging for alms on the street in order to bring income for people who are mentoring them. So, you can see, because we practice three legal systems, it's difficult to prosecute people who are practicing that kind of Sharia law. Because under Sharia law, they are permitted to do that. So, it is difficult to prosecute people who violate children's rights in geographical locations where Islamic law or Sharia is being practiced. Now, we also have what is called customary law. Under customary law, children are also being subjected to a whole lot of challenges. Especially children that have disabilities, special children. As I talk to you, they are still being killed. When a child is born with a disability in Nigeria, some believe that the best thing to do is to throw the child away. And some of those kids are labelled evil spirits or bad luck because of our societal ignorance, they are seen as snakes, they are seen as evil or snakes in human form. And such children are beaten, some are killed, some are left to starve and eventually die. And we have some traditional ritualists who are experts in killing those kinds of children. They call them traditional doctors. So, some children who are born with disabilities are killed by those traditional doctors. I am a disabled person and I tell you, if I had been born with my disability, possibly, they would have labelled me a snake and thrown me away to die in a forest or river. But I am lucky because I grew up before I became disabled. So, they knew I was not a spirit or a snake in human form. I wasn’t a snake. That it was something that attacked my leg. The children who are unfortunately born with disabilities, many of them don't celebrate their next birthday alive. They are killed. And as I talk to you, many people will deny it. However It’s a tradition that is happening even now as I speak with you. And in the next 20 years, from where I am sitting, I would say that that practice will still be with us. Roughly half of Nigerians are Christian, and the way we practice our Christianity in Nigeria is so unique. Attention is focused on miracles and beliefs that are quite barbaric. Therefore, children who cannot explain themselves often become a victim of those religious charlatans. Because when a child is a disabled or a child is special and maybe has intellectual or mental health issues, the religious
A charlatan will see that child as a cursed child, and, therefore, the child will be subjected to ridicule and so many violations will occur which may not be in the best interest of that child.

So, in a nutshell, because Nigeria practices a tripartite legal system, then it’s difficult to prosecute people who believe in our traditional legal systems. If you know, our laws categorically state that any of these laws, either Islamic law or traditional law, that are inconsistent with fundamental human rights should be declared a nullity. But it is not as easy in practice as I say it orally here. So easy to say, but when you look at the implementation or the application of those laws, many times children are violated due to those practices that are ordained either by the Islamic religion or the traditional legal system, and the law is confused on how to intervene. Also, there is a lack of political will in protecting children with disabilities against abuses in the country. All these make it very difficult for children with disabilities to enjoy their full rights as children in Nigeria.

So, young persons with disabilities in Nigeria are highly discriminated against. They are excluded, they suffer humiliation, and there are a whole lot of violent attacks against them, and other actions that bring untold hardship. And the worst part of it is that there seems to be a conspiracy to punish these children. Because even the state actors are quiet. Nobody is trying to save those kids. The English legal system - the common law that we practice, the Islamic law, the traditional religion and Christianity seems to have conspired against the best interest of the child. That includes the state actors. Because the state actors should be there protecting the interest of the child. And sometimes, those violations are carried out by state actors themselves. Or they keep quiet. They see this happens, but nobody feels obligated to intervene. I know a child is always a child. They can't help themselves. They are vulnerable. So, they are subjected to all manners of discrimination, all manners of violence, all manners of attacks, without any remedy.

The conflict of these three legal systems, actually, is a huge problem. Because if this law says one thing about children, and then another law says something else, which one are you actually going to follow? So, children are in between these laws, and that is to their big disadvantage.

Are there any regional differences between states, rural, and urban areas?

Yes. I think it is different to developed countries like the UK. In the UK, a child in London and a child in one of the remote villages in the UK enjoys the same rights. That is not possible in Nigeria. Children in urban areas are more privileged and they enjoy some basic rights. They have better access to quality education, and to a large extent, their rights are more likely to be respected and protected. Now, children in the rural areas do not have the same rights. They don’t enjoy the right to education. They don't enjoy the right to good accommodation. They don't enjoy the right to quality nutrition. So, there's a discrepancy. And it has to do with poverty.

Nigeria practices a class system. There's a big difference between the rich and the poor. So, if you're a child and you come from a poor home, definitely you are not only going to suffer as a child, but your kind of poverty is also going to be very monumental. And because children are vulnerable, this poverty has an everlasting impact in their life, even when they grow up. And that is the reason why it is so difficult for underdeveloped countries like Nigeria to be prosperous. Because the children who represent the future of tomorrow are being denied what it takes to prepare them for tomorrow. So, tomorrow is not there for children, especially the children of the poor.

And that is a gross violation of fundamental human rights. If you deny the child the right to education, what that means is the society will grow up not to have educated people. The society will grow up to be underdeveloped. Because anybody who is not educated is disadvantaged. In a modern world, imagine a child who will never use a computer, who has never watched a television, who has never known what the internet is. It is difficult to compare that child with his or her age mate globally.

So, poverty is actually one of the major problems that plays a key role when you compare a child at the grassroots and a child with privilege who grows in the city, unlike in the developed countries.
where children, irrespective of where they live, enjoy the same rights. In Nigeria, the case is quite different.

Is the divide more about class than it is about urban and rural?

Yes. Let me tell you this because I experienced this myself. At least if you go to Nigeria, places like Abuja, Lagos or Port Harcourt, these are more developed areas. Now, children who are born within Lagos and Abuja will go to school sitting on a chair with a table, and the teacher sitting, and maybe with a uniform and some books. Now, when I was growing up, I went to a school where I sat on the floor because I was in the village. And I was not even privileged enough to speak English. I never heard my teacher speak English even though Nigeria teaches in English because I was in the village. So, the kind of teachers that are sent to train children in the village are those teachers that are themselves illiterate. So, imagine a child being taught by an illiterate teacher. You can imagine his future. Such a child will be either a member of boko-haram or a bandit. This is the Nigerian situation as I speak.

So apart from class, there's also discrimination between city and rural life. A poor man in the city is still more privileged than a poor man in the village. When it comes to children, the difference is so clear and obvious. And more often than not, such children end the way they were born - because they are born in poverty, they die in poverty. They grow up in poverty, they die in poverty. And that's the reason why it is difficult to get a nation like Nigeria out of poverty. Because human capital development is lacking. Now, when children are not trained, it means the future is not there for them.

In our desk research there was little information about children and young people with disabilities being discriminated against. Do you know why there is a lack of information?

So, lack of development, children are the last thing we want to think about. That is why in Nigeria we still have people who are 80 years old ruling us. We still have people who are 80 years old in government. And since I was born, there are some names I have been hearing about in government and those names are still there. It has never changed. They recycle leadership among themselves. The meaning of that is that there is no child, there is no young person coming to take over. They have not been prepared for that. So, the elderly men, no matter how old they are, hold on to power. Therefore, to answer you, there is no interest, there is no political will to promote the rights of a child. Nigeria signed up to the United Nations Convention on the Right of a Child. But back home, is that practiced? The answer is no. Children themselves are not even aware they have a right. Parents of the children themselves, they do not even know children have rights. Only the few elites. The government does not care about informing the society about the rights of a child. The government doesn't care about implementing the policies that are meant to protect children.

Therefore, when you talk about information or a legal framework on the rights of a child, it only exists in the heads of few educated people like me. But, in reality, it's not there. Nobody knows about it. As I told you earlier, the Islamic religion, the Christian religion, our traditional religion, those three religions, none of them care about the rights of a child. And Nigeria is a religious country. So, it's so difficult, on which ground are you going to stand and start promoting the rights of a child to someone who is religious?

Are some groups of children or young people with disabilities particularly vulnerable to discrimination, exclusion, or violence by state actors, based on their profile?

Of course. If you are a disabled child, and you are a female child, and you're from a poor home, you're going to face three challenges. You're going to face discrimination as a female child because in
Nigeria we don't have respect for female children. As a matter of fact, if you see a man who does not have a male child, he feels barren.

Second, disabled children are the most vulnerable because your school environment will not even accept you. Even if your school accepts you, there will be no access for you. There are no facilities for you. So disabled children, female children, and the third category of the vulnerable are children from poor homes - they face a whole lot. As a matter of fact, if you fall within these three categories, then there is no way you will have education. There is no way you will have quality of life. Your future is defined the day you were born - because you were born the way you are, you will grow up like that, and die like that.

And that's the reason why it is so difficult to eliminate poverty for many Nigerians. Most of the children fall within this category because the poor are in the majority. So, their children face discrimination. Only in a few exceptional cases do you see female children excelling. Under a few circumstances, you see disabled children excelling. Under a few circumstances, you will see poor children excelling. And that's the reason why if you look at our national assembly, how many women are in the parliament? At the executive arms of the government, how many women are ministers? How many women are professors? How many women work for the government or in private organizations? They're just a few.

The same thing applies to disabled children. How many of us are educated? How many of this population have degrees? First degrees? How many of this population even went to secondary school? Just a few. So, to answer you, in a nutshell, a female child, more vulnerable, a disabled child, vulnerable, and a poor child, most vulnerable.

Is there any evidence of discrimination towards children and young people with disabilities in the implementation of non-disability-specific laws or policy?

Okay, yes. You see, in Nigeria we practice what is called Universal Basic Education. And what that means is every child must go to school to a particular level. That should be applicable to every child. But a disabled child cannot enjoy that same right because they don't have access. Take for instance when I was in primary school, I used to enter my classroom through the window because the step outside was so difficult for me to climb. The shame of creeping on the ground on my hands. I would go to school early and hide and enter through the back window so that they would not see me creeping on the ground. And when the school closed, I would stay back to make sure that everybody goes home and then I would come out from the window.

I did that out of a passion because I was interested in going to school by any means. It was my own way of devising a means to overcome the sharp discrimination that I was confronting at that point. So, yes, there is a law that says every child can go to school, but the law does not take steps to make all schools accessible. So, if you're a child and you're disabled, you're blind or in a wheelchair, or using crutches, or you are deaf, then you are not going to have that specific education tailored towards addressing your need. So, there's discrimination. And there is so much evidence, as I've pointed out myself. I went to school because I was so determined, and I could devise a means. If not, I should not be speaking English here with you.

Do you know if there's been an increase in incidence of police brutality, harassment, or abuse towards children and young people with disabilities because of the COVID-19 pandemic? And have some groups or profiles been impacted more than others?

Yes. You see, police brutality against the disabled in Nigeria is as old as Nigeria itself. And the reason is because disabled children are used by some people for begging. Begging on the street to get money for their mentors. Sometimes the police will come down on those innocent children. Beat them up or shoot them, pack them up, throw them away to unknown destinations. So, the police have always harassed and abused children's rights. Instead of chasing those who put them on the
street, they go after children. During the pandemic, of course, the government wanted people to stay at home. And those people who used disabled children to make money pushed those children into the streets. And, of course, the police come after those children.

So, yes, there is evidence of police brutality on children during the pandemic. Even when the pandemic stops, it continues. I tell you, police brutality against children with disabilities or young persons with disabilities is as old as Nigeria itself. It happens on a daily basis. There are reports even in the national newspapers where the police and the military brutalise young persons with disabilities. There are so many incidences of that. Many of us are victims of police brutality.

State protection

In our desk research we found little information about legislation or policy being used to protect children and young people with disabilities from discriminatory or violent actions by individuals, state actors, state authorities, and state-run institutions. Likewise, we found few examples of children and young people with disabilities using the law or policy to seek redress or support from state authorities and registering complaints.

In your experience, does the state provide protection in practice to young persons or children and young people with disabilities from discriminatory or violent actions by state actors, or support them to seek redress where this has occurred?

Yes, you see you are from a developed country, and you’ll be shocked by the answer I’m going to give you. Because what you must know is, underdeveloped countries don’t operate like you do here in the UK. In Nigeria, we have what is called the National Human Right Commission. It’s a creation of the State. Recently, we had the law Discrimination Against Persons with Disability Prohibitive Act, 2018. It’s a law that challenges those abuses. We also have a National Commission for Persons with Disabilities, which oversees the welfare and the protection of persons with disability. Then Nigeria also has the Child Rights Act, which has been signed or ratified and domesticated by some states in Nigeria.

However, all those laws that I’ve mentioned can only be seen on paper. But in practice, as a practicing lawyer in Nigeria, I have taken cases of child abuse to the Human Rights Commission, and nothing was done about it. I have reported cases to the National Human Right Commission on the abuse of several young persons with disabilities, and there was nothing done about it. Those people are enjoying moving around, harassing disabled people. So yes, there are laws in Nigeria, but anything that does not have monetary reward attached to it, even when it’s an obligation on the side of the government, if they’re not going to get money doing that, not going to get a bribe doing that, nobody is going to run after people who violate children or young people.

So, yes, there are organizations that have the official responsibility of doing those things, but in reality, they do not do it. So young persons with disability suffer violence, suffer discrimination, but there’s nothing you can do about it. Nothing. There’s nothing you can do about it because it appears that there is a conspiracy of silence. There’s a conspiracy of intimidation on the side of the government. And you know, disabled children or young people with disabilities are the most vulnerable ones. These are people who society has really denied opportunities. So, they don’t have what it takes to hire lawyers, to go around chasing people who violate them. Unlike in developed countries, whether you are rich or not, you have access to justice. It is not the same in countries like Nigeria.

In Nigeria, justice is for sale. It’s for the highest bidder. In the next 10, 20 years, justice will still be for the highest bidder. So, when it comes to a vulnerable person who is poor, and he can’t pay for justice, he can’t have justice. So, no matter how his or her right is violated or breached, nothing happens. There’s a conspiracy among the elite, the political elite, among those who govern us, who are privileged to be at the helms of government institutions that are meant to protect the people. There’s a huge conspiracy to deny people of their fundamental human rights. This cuts across all people. But
it is more devastating when you bring disabled persons and children who are the most vulnerable. The impact on them is more glaring. Particularly the issue of violations of anybody who does not have enough money or enough political power to protect his or herself in that part of the world, Nigeria.

Do state actors face consequences for discriminatory or violent actions towards persons and children with disabilities? What is likely to happen to them?

Yes, you see, our judicial system is moribund. Our judicial system is commercialized. Our judicial system is corrupt. Our judicial system does not work. It's highly ineffective. Therefore, there is no way anybody will be prosecuted for violating the rights of a disabled person. Because, first, the disabled person does not even have money to pay lawyers to advocate for him or her. So, those who violate the rights of the disabled are not held accountable.

The Disability Rights Act was enacted in 2019. And since 2019 to date, we have airlines in Nigeria who violate the rights of people with disabilities, this is reported in the national dailies, and nobody prosecutes these airlines. We have seen more violations of persons with disabilities than when we didn't have a Disability Rights Act. So, what I'm saying is there are no consequences for violating the rights of people with disabilities in Nigeria. As a matter of fact, people are being rewarded for violating the rights of disabled people.

In what way?

The more you hurt disabled people, you harm them, the more people reward you. Because disability in Nigeria has not been welcomed. Disability in Nigeria is seen as a taboo. Is seen as a curse. Is seen as a punishment for the disabled. Is seen as people who are outcasts. A bad omen. Bad luck. So, the more you eliminate disability, or you do away with them, the more the society sees you as doing the society some good. That is why even in religion, they only use the disabled as objects for demonstrating their so-called counterfeit religious powers. So, disability is not welcomed in that part of the world. And until things change, the best case scenario is when disabled people are seen as an object of charity.

The National Commissions of Persons with Disabilities appointed in 2020 is empowered to receive complaints of rights violations and to support victims to seek legal redress, amongst other duties. What challenges does the Commission face implementing its mandate?

One, there is a lack of experts working with the Commission. The Commission does not have experts on disability working there. Second, the Commission is not sufficiently funded. The foundation lacks the funds to carry out their mandate. Third, there is no strong government will to implement disability rights in Nigeria. Fourth, Nigeria is a country that is overwhelmed, overrun by religious tendencies, by religious charlatans. So, even though the Commission watches disabled people being abused by religious charlatans, because we are a nation that is neck-deep in religion, if a pastor, for instance, is violating the rights of a disabled person, the Commission is not going to intervene because the pastor is seen as a representative of God. And since the Commission will not want to incur the wrath of God according to them, the Commission is also overwhelmed by religion as well.

So, there are many challenges that confront the National Disability Commission. As I said, lack of funding, lack of expertise, lack of moral courage to do what they should do, and lack of good leadership. Because in our country one would expect some persons like Danlami Basharu and David Anyaele to be the chair or the executive secretary of that Commission. Because they are among those who drafted the law that gave birth to the Commission. And I tell you, they are not close to that Commission because of some special interests. Experts will not be given a chance to run the Commission. People like Danlami Basharu and David Ayaele would be very instrumental because
these are people who feel the pain of disability. These are people that we know have the expertise, the technical expertise. So, we have people like that in Nigeria and they’re being wasted. And then we have people who practically don’t know anything about disability at the helm. That cannot work. And that is the reason why there’s a difference between the developed world and the underdeveloped world. In the developed world like in the UK, expertise counts. Your experience counts when there’s a job available. People have to display their experience and the best get the job. In that part of the world, expertise does not count. Political connection is what drives leadership and that’s wrong. That’s the reason why the Commission is challenged with a lack of capacity to actually do what it should be doing. I will not be surprised if in the next 10 years, the rights of people with disability will still be a subject of discussion in the negative. Because the Commission has so many challenges to battle with.

Do persons with disabilities register complaints against state authorities?
You see, let me share this. Before the establishment of the National Commission for Persons with Disabilities, which was just two years ago, we had what is called the National Human Rights Commission, which is set up to address human rights violations generally. And of course, because persons with disabilities are human, they can take their grievances there. Now at the National Human Rights Commission there is limited access to the building. If you manage to access the building and you lodge a complaint, nobody is going to investigate it. As I told you earlier, as a practicing lawyer, I had the privilege of registering fundamental breaches of the rights of persons with disabilities, and nothing was done up to now. No investigation, no feedback, nothing. Absolute quietness and nothing happened.
So let me tell you this, people with disabilities in Nigeria, they do not bother themselves to go and complain when there are breaches. They don’t complain. When your rights are breached, religious people will generally say, "I’ll leave you in the hands of God. I will move on." So first, for you to get justice, you must be rich. And these people are poor, so they don’t have what it takes to buy justice. So, they are going to be there and suffer it, and possibly die with it, if the harm is grievous. Therefore, persons with disabilities do not complain. And when they register their complaint, there is absolutely nothing that will be done about it.

If a child or a young person suffered some kind of discrimination or abuse, would they know how to complain, where to complain? Does the general population have that kind of knowledge?

Look, once somebody is disempowered, educationally, economically, politically, he knows nothing. Disabled persons fall within the most vulnerable who are illiterate, poor, hungry, sick, dejected, ostracized, outcast. Therefore, most of them don’t even know where to make their complaint. That is to say, they don’t have access to justice. Most of them do not even know that they have disability rights. Most of them that know, lack what it takes to be heard. Their voices are shut down. These are people that cannot raise their voices up. If not for social media, most of them don’t even have access to the press.
So, there are a whole lot of challenges and I think the worst part of it is the challenge of their economic status. Once a man is economically disabled, the person is finished. Because it automatically disqualifies such a person from promoting his or her rights. In the UK for instance, you can talk to the Citizens Advice Bureau, and they will help you as a disabled person to raise any perceived discrimination. But in countries like Nigeria, you don’t have such facilities. There’s no one to talk to. You are just by yourself. So, the opportunity to even amplify your voice is not there. Therefore, people just keep quiet with their pain, frustrated. And for people like us, some of us who are privileged to be educated, of course, we can’t keep quiet. But it’s difficult. How many of us are educated? Very few. The majority suffers unheard.

Do you know if the COVID-19 pandemic has affected the ability of children or young people with disabilities to seek protection from the state or redress in cases of discrimination and abuse?
As I have said before, since Nigeria got her independence in 1960, persons with disabilities have been seen or treated as a pariah group. They're already being ostracized. Their rights have already been infringed upon a thousand times without redress. So, COVID-19 did not actually make too much of a difference. The situation continues. If you have not been enjoying any privileges, and COVID-19 came and still you’re not enjoying any privilege, the situation will continue.

A disabled person will be the first to die when COVID-19 starts spreading. Because they’re the ones that are neglected. They’re the ones who can’t keep hygienic because of their poverty. So, what I can say is COVID-19 has only complicated issues and sends persons with disability to their early grave. It has only compounded the issues. It has only added more salt to the existing injury.

Interview / written correspondence with Adeyinka Ige-Onabolu, human rights and development expert, August 2021

Legal and policy framework

Does the new legislation and related policy, adequately respond to intersectional discrimination faced by children and young people with disabilities? If so, how? Where are there gaps?

The Legislation does not acknowledge the intersectional identities of persons with disabilities hence it is unable to respond to discrimination faced by children with disabilities. It fails to address the complex interactions among the multiple social categories such as gender, religion, sex etc through an intersectional lens. It tends to treat persons with disabilities as all homogenous thus leaving out other areas of their identities.

If the Act does not target intersectional discrimination, what risks to children and young persons with disabilities arise from legislation that fails to comprehensively address this?

It undermines the impact of the law. The failure to recognise the various identities markers makes it almost impossible for systems and processes to respond to the needs of children with disabilities. They will continue to experience direct and indirect discrimination, they will not be able to access the rights and protection as the multiple layers of discriminations they faced are not addressed in a multifaceted way.

Are you aware of any legal or policy measure that would ensure children and young people with disabilities who are returned to Nigeria by immigration authorities have effective access to reintegration support? Does this differ if they are returned alone or as part of a family?

There are a number of national and international agencies involved in reintegration. The National Commission for Refugees Migrants and Internally Displaced Persons (NCFRMI) an agency of the Federal Government among other mandates supports returnees with counselling, skills acquisition and reintegration. The IOM also supports reintegration efforts for returnees while the NAPTIP (for trafficked persons) does the same specifically for returnees who have been victims of trafficking. However there are no special measures in place to ensure children with disabilities can access this support. Although the National Child Rights Act states that children are entitled to a number of rights children with disabilities may be unable to access these. The Child’s Rights Act talks in section 13 about the right to health and section 15, the right to education however it really doesn't recognize there might be children with special needs and that need to be accommodated within this. So even though you say there’s a Child Rights Act and you have a right to free universal education, it doesn’t demand or require that there should be special measures in place to accommodate children with
varied disabilities. So on the surface, the rights is there, but we know they are not able to access it if there is no special accommodation.

The Disability Act also establishes a National Commission on disability charged specifically with the responsibility of ensuring the inclusion and welfare of persons with disabilities as enshrined in the Rights of Persons with Disabilities Law in Nigeria. With the Commission taking off in 2020, it is not yet known how engaged with reintegration for Persons with Disabilities this Agency will be.

If there are no legal or policy measures to address this situation, what would happen to these children and young people?

Children with Disabilities who are returned in these circumstances, will experience extreme difficulty as there is no mechanism in place for their support or reintegration. They may be forced to go back to family members or inappropriate situations from which they may have fled or end up in places that leave them vulnerable and exposed. There are also very limited services which are appropriate for persons with disabilities which will create additional hardship especially for a child. Such as accessing appropriate education, health services and functional social/support services.

Are you aware of attempts by the State to monitor the number and situation of returnees to Nigeria?

The government does this through the National Commission for Refugees Migrants and Internally Displaced Persons (NCFRMI) and NAPTIP.

Implementation of law and policy

The Act stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible and usable for people with disabilities. No transitional period was stipulated for the remaining provisions of the Act. What has been the progress in implementing the legislation? What are the challenges?

Since the passage of the disability Act in 2019, nine states in the Federation have enacted disability laws to safeguard the rights of persons with disabilities to varying degrees of implementation. The most significant improvement in implementing the law has been seen in areas around accessibility aid such as ramps in public and private institutions. With respect to the other provisions, there has not been significant progress and can be attributed to a number of factors.

If there has been limited progress, why is this? What factors are involved? For example: discrimination, lack of political will, corruption? What are the implications for persons with disabilities?

A number of factors are responsible for this at the Federal and state level; Limited awareness of the law, low knowledge and capacity of designated Ministries, Departments and Agencies, insufficient or no budget allocation, little political will and lack of an effective monitoring system. Most of the studies on access to public infrastructure has been conducted by civil society organisations.

How many disability discrimination cases have been taken through the court? And how have the courts responded? How long does it take to get a case through the courts?
There have been a handful of cases related to discrimination based on disability brought before the Courts in Nigeria yet there has been no landmark decision. The reasons for the very low number of cases; include lack of access to information for PWDs, lack of legal representation, distrust for the legal system, court infrastructure and processes that do not accommodate the needs of persons with disabilities amongst others.

The Act has not been implemented in every State? Why? How will this affect persons with disabilities, and children and young people with disabilities in particular?

Since the passage of the disability Act in 2019, nine states of the Federation have enacted disability laws to safeguard the rights of persons with disabilities to varying degrees of implementation. For states that have not enacted it, persons with disabilities continue to experience discrimination, exclusion and the lack of functional services thereby increasing the hardship they face.

What mechanisms are in place to monitor and evaluate implementation of the Act, and for training and awareness raising of state personnel? If none, what are the implications?

The National Disability Commission which took off in 2020 has a key role to play in this regard. However Civil Society Organisations have led the sensitisation of the Act and have conducted training for various government agencies such as the National Orientation Agency.

To what extent are persons with disabilities engaged and included by the State in designing and planning interventions? What are the implications for persons with disabilities, and children and young people with disabilities in particular?

Very little inclusion of PWDs is done in designing and planning interventions. In fact not a lot of interventions have focused on PWDs hence the limited engagement. However even in instances where there have been, the participation of PWDs is limited in terms of their access to the process and participation in the process. The implications of this is that products and services are designed without the input of the key user. There is also the tendency to take persons with disabilities as an homogenous group there by the peculiar needs of the various disabilities may not be catered to. It also continues to reinforce the exclusion and discrimination they face.

Child protection

What support is available if a child with disabilities experienced abuse, went missing or was abandoned by their families?

There is no mechanism created at the National or state levels specially to respond to abuse of CWD or in charge of protection issues. The Child Rights Act is applicable to all children however some states have women affairs departments.

What alternative care is available for disabled children who cannot live with their family? And is it accessible and adequate for children with different disabilities?

The most common type of alternative care system available in Nigeria is the informal one. This is where children live with extended family or people who they are not related to. This is mostly children coming from the villages and the rural communities, and they send them into the cities and towns to live with people either related to them or not related to them. The idea is supposed to be in exchange for an education, like a person in the city providing them an education, and they have to do the
house chores, take care of the home in that sense. So fetch water, wash, do all those things. And that’s the most popular form of alternative care arrangement. Although there are some formal ones, but they’re not all run by the government. We don’t have many government-run alternative systems. We have a lot of them being funded by religious organizations, private individuals, and non-governmental organizations. And as you can imagine, the fact that they’re being mainly funded or supported by private donations means a lot of times they’re not even very adequate to cater to children without disabilities. So it becomes much more difficult for them to be able to support children with disabilities. They may accept the children but being able to support children with disabilities based on their needs, it becomes harder. Even though there are some, I can think of the home for the blind or the school for the handicapped. Many are supported by churches or private individuals. And the funding is not consistent. They try their utmost best, but even at the home for the blind, which is specific to children with visual impairment, they still cannot 100% cater to their needs because they are restricted by funds. So the children get as much as they can get in the situation but there are very little of those types of places. The most commonly found is the informal one where you just live with somebody.

And the informal care arrangements, do they exist in the same way for children with disabilities? So if you’re saying that children will go and stay with extended family in the city and in return, they would do chores etc, is that for children generally?

So that’s for children generally. It’s not very common with children with disabilities because they are seen as a burden. So if you’re going to send a child from the village to come and stay with me in Lagos, and I’m going to send that child to school, the child must be able to help me with work. You’re not going to send a child that is physically challenged because the child probably cannot do much. And it has an impact on the type of school they can go to. Most people that have this type of arrangement just send the children to government schools which are the public-funded schools which cannot even cater to regular children, never mind children with disabilities. So the most prevalent form of disability where this arrangement occurs is with children with intellectual disabilities. And mostly, they are used for house chores. So they probably are not going to school because their parent as they may have made very little academic progress. For example they may have been in the same class for a number of years. So they send them to the city to be used for chores. So people who engage in this sort of arrangement don’t feel obliged to send the child to school because the child has been termed one that is unable to learn? So they just put them in their houses or store to work. They leave them to take care of their store, to make sure nobody comes into their store, they can count on them to give the right amount of change back and all those little things. But they don’t think they’re worth sending them to school. If you compare it to visually impaired children and children with physical disabilities, you find that it’s children with intellectual disabilities that are used in this way in most alternative care situations.

In the UK, for example, if that was happening, then there would be some concern around child exploitation. Do those situations get treated through a child exploitation lens?

These cases don’t get treated through a child exploitation lens. Typically, the government doesn’t come into this. The only time you probably have reports being made is if there are concerned neighbors who see something and speak up. If it’s just a situation where you’re not sending a child to school or the child is just doing chores at home, that doesn’t trigger anything. But what probably triggers something is if there’s a lot of violence against the child. And that, also depends on your neighbors if they are people who see that as abuse. So sometimes, you have instances where people are report child neglect to the police and say, "this child is sleeping outside," and, "this child is being beaten too much. This child is not given food." It’s those types of instances that might trigger people coming forth saying, "this is wrong, and something has to be done." But if it’s just the minimum of the child doing the chores, and the child is at home, it’s still exploitation, but they do not see that as
violence, then everybody's fine. In fact, some people interpret it like they're helping the child. And the problem is because all this is undocumented. There's no record that the child has come from this particular town and is now here. The child is slipping through the cracks. No one is looking out for them and nobody is accountable if anything happen to them.

Could you perhaps just kind of describe what might happen typically if a neighbor did go and report the abuse of a child with disabilities. What kind of response would you typically see?

The reporting is also dependent on the level of knowledge of the person making the report. They'll probably just, say, go to the police station and make the report. And it's also dependent on who they reach at the police station. A lot of times, what happens is the police go in and arrest the adult who is responsible for this child. But we've seen instances where these cases don't even go to court, or they get settled, or the child doesn't get taken away from them because the adult ends up begging saying, "oh, you know what? I'm just helping their parents by taking them off them," or, "taking care of the child is also very burdensome for me." And I mean, you find a lot begging, and then they allow the child to go back to the home. It's in very rare cases, and maybe cases that come on social media or have been taken on by an NGO, do you actually see the social welfare department going in and taking the child. The honest truth is I think the conflict is, sometimes, when you take the child, what do you do? Does the government have the capacity to take in the child into the very limited number of homes? Or is it just a case of sending the child back to the village where their parents are? So that conflict, that tension ends up being there. And then, that's why a lot of times, you really don't see anything happening or these cases progressing. And this is dependent also on where in Nigeria you are, which specific state in Nigeria. In the smaller states the knowledge level even amongst the social welfare departments is quite low. So even within Nigeria, there are differences.

What happens to children with disabilities in alternative care arrangements when they turn 18?

A lot of these formal arrangements are provided by private donations. So it really doesn't matter. What they just try to do is ensure that you've gotten an education by that time, and then maybe you can learn a skill. You find that when you visit the homes, kids who grew up in the homes still come around. They sort of are just part of the family permanently. In fact, some of them have been educated. Some of them are working. But because that's the only home they've known, they just still come back and live there. They're still around. So they don't get thrown out in that sense when they turn 18. They're still very much-- and that again is probably because it's not being provided by the government.

Education

Can you comment on the impact segregated education has on children and young people with disabilities?

I remember in my last role where I was supporting the UK Aid or DFID funded project on girl education and we had an expert visit us. One of our partners was speaking about a girl with a disability and that through the project they had been able to link her up to a school for children with disabilities where she could get the education. And the British lady, the consultant was so horrified and said, "She should be included her the general school system." I know that should be the ideal however the real truth is in Nigeria, having children in conventional, regular schools, the teachers are not trained to be able to cater to everybody. The teachers cannot even deal with slow learners in their class. There is little understanding of the concept that not every child is at the same level and
being able to teach accordingly. So stretching them to now accommodate a child with intellectual
disabilities, or with a visual impairment, or a hearing impairment, it is not going to work. In
government schools, it certainly will not work. In private schools, they might try, but the child will
probably not get the best education. And because of that, that's why when people talk about
segregated education in Nigeria, they speak about it in a positive way. Because you have very few
teachers that have been trained in that way. This segregation leads to stigmatization however if
they’re going to get any level of education, they’re better off getting it that way. So maybe we have
to think of other ways children with disabilities can be included.

Because you see the government isn’t going to pour more money in the publicly-funded schools.
There are some schools with over 2,000 students. How can 2,000 students come into a school in a
day? And what they then do is, and this even goes on to high school, Is you have some kids coming in
the morning and some in the afternoon. So where other kids in other countries or other states are
learning for 8 hours, you have kids learning for only 4 hours. And these are even children without
disabilities. They are supposed to be “quick learners”. And so, put into the mix a child that is
struggling. The child will not learn anything. I know it’s not the best, but in the situation we have,
that’s really all there is.- Also these schools are really few so it’s not like these schools are even open
to everybody. Probably you have to be in Lagos or if there is a school supported by church. And the
most common type of schools, or things like education institutions, are supported by corporate
organizations or the churches have schools for children with intellectual disabilities. Someone else
had a theory that it’s also because you have children of the rich who have these challenges
(Intellectual disabilities). So you have banks and corporate institutions coming up to support as
opposed to children that are visually impaired or children with hearing impairments or other
difficulties. So you find the biggest support for children with this type of impairment. There are even
private schools. They are really expensive, but the parents can afford them or it’s easy for them to get
banks and corporate to fund it.

It would be helpful to understand a bit more about some of the negative impacts. Because you
touched on it, stigma. Did you want to expand on that at all?

In Nigeria, there’s a lot of stigmatization around things of mental health or people having intellectual
challenges. And this is influenced, really, by culture, and religion, and tradition. So when you have
people who have a form of disability, it’s easy to stigmatize them as if they’re not “full human beings
or they’re not complete”. They’re different local words to capture that. And then, it might not really
be that obvious when a child is in primary school. But as the child grows he/she is still struggling to
interact. You find people labeling them using the discriminatory words, especially children with
intellectual disabilities like, "that child can’t learn anything." I know there have been one or two
schools where they’ve tried to integrate. And even in private schools, I’ve heard cases where parents
come to complain. And this happened even in my daughter’s daycare where we had a girl-- I think
she was about four, and we had a girl who was-- she had some intellectual disability challenges.
Some parents were not comfortable having their kids in the same class. These kids were only four
years old.

So imagine, even when schools try inclusive classes, some parents still don’t want it, and
stigmatization happens. And that was even in a private daycare, not even in a government
institution.

Segregated schools can actually be labeled as a school that teaches children that are disabled. And
so, people don’t want to associate with it. So even for example, if you have a child who had a slight
intellectual disability, and they can get supported, their parents don’t want them to go there because
of the way the school has been labeled.
Some sources state that many children with disabilities are sent to boarding schools. Is there a link between these schools and institutionalisation?

No. So the boarding schools that support or provide education for children with disabilities, and I can just think of school for the deaf in Abuja, and all those things. It's not that. It's just really about going to get an education. But the problem is because these schools are not many, so, you have parents--for example, who live in Kaduna, Kano, other towns, and they know the school for the deaf in Abuja is the only school that can cater for their child. So they have to put their child in that school because they can't travel from Kaduna everyday for schooling. So it's actually a regular school. Your parents are still responsible for you. You just go there to get an education. It's really because of the distance that they travel.

Do you know how children are treated in these schools?

We thought everything was going on fine, until I think two years ago, when there was a big case of a boy who had just been at the school for the deaf for one term. I think he had spent about six weeks there, and went home for the mid-term break and he opened up to his grand mum of how he had been sodomized. I mean, he couldn't even use the words or describe it because he was 6. And that was really a time when the government started an investigation into this school because other than that, everybody almost praised the schools before for being able to admit these children, where they get an education. But then we now start hearing over the last year that they were actually exploiting even the girls, bringing men for them to sleep with, and all these things. It was that case that made the government more aware about what was going in these schools. And I know from then when they started doing a lot of investigations, and that's when things started coming up. But then it also shows, really, that there was really no government oversight because--even the teachers were seen as people helping, so you really don't investigate them so much. Don't hold them to too much accountability because they're helping.

Do you know of any evidence of how children are treated in these schools?

Segregated schools increase the risk of abuse a lot. A lot. Especially the ones that are boarding the risk is heightened. And typically, children won't talk about it once they're out. Because for them, that community is one that accepts them, right, with their disability, so, even when they go back home they don't talk about it. After the abuse case, they started speaking to kids that were in older classes, and they're saying to them it's normal or they just thought it was something they had to do. They had to do being in that community where at least you could have people communicating with you in a language you understand. You could have people that understood you as opposed to when they're at home. So it was so sad that they just accepted it. I said I was so sad that the children just accepted is what they had to do to be part of that community. A wider issue—was also a lot of abuse going on between the students. And this is also because unlike your typical secondary school where you have kids between the ages of 11 and 17, for the schools for children with disabilities, you have a lot of older kids entering. So for example, you have maybe a child that is born blind, one typically starts primary one at six. They might have been home until they're eight or something before starting. So you have older kids in that school. So for example, instead of a child of 11 to go into form one, you might find there are kids already 15 maybe because their parents tried to take them to regular school before and then it just was not working. So you have mixed ages. You have some people that are a lot older, and then you have instances like that boy who was just a 6 year old. And so, I think the fact that you have students at different ages, students have been exposed to different traumatic experiences coming in and being all in that community. So you have a boy that is 17 in the same class with a boy that is 10. It just creates that space for that abuse to happen. And they also have the abuse that were caused by the staff. And this isn't just sexual abuse. A lot of physical abuse. A lot of using the children
for house chores. Because no one is going to report. The parents have entrusted them into your hands because they can’t sort of care of them at home, and they are providing them the kind of education they need. So you see the abuse between students and even from staff.

Institutionalisation

Who, why, when and how are individuals institutionalised? Could you please explain about the different types of institutions children and young people may be placed. Do boarding schools differ from other types of institutional facilities for children and young people with disabilities?

So obviously, there are boarding schools and there are regular day schools. And of course, some funded by government, some funded by private institutions. The standards are different for the government-funded ones and the private, church, or corporate-funded ones. A lot of them are for specific disabilities. So you find school for the blind, school for the handicapped. The ones that is becoming a lot more popular are schools for kids with intellectual disabilities. But most are run by private funders. So some are just schools, you just go get an education. But some of them are actually homes. So the children live there, go to school. Some are not boarding schools. They are like homes where the children live, get an education on the same grounds, and just come back to their rooms or whatever here. So those are the different types of institutions.

And those homes, do you have them for children and young people with every different type of impairment or disability?

No. Most of them are specialized. And the most popular ones are for the handicapped and the blind. And then, the upcoming, children with intellectual disabilities. But you have some that are mixed, but it’s harder when they are mixed because they’re not able to adequately cater to their needs. Another big piece is actually just regular orphanages and homes. So they are not specific to children with disabilities, but a large number of children with disabilities are in these homes. This is because a lot of them—especially when they are born with disabilities at birth are dropped off by their parents or families who’ve abandoned them. So these homes take them, but they are actually not specialist homes.

What profile of children and young people with disabilities is more likely to be institutionalised? Why? Does it make a difference what type of impairment is involved? What other factors are relevant? What about returnees? What about street children/victims of trafficking, other exploitation?

I think the most prevalent type, and this is just even thinking from my engagement at work, or just visiting homes just my family and myself, is the children with intellectual disabilities and chronic mental health conditions. And that’s because there’s a very low level of education and there’s also a lot of cultural, traditional, religion stigmatization. And then, the fact that they are really no facilities to support system. When people have children with this challenge, it’s like they want nothing to do with them. So you find a higher rate of abandonment for those children. There has been a mind shift in terms of physical disability. While with intellectual disability, is still so very low education, and where people are just like, "I don't know what to do with this child." So you find a high rate of abandonment.

What are conditions like for children and young people with disabilities who are institutionalised? Is there evidence of ill-treatment or neglect? Does this depend on the type of institution (state or non-state) (type of impairment), or other factors?
It largely depends on the type of institution. So even for the private institutions, there are different levels. There are the types that set up in a proper way, accountable to the government, have the funding. But then you also have people who set up these institutions just for sinister purposes to have access to children, to be able to trade children, to be able to use children for house chores, and all those types of things, and there's really no accountability. So for example, if a bank is going to set up that kind of home, they've probably got the government on board, they probably have government officials there at the launch of the home. So you have that level of government involvement. But when you just have people just doing sinister things, and they just say, We care for children. There have been newspaper reports where they'll report about orphanages that are not even registered. You don't even have the license but then you find 50 children there. You have all those type of things happening. So in those type of homes, they're outside the purview of the government, and a lot of abuse and exploitation go on. And people are not going to respond because people are like, "Yeah. We know these children are abandoned. We can't take care of them. So if we someone that is willing to take care of them, that's fine. We just maybe, once in a while, give them some money. Well, it takes the children away, we don't have to feel bad." But then in those type of institution, you find a lot of exploitation, a lot of abuse, a lot of neglect. And it might also be because they are low on funds so they start doing all sorts of things. And they have to cut corners and all those things.

And then, you have some that have been established 20, 30 years ago by a church or by individuals, but then they don't have as much as access to funds again. And so, they're basically just running on the last wheel. But they keep going. But of course, in those kind of homes, it gives the opportunity for abuse first of all because you can't even employ the adequate number of staff. And you need everyone's eyes on the ground. But then, if the funds are only able to employ two staff and you have 50 children, how are you going to do it? Even if you have good intentions, you're just not going to be able to deliver what you should.

Are the human rights of children and young people with disabilities in institutions protected? State/non-state institutions? What monitoring takes place? Does the state act to address ill-treatment etc?

Even within the state institution, you find that a lot of investigations are triggered by a tip-off as opposed to regular monitoring that is supposed to happen periodically. So even if they have plans to do that, the monitoring team does not do it. Nobody checks that. Nobody raises an alarm like, "You have not come for inspection in six months, in eight months. And we don't know what is happening." So most of the investigations, for example, in the school for the hearing impaired, it was when the boy told his grand mum who told his mum. And of course, his mum is a medical doctor working in the government. She was able to raise it. If it was a home where the parents were not educated, we might not have heard anything. And that's when they started investigating. So most of it is actually reactive as opposed to proactive.

**Interview with Betty Abah, Executive Director of CEE-HOPE, 30 July 2021**

Is there a functioning child protection system available for children with disabilities across Nigeria? And if not, please give any reasons why this might be, so factors such as quality, capacity, and monitoring.

I think it's important to note, in general, that Nigeria is not a very child-friendly country for some reason. We've had issues with child witchcraft branding, a lot of discrimination against children, which the authorities haven't made a conscious effort to address and which the rest of the society tends to look away from. And so many of these factors affect the general ways in which we respond.
to the abuse of children. And then even if you raise the alarm about the abuse of children, there is
general indifference in the rest of the society, except when such abuse becomes really, really, gross.
For instance, we're very much interested in child trafficking, children being used as domestic workers,
and so we monitor the trend. So last year there was a major news story about a couple in the
southeastern region of the country who put a nail on the skull of a child, on the head of the child, a
house help, a six or seven-year-old house help. It was just horrible. And I think the entire country was
outraged. Apart from instances like that, we don't tend to pay particular attention to issues of
children's rights, child protection, children's welfare, let alone children with disabilities. Even within
family circles, children with disabilities are discriminated against. It's something that is extremely
prevalent in the country.

Okay, so the question was is there a functioning child protection system available for children with
disabilities across Nigeria? In Nigeria, we don't have a functioning child protection system. We have
different laws, different acts, the Nigerian Child's Rights Act of 2003, which has also been
domesticated by several states across the country, including in Lagos where I live, with the largest
population, with the most active civil society sector, in 2007. But it is not active, it's not functional.
Most of the laws are not implemented. Most of the sections are not implemented. And there is very
little attention to the sections on children with disabilities. And I think that is because on a general
note, laws in Nigeria are not enforced; most of the time they’re not implemented by the state actors.
We have so many laws that at the end of the day, they're just there to beautify the shelves of the
lawmakers or to make them look good in the eyes of the society, in the eyes of the world, especially
when it's a global trend.

And I think, for me, there are three major factors. Number one is low awareness. Majority of the
society are mostly not aware of these developments, of the existence of such laws. They're just
published in the newspapers or in the news media. And then a great percentage of the populace are
not very literate or completely illiterate, and so they cannot even comprehend or access the language
in which these laws are written. The laws are not broken down in the language they understand. And
most of the time, people are generally detached when it comes to anything about government, so
they're not even aware that these are the laws, these are the privileges they have. And then there's a
lack of political will. Majority of the politicians are just there for personal gains or personal
enrichment, so they don't go all the way to ensure that this is done for the good of the society. Just
completely detached. Most are completely detached from the populace. And then a major factor is
corruption, especially with the law enforcement agencies. When cases are reported, the agencies
involved do not take up the case or they are bribed to leave the case, or most of the time they are
bribed, especially if the perpetrator has a higher economic power than the abused. So low
awareness, lack of political will, and corruption, especially with the law enforcement agencies, a
major factor, and I've encountered this on several occasions working on child sexual abuse especially.
So, this applies both to children in general and to children with disabilities. And abuse of rights of
children with disabilities is even worse because those children are discriminated upon even within
their family circles. So, when their rights are abused, the families, most of the time, do not think it's
necessary to take up the enforcement of their rights.

If a child with disabilities did experience abuse, went missing, or was abandoned by their families,
what support would be available?

I think what is done most of the time is that people report it at the police station. And sometimes
they're lucky. The police take up the case and try to look for the missing child, or they put up notices.
And especially with social media now, I think it makes things easier because it's taken up by social
media influencers, and then notices are spread round. And somehow it has worked, with some of the
kidnappers being spotted when pictures of the lost child are all over social media. So social media and then reporting to the police.

If a child with disabilities experienced abuse, could you explain what support or what kind of response there might be then? Could you elaborate on what you said about police corruption preventing a response? So, if there was abuse within the home, for example, of a child with disabilities, what might happen then and what support might be available for that child?

Okay. So, most of the time, it’s reported at the police station, and then most of the time, the police do not go all the way to ensure justice, especially if the family of the abused child is not able to bribe the police. Because you get to a police station to report a case, and then they say you have to bring 1000 naira, 2000 naira; they need to buy pen to be able to write down the report; they need to buy a notebook. I mean, it’s that ridiculous. So, you have to be in a position to give money to the police. Or they say they’re trying to get the person arrested, but there’s no fuel in their vehicle; you have to give them money. It’s that ridiculous. That’s what we face most of the time. And so, what happens is because of the dysfunctionality of the system in terms of the law enforcement agencies and even the ministry. We are supposed to have ministry of welfare, ministry of women’s affairs, but most of the time, they do not really provide the support that is necessary. They say there’s no funding and all of that.

For instance, there was a case of a child with a disability, a 14-year-old girl who was abused. Her mother has mental health issues, the father is dead, and so she stays with her uncle in a nearby state, called Ogun State, which is close to Lagos. So, the uncle reported the abuse to the police; the police did not do anything. I think they put a missing persons notice and after about four days or so, she returned to the house. The police have not been able to arrest the person as we speak, and this happened almost six months ago. It took an Austrian woman in Vienna, who is a girlfriend to the girl’s uncle, to get in touch with us online when the girl’s uncle told her about it. So, we’re trying to rehabilitate the girl. We’re trying to bring her to our shelter so that from our shelter, we’ll put her in a boarding school. From the time this case was reported till now, the police have done nothing. It’s taken the effort of an NGO, of a nonprofit, to bring her to the shelter, to see that she goes through psychosocial counseling, and that she stays in the shelter for the summer holiday activities. So, most of the time, those who intervene are the private organizations.

And if a child with disabilities was abandoned by their families, what support would be available then? Where would they go? Where would they live? Who would look after them? Most of the time, it’s reported to the police station. And then if the police are not able to trace the parents, they talk to the government agencies involved, and then the government agencies get in touch with the Child Protection Network, which is actually very active in Lagos. And then the Child Protection Network tries to put them in shelters and all of that. But the sad aspect of it is that the government should take those children into their shelters in Lagos, and Lagos is supposed to be above average, but most of the shelters are not functional. We run a shelter for women and girls who are abused, and most of the people in the shelter were referred by the Lagos State government, when really the state has all the resources in the world to be able to afford to run several shelters for children, for women, but they do not have a single functional shelter. They do have shelters, but most of the time, most of the year, they’re shut down. They’re not functional because of corruption and because of a lack of political will to funnel more funding to the shelters.

What would happen to a male child?
So, there are juvenile homes for children, especially for boys. To some extent, those ones are functional, so you have boys in those juvenile homes. They are provided by the government, especially by the federal government. It’s an arm of the general prison service.

Do you know how many spaces there are, how children are treated in them?

They’re just like the general juvenile home or prison system in Nigeria. It’s mostly for children in conflict with the law.

Most of the homes for the children with disabilities are run by private organizations. We hardly have a functional home for children with disabilities.

Can you explain a bit more about obstacles for children with disabilities accessing the child protection systems that are provided by the government?

Yes. My general observation is that most of the time the homes for children are not functional. I took a child, a teenager who was sexually abused and became pregnant while working as a house help, to the Government House. They said "No, you have to take her to the anti-trafficking agency, NAPTIP. They will be able to help." They do have a shelter. So, I took her and then they took her into their shelter and decided to prosecute the persons she accused of sexually abusing her, because she’d been in four homes, and in three of them she was sexually abused. At that time, she had no idea who impregnated her, but she was pregnant. After eight weeks, they returned her and said, "No, we can’t keep her anymore." They were not able to prosecute the people and they said, "No. This girl is a liar."

And does this girl have disabilities?

No, she doesn’t have disabilities. I’m just talking about the system in general, the lack of care. The services are not very caring. And so, she was returned to me, and she was very sick. I had to take her to hospital. She took some pints of blood, and she was very malnourished. So, the same applies for children with disabilities. What has been of help is private organizations because government places are not functional and the places that are functional, sometimes they do not take children with disabilities. They say, "No, we do not have specialists to handle this child." We have children who have been turned back from school because the school says, "No, we can no longer take in your child. She is always salivating. She has Down syndrome, so we can’t take in the child. We do not have specialists." So, children with disabilities are the children that face the biggest obstacles.

So, what you’re saying is that the support available from the government is not accessible for any children, let alone children with disabilities?

It’s limited, yes. And yes, children with disabilities have the most obstacles to accessing it.

And you mentioned trafficked children. This girl was trafficked to work as a house help. She spent two months with the government anti-trafficking agency, but she was malnourished because she wasn’t well fed, and then they returned her to me and said, "We can’t keep her anymore. You come take her." I mean, how did they expect me to have the resources? How would the government hand over someone, a minor, to a private individual and say, "We don’t have the resources to keep her anymore"? So, this happens to street children, to trafficked children, to children with disabilities. And then children with disabilities even suffer a higher level of discrimination and lack of access.

So, if the government is relying on support from private organizations, what is the capacity like of these small organizations? Can the private organizations meet the demand? Do they have resources? Do they have enough money?
No, they do not. The government is the one that has the biggest resources, and so it's just ironic that they expect us to do everything, and they do very, very little.

In talking about this, I'm just giving instances from my daily reality and the work I'm doing. For instance, we had a woman who gave birth in one of the coastal communities, a poor community. And this morning my staff are on the way to take her and the children to the shelter because she's stranded. The person who impregnated her beat her up and left and then she gave birth. She almost died giving birth to twins, so we're trying to ensure that she has access to better care and then stays in our shelter for about two months and goes through psychosocial counseling and gets well-fed before she goes back to the village. Now, we went to the government office yesterday, and my staff asked them, "Will you be able to give any financial support towards this?" because we're paying the hospital bill, and it's quite a lot, for a C-section. And the government people say, "No, we cannot. The only thing we can do is make our bus available for you to pick up the lady, and then we can write a letter to the hospital so that they can attend to her." But we're still going to have to pay the hospital and then take care of her for eight weeks. And the government says, "We do not have the resources for that. We can only make our bus available so you can convey them to the shelter." So, this is what we suffer, even in cases concerning children with disabilities.

The government doesn't want to be involved, even though they get a lot of funding from international organizations: EU, UNICEF. They say they use this for training, they use it for monitoring. Then they use it to buy very expensive vehicles, official vehicles. And then, of course, I think part of it is diverted by the officials because corruption is quite a systemic thing here. So, the funds are not well utilized, especially for the interests of these very vulnerable children and their families.

We don't have any sort of welfare system here in Nigeria. So, families are not able to access welfare, and then families with disabilities cannot get any kind of child support for those children. So, people are generally left to their own devices. Sometimes the religious organizations help, sometimes private individuals that are well-to-do, and then sometimes the NGOs. And most of the time, the NGOs are starved of funds themselves, and it's a difficult situation.

What alternative care is available for disabled children who cannot live with their family?

So, the private organizations, religious organizations, and private individuals generally.

From our research, sources suggest that it's very common for children with disabilities to be placed in homes or institutions, so religious homes, or the shelters you've described. Can you comment on why children with disabilities are placed in institutions so regularly by their families?

Okay. Yes. It's largely because of discrimination, even within family circles. We've had families who have children with Downs syndrome, children who are autistic, hiding away those children from the public. They have a room in the house where they put those children, hoping maybe they would die or just to shield them away from the public, from their neighbors and their relatives, because they are embarrassed that they have children with disabilities. Some people think it's because they are cursed, it's because they've committed a sin against God, against the gods, or they are bewitched - that's why they have these children with disabilities - and they give them all kinds of labels. And so, some families who can afford to, place them in institutions, especially in private institutions, just to take them away from the family space, to take them away from the family environment because they're embarrassed that they have that kind of child. They do not want them, and they do not want to kill them, so that they are not accused of murder or so that they will not feel guilty of murder. So, they take them away.
So, it’s all about the stigma, the discrimination from within the family circle, and to reduce the stigma from the world some people take these children to institutions, and then they move house so that in the new location they go to, people see that the children they have are "normal children," in quotes. And then in other cases, children with disabilities are placed in institutions, in homes, away from the prying eyes of the public because they’re embarrassed. So, it’s all about discrimination. It’s all about the discrimination from families and the stigma from the rest of the society.

Now, because people get to notice easily, then some people think they shouldn’t commit murder. The times have changed. But I’ve heard stories from my village for instance, maybe 30, 40, 50 years ago, children who are born with disabilities are killed in the villages. Yes, once they are born, they are killed off. When they notice that they’re not normal children, they’re suffocated, they’re strangulated, they’re killed as babies, because they say, no, this kind of disabled child cannot grow up within the community, it’s a taboo. So, these children are killed. I think that research should be done into this because this is infanticide, someone should have to account for it, and it has to stop. Who knows whether it’s still going on in some communities, because there’s a huge discrimination against children with disabilities? And when persons with disabilities do well, become advocates, become spokesmen and women, the rest of the society pays very keen attention, and then says, "Oh," because they are shocked that someone with disabilities could do well in life. Though the discrimination has reduced to some extent, and we have people with disabilities who have done well - we have blind lawyers, we have athletes, spokesmen and women - I think it is still a major issue. But the biggest challenge is the lack of support from the system.

Can you tell us what happens to young people with disabilities who are living in alternative care facilities when they turn 18?

Oh, that’s extremely difficult. I just can’t imagine it because most of the time they do not go back to their families, they’ve not bonded with their families, and so they’re not used to them. So, I don’t know. I know that in some orphanages that have children with disabilities, they try to ensure that those children access some kind of education, and then they go on to stay in those orphanages because they’re not accepted back with their families and the society is not very friendly to them. Some of them stay and work at the orphanages as staff. Some get married there. I would assume that some of them that are able to get some education, some skill, are allowed to live on their own because they have some skill and they’ve been trained. They’re better off than they were when they were young as a result of the training and the care they receive in those homes. So, I think they’re left to live on their own. But I know that the government is not involved in any way in the welfare of these people and their future.

What impact has COVID had on child protection and child services for young people with disabilities?

Yes, I think it has aggravated things for the parents, for the caregivers, because like the rest of the world, COVID-19 has worsened the economic status of most families in Nigeria. And so, they have very limited access to funding, to resources to be able to care for children and young people with disabilities. We ran a podcast series on the impact of COVID-19 on children a couple of months back and we had a particular series focused on the impact on children with disabilities and their families. We had interviews from experts, and we interviewed a particular mother who has a child with a disability. Her girl has Downs syndrome. She said they do not have the financial resources to be able to access medical care for her daughter. She had depended on individuals to assist her to get drugs and welfare support for her daughter, but those people are also impacted by the economic challenges due to COVID-19, so they are not able to help her or not able to help her as much. Many of those people have lost their jobs, and they’ve lost their sources of livelihood. Their businesses are not.
doing well. And so, she said she was really, really challenged. And she's just one of the millions and millions of single parents who are challenged. So COVID-19 has worsened the situation of children with disabilities and their parents, especially with regards to accessing medical support and all-round welfare support. It's made things extremely difficult for many of them in an unprecedented way.

You talked about the kind of private organizations that are providing support to children with disabilities. Have those private organizations suffered financially?

Yes. Many of them also have had issues with accessing funding. There’s reduced funding for them as well.

Yes, so I presume there's less capacity for those NGOs to support children or families with disabilities?

Yes. I know there's reduced funding generally for NGOs. The British government was supporting so many NGOs working on disability issues but recently they reduced their support significantly to less than 30% or 20%. So, this is going to have a very big effect.

**Written correspondence with Danlami Umaru Basharu, Director of the Anglo-Nigerian Welfare Association for the Blind, 14 August 2021**

**Societal discrimination**

We have seen evidence that children and young people with disabilities experience stigma and discrimination from families and communities. Can you tell us how children and young people with disabilities with different profiles experience this treatment? Are there factors that make children and young people particularly vulnerable?

*There is no doubt that children and young people with disabilities experience stigma and discrimination from families and communities. This is mostly where the family or community is unaware of the circumstances of disability. Many families tend to lock out children with disabilities believing that they do not belong in society. We have heard of children locked away because their parents do not want to be associated with such children. Many children without disabilities who do not understand what disability is about tend to stigmatise these children. In other words, discrimination and stigmatisation are a fact of life for children and young persons with disabilities.*

Are you aware of how children and young people who have been returned to Nigeria to live with extended families, are treated?

*I have not myself heard of any person. But generally, conditions of living in the country are bad enough for persons without disabilities, let alone persons with disabilities. So as we say everyone is trying to seek for “greener pastures”, including persons with disabilities.*

How are family members of persons with disabilities viewed and treated by local communities?

*This would depend on how exposed the community is. If they have been sensitised, they would not have a problem. But many families are not that well aware of disability. Thus, such families have to live with some stigma about their wards with disabilities. Thus, they may be ridiculed or made fun of or laughed at.*
How visible are children and young people with disabilities within the community?

Just like their parents, they also suffer from stigma and discrimination from their peers and adults. They are usually looked down upon by their peers and adults.

What impact do you think any lack of visibility in the community has on stigmatisation, discrimination and state treatment?

Stigmatisation: Children with disabilities view themselves in a poor light. They do not regard themselves as worth anything. They are not valued by others.

Discrimination: Children and younger persons with disabilities are regarded differently from others. Other children do not want to play with them in any way. They shun them in some cases.

State treatment: Despite the State’s best efforts to regard persons with disabilities with some respect through passing laws, it is difficult to get this through the society already steeped in their discriminatory and stigmatising ways.

How has the COVID-19 pandemic impacted upon or aggravated any of the issues you have spoken about?

Obviously, Covid-19 has heightened these various issues discussed. Covid has been a story of poverty compounding the different disabilities in place. There were no support services in place to help parents of children with disabilities.

Exploitation and other types of harm

Sources that we consulted state that child abuse, sexual exploitation, child trafficking, forced marriage, and other abuses related to the internal conflict, are the most common forms of child specific harm in Nigeria. Can you comment on whether children and young people with disabilities are more vulnerable to these types of harm?

Child abuse, sexual exploitation, child trafficking, forced marriage and other abuses abound among persons with disabilities. They are made to encounter these very harmful practices because of their vulnerability.

Do you have any evidence or examples of this?

One example given to me is of a deaf girl who was neglected by her family as a result of which she was made vulnerable to human trafficking. This resulted to her being trafficked to Ghana for prostitution.

Can you give reasons for why this might be?

This can only be explained by the absence of family and community care for the person with disability. The lack of economic support and the consideration that support is only for children of the rich contributes to this kind of thinking. Finally, the lack of awareness among family members and the society in general, the socio-economic situation of the family and also the absence of legislation to protect the rights of persons with disabilities are contributing factors.

Are there factors that may make some groups of children and young people with disabilities more vulnerable to this type of treatment?

Lack of awareness among the society is a contributing factor.
Are children and young people with disabilities vulnerable to exploitation? Do you have any evidence or examples of this?

I remember when I was travelling somewhere and at the motor park, while waiting for the bus to fill up, there came a man with a group of children with mental difficulties allegedly begging on their behalf. I accosted him and asked where he got the children from. Other passengers joined me and before you knew it, he disappeared.

Can you comment on the reasons why?

These people feel that children with disabilities are only a pawn in the hands of people who think they could be exploited in any way. There is no law to guide against their misdeeds.

Are there factors that may make some groups of children and young people with disabilities particularly vulnerable to exploitation?

Children with intellectual disabilities are often fearful of adults and succumb to their whims and caprices. They are not exposed in any way.

We have seen evidence from a few years ago of forcible marriage, constraint, neglect, abandonment and violence (including rape), being committed against children and young people with disabilities by family and other community members.

Forceable marriage, constraint, neglect, abandonment, violence, including rape, are a daily occurrence for children with disabilities, even from family members. Forceable marriage which is a daily occurrence in the northern part of Nigeria, and even in the south, takes place because of the traditions and religious beliefs of the family. Some families in the northern part believe that once a child has a disability, then he is nothing but good for begging as he will bring some economic benefit to the family. A child once told me of his predicament. Being from the northern part, his parents were happy to have him as they felt their woes were over because he came out as a child with disability. Once he was grown, he was given a begging bowl and sent out to the streets. It took the efforts of a good-spirited Nigerian to lend his support to his education. Neglect, abandonment and rape are also a daily occurrence of persons with disabilities. Because of their vulnerability, children and young persons with disabilities are subjected to these harmful practices, particularly rape. These days, where some state governors are banning begging, they are subjecting these children to harmful practices. Some governors have passed laws against rape, i.e. the death penalty, though I do not believe this to be the answer. Parents need to be careful with their children.

Do you know if this type of abuse is still being committed?

These harmful practices are unfortunately still being practiced.

Do you have any recent evidence or examples of this?

We hear of these cases on the radio and in the media.

Are there factors that may make some groups of children and young people with disabilities more vulnerable to this type of treatment?

Some of these children have no option, particularly against adults.
Are you aware of any reasons why parents may be unable or unwilling to protect their child from these types of harm?

Some parents are usually afraid to report these cases even to the authorities for fear of societal thinking.

Other than what you may have mentioned, are there any other ways that COVID-19 pandemic has impacted how children and young people with disabilities are treated by society, or aggravated any of the issues you have spoken about?

Covid has been an added scar on the lives of children and young persons with disabilities.

Legal and policy framework

Does the new legislation (Discrimination against Persons with Disabilities (Prohibition) Act 2018) and related policy, adequately respond to intersectional discrimination faced by children and young people with disabilities? If so, how? Where are there gaps?

The Nigerian National Disability Act is yet to be understood by even those who are expected to implement it. There is a slow level of understanding of the Act itself. I think there is a great effort that must be made to increase the capacity of members of the Commission towards understanding the Act and the policies to be derived therefrom. The Act does not yet respond adequately to issues of intersectional discrimination of women, especially, with disabilities.

If the Act does not target intersectional discrimination, what risks to children and young persons with disabilities arise from legislation that fails to comprehensively address this?

Children and young persons with disabilities suffer from lack of recognition of their rights in the law. The law must ensure that intersecting forms of discrimination against people with disabilities on whatever ground are harmful to persons with disabilities, especially negating their human rights to economic, social and political expression.

Are you aware of any legal or policy measure that would ensure children and young people with disabilities who are returned to Nigeria by immigration authorities have effective access to reintegration support? Does this differ if they are returned alone or as part of a family?

I am not aware of any persons with disabilities that have been returned from the UK, although the National Agency for prevention against Trafficking in Persons reports that very few persons get returned from the UK. The bulk are returned from African countries. They are usually kept in holding centres and taken care of by the government. I can’t tell what happens thereafter.

If there are no legal or policy measures to address this situation, what would happen to these children and young people?

I think this question will best be addressed by the National Agency for Prevention against trafficking in Persons in Abuja.

Are you aware of attempts by the State to monitor the number and situation of returnees to Nigeria?
Again, the NAPTIP will be best to answer these questions.

We understand from Country of Origin Information sources that few legislative and policy initiatives have been taken to protect the lives, health, safety, livelihoods and freedoms of persons with disabilities, since the outbreak of COVID-19. Can you comment on, or give possible reasons for, this (for example discrimination, lack of political will, corruption).

A lot of issues are involved in this. Like you have mentioned lack of political will, corruption and discrimination are factors militating against taking effective action to improve the lives of persons with disabilities.

Implementation of law and policy

The Act stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible and usable for people with disabilities. No transitional period was stipulated for the remaining provisions of the Act. What has been the progress in implementing the legislation? What are the challenges?

A five-year transitional plan is envisaged in the act, but the question is when does it start. Does it start from the passage of the law in 2018 or does it start with the appointment of the Commission? The truth of the matter is that there has been no policy in place to inform companies, buildings and other structural environments what is expected of them.

If there has been limited progress, why is this? What factors are involved? What are the implications for persons with disabilities?

I think what is important is to build the capacity of the Commission as quickly as possible.

How many disability discrimination cases have been taken through the court? And how have the courts responded? How long does it take to get a case through the courts?

From my findings, only two such discrimination cases have gone through the courts, one in Lagos State and the other in Port Harcourt, Rivers State. But they were both ruled out. They were however taken to court before the passage of the law. But even then, I doubt if the courts would have ruled in favour of them considering how very unaware the courts are about disability issues.

The Act has not been implemented in every State? Why? How will this affect persons with disabilities, and children and young people with disabilities in particular?

Unfortunately, the Act has not been implemented in every state. There is only one office of the Commission at the national level. I understand efforts are being made to get zonal offices set up in six states of the federation. Meanwhile, persons with disabilities have to depend for support from their ministries of Women Affairs or Social Development.

What mechanisms are in place to monitor and evaluate implementation of the Act, and for training and awareness raising of state personnel? If none, what are the implications?

Nothing is really happening on that front. We all have to depend on the various ministries of Women Affairs and/or Social Development.
To what extent are persons with disabilities engaged and included by the State in designing and planning interventions? What are the implications for persons with disabilities, and children and young people with disabilities in particular?

*It is not known to what extent persons with disabilities are involved with the various ministries in planning programmes for persons with disabilities, if they are at all.*

To what extent has COVID-19 had an impact on researching and evidencing the treatment of persons with disabilities in Nigeria? What have been the consequences of this on the implementation of legislation and policies affecting persons with disabilities? Or any other consequences?

*Covid-19 has had its impact on the lives of persons with disabilities. Not much work has been done in research on Covid and persons with disabilities.*

**Data Collation**

Sources evidence an historical and current lack of data relating specifically to persons with disabilities and children and young people with disabilities. Why is there a data gap? How does this relate to the visibility of persons with disabilities within society?

*It is true that absence of data has been a great stumbling block in planning anything for persons with disabilities. We have figures ranging from 19 million to about 31 million which is not good enough for planning purposes. The disability community has yet to come together to advocate properly for effective data.*

What are the implications of the data gap for persons with disabilities - for implementation of the Act, policy formation and implementation, and efforts to address discrimination?

*The absence of data is in fact very distressing for persons with disabilities. We do not know how many we are. It is important to advocate seriously so that we get the data gap cleared.*

What information do you have on the current situation with regard to the sources and level of funding and the implementation of the Nigeria Disability Databank?

*No idea.*

Has anything you have mentioned been aggravated or impacted upon by the COVID-19 pandemic?

*Nothing at all.*

**Discrimination by state actors**

Are children and young people with disabilities subject to discrimination, exclusion, humiliation, violence or other actions by the State authorities? What examples can you give?

*Discrimination, exclusion, humiliation, violence or other abuses are daily occurrences on persons with disabilities, even by state authorities. We note the brutalization of a young lawyer during the Covid period, who was brutalized by the police. He was out trying to distribute palliatives to colleagues and was accosted by the police. It does not matter whether you are a person with a disability, the authorities will set upon you.*
Are there regional differences? Between states, rural or urban areas, or territories subject to conflict or insecurity?

*There is not much difference.*

Why do you think there is a lack of information in the public domain on this? For example, does it indicate:

* a low incidence of such behaviours by State actors;  
* It is not the low level of incidence, but the lack of interest by the authorities concerned*

* a lack of visibility of persons/children and young people with disabilities within communities and/or State institutions;  
* There is visibility of persons with disabilities within the communities.*

* a lack of media interest and therefore reporting, a fear of reporting etc;  
* Unfortunately, media coverage of these incidents are few and far between.*

* a combination of factors/other factors?*

Are some groups particularly vulnerable to discrimination, exclusion or violence by state actors, based on their profile?

* I believe there is widespread incidence of violence against deaf persons and persons with physical disability.*

Is there evidence of discrimination towards children and young people with disabilities in the implementation of non-disability specific laws (or policy)?

* Discrimination abounds within the disability community in the sense that they are usually the last to be given things or the last to be accounted for.*

**Protection**

In your experience does the State provide protection to persons/children and young people with disabilities from discriminatory or violent actions by state actors, or support them to seek redress where this has occurred? If yes, how? If not, why is this?

* It is very difficult to know the extent of support given by the police to children and young persons with disabilities, especially where the act is as a result of a state actor.*

Do state actors face consequences for discriminatory or violent actions towards persons/children and young people with disabilities? What is likely to happen to them?

* State actors do not face consequences especially when it is perpetrated by one of their own. A person with a disability is usually very lucky to get his case heard by the authorities.*

The National Commission for Persons with Disabilities appointed in 2020 is empowered to receive complaints of rights violations and support victims to seek legal redress amongst other duties. What challenges does the Commission face in the implementation of its mandate?
The Commission has a handful of staff to deal with these cases. It lacks the capacity and itself needs support.

Do persons with disabilities register complaints against State authorities or report alleged discrimination? What specific barriers do children and young people with disabilities face when registering complaints against State authorities?

Persons with disabilities register complaints. The issue is how effectively the complaints are treated. Like we said, the Commission which is the only one in the country thus far does not have the capacity to handle these complaints. Sometimes, it is better to keep quiet and try to resolve your complaint yourself. The courts or public defenders are even too busy to entertain too many complaints, as reported to me by one public defender in Lagos State.

Access to healthcare

What has been the progress in implementing the health specific rights contained in the Discrimination Against Persons with Disabilities Bill?

I am afraid we are expecting too much from the Disability Commission. The Commission only started functioning this last year with little or no capacity. There is very little on the health component of the Commission’s activities in this regard.

What are the challenges?

The Commission does not have support for the work it is doing. The Commission will need support from external sources.

Are there any barriers that have affected its progress?

I do not know about the politics of the Commission. But nothing can be ruled out.

How has this impacted upon children and young people with disabilities with different profiles?

This will continue to impact on children and young persons with disabilities in the fact that the Commission does not have the capacity to take on their cases.

The World Bank and other sources suggest that there are many barriers for persons with disabilities in accessing health care (such as cost, accessibility, lack of public communications, and stigma). Are there any additional barriers for children and young people with disabilities? Including those with different profiles?

The World Bank has done its findings. But the health service is very difficult for deaf persons in particular with no sign language interpreters, inaccessibility for persons with physical disability and even language interpreters are absent.

The same sources describe gaps in programming such as a lack of early intervention, gaps in budget, poor training etc. Can you comment on, or think of any reasons for, these gaps in programming (for example discrimination, lack of political will, corruption)?

In Nigeria, it is very difficult to separate politics, corruption and discrimination from all these issues.
Do you know of examples of treatment being provided to children and young people without consent? Are some children and young people with disabilities with different profiles particularly vulnerable to this?

*It cannot be far-fetched to say that lack of consent in treatment does not occur for children and young persons with disabilities, or even to persons with disabilities. Parents who themselves are not well aware may not know what to complain about.*

Does the State monitor and review equal access to health treatment for persons with disabilities?

*I am not too sure.*

**Child protection**

Is there a functioning child protection system available for children with disabilities across Nigeria? If not, please give reasons (including any factors such as quality, capacity and monitoring).

*The only law known so far is the Child Rights Act which has not been domesticated by all states in the Country. Different states have their own laws, like the Lagos State Special People’s Law which, in itself, is a complete misnomer. The Act uses terminology that is inappropriate to persons with disabilities, such as “people living with disabilities”. To what extent the law, i.e. the Child Rights Act and the Lagos State Special People’s Law is being applied is not yet known.*

What support is available if a child with disabilities experienced abuse, went missing or was abandoned by their families?

*This has to be reported by the parent to the authorities and God helps if the child can be found, that is if they have not been kidnapped or even killed.*

Are there any obstacles for children with disabilities in accessing this? Including those with different types of disability and other intersecting vulnerabilities such as returnees, street children, trafficked children? Or any reasons the family may not seek support?

*It is very difficult to get any kind of justice for persons with disabilities. Trafficked children tend to get some attention because there are holding centres for them, but how children with disabilities cope in these centres is another question.*

What alternative care is available for disabled children who cannot live with their family? And is it accessible and adequate for children with different disabilities?

*Such children with disabilities that cannot cope at home tend to live in special homes for children with disabilities, like the Leonard Cheshire home for persons with disabilities or the SOS homes and others, which are all private organisations.*

Country of Origin Information sources suggest that it is very common for children with disabilities to be placed in institutions. Can you comment on any possible reasons for this?

*Like I said earlier, the parents are unable to cope with the children, are unable to give him or her the love required or because of the socio-economic situation, they are abandoned to homes.*
What happens to children with disabilities in alternative care arrangements when they turn 18?

*In some homes, the children continued to be kept in. Adoption is a very difficult issue for them. Some form of education is organized where some kind-hearted persons grant them scholarships.*

**Education**

The Child Rights Act provides for free and compulsory education for all children in Nigeria. Yet, despite this legislative provision there is some evidence that children with disabilities do not benefit from it. Can you comment on, or provide reasons, for this implementation gap?

*The Child Rights Act provides for free primary and secondary education and so do other laws like the National Disability Act, the Universal Basic Education Act 2004 and those of Lagos State and other states provide such a law, but the truth of the matter is that there is very little implementation. There are not enough teachers to support the education of children with disabilities.*

Are there regional differences? Between states, rural or urban areas, or territories subject to conflict or insecurity?

*Insecurity is a real problem in Nigeria. From the Boko Haram and Islamic group in West Africa to the proscribed Indigenous People of Biafra, insecurity remains a difficulty in the country. The education system in the country remains more or less the same. The curricula may differ in some respects, but all children learn the same things.*

There are no explicit provisions for free and compulsory education within the Discrimination against Persons with Disabilities (Prohibition) Act 2018. Can you comment on any possible reasons for this omission, and its impact?

*It is wrong to say that there are no explicit provisions in the Disability Act on free primary and secondary education. It is provided for in sections 17-20. What we can say here is its lack of effective implementation.*

Can you comment on the impact segregated education has on children and young people with disabilities?

*Inclusive education provides several benefits for students with disabilities. It enables him or her to read alongside his or her sighted counterparts in the same classroom. He or she can use the same books, whether in Braille, sign language and Easy-Read, along with his or her counterparts. The fear of discrimination, stigmatization and marginalization is no longer there. Each student begins to understand the other. Disability is learnt and understood as a fact of life and nothing to be worried about.*

Some sources state that many children with disabilities are sent to boarding schools. Is there a link between these schools and institutionalisation?

*Yes, children are sent to boarding schools. It is difficult to differentiate between boarding schools and institutionalization here. Institutionalization occurs when the children are forced into the boarding schools and the parents do not make any attempt to visit them or provide for them, which often occurs. These boarding schools abound in all parts of the education system which is a far cry from an inclusive education system.*

Do you know of any evidence of how children are treated in these schools?
One cannot exactly say how children are treated in the schools. But one hopes respectfully, but one cannot rule out the problem of poor treatment in some of the schools. It really depends on the school.

Can you comment on any reasons why families might be inclined to send their children away to these boarding schools, rather than seek education in the community?

These schools are seen as a refuge for some children where parents do not have to worry themselves. There is the problem of the socio-economic situation of the parents. So often, some children even remain in the schools for long periods of time until a parent can come to take him or her.

Institutionalisation

Who, why, when and how are individuals institutionalised? Could you please explain about the different types of institutions children and young people may be placed in. Do boarding schools differ from other types of institutional facilities for children and young people with disabilities?

I think this question has been answered already.

What profile of children and young people with disabilities is more likely to be institutionalised? Why? Does it make a difference what type of impairment is involved? What other factors are relevant? What about returnees? What about street children/victims of trafficking, other exploitation?

It does not matter what the disability the child has; boarding schools are present all over the country.

If a child or young person is held in an institution against their and / or their families’s will, what happens? What protections are available if they want to oppose this? Are there any barriers to accessing these protections?

There is little that can be done if a child is held in a truly institutionalized setting. Like I said the schools are boarding and even the homes run by private organizations. There is no compulsion to stay there. The only problem is that parents themselves are not very responsible for their children or ward.

Can a young adult with disabilities be deprived of their legal capacity? If yes, in what circumstances? Does this happen when they are institutionalised?

Children with disabilities can be deprived of their legal capacity which is unfortunately provided for in the various laws available, even the Constitution of the Federal Republic. It happens whether they are institutionalized or not.

What are conditions like for children and young people with disabilities who are institutionalised? Is there evidence of ill-treatment or neglect? Does this depend on the type of institution (state or non-state) (type of impairment), or other factors?

I would not know about this, but this cannot be ruled out.
Are the human rights of children and young people with disabilities in institutions protected? State/non-state institutions? What monitoring takes place? Does the state act to address ill-treatment etc?

*I would not know about this, because there is no monitoring system in place.*

Are you aware of any measures that have been taken to protect children and young people with disabilities in institutions, alternative care accommodation, and boarding schools during COVID-19 (if remaining open)?

*Most children were sent back home*  

**Interview with David Anyeale, Executive Director, Centre for Citizens with Disabilities (CCD), 26 June 2021**

So the first question- we’ve seen evidence of children and young people with disabilities experiencing stigma and discrimination from families and communities but could you tell us how or give us some examples of how children and young people with disabilities with different types of profiles might experience this treatment and other factors that might make children and young people particularly vulnerable to this type of treatment?

*Yeah. You want me to comment on the evidence of children and young people with disabilities experiencing stigma and discrimination from families?*

*What I can say is we have a background that tends to suggest that children with disabilities are a product of an inherent family background which could be as a result of cultural or religious punishment against their family: either their parents, maternal or paternal. As such society or environment tends to continue from there and by so doing treat these children differently or young people differently in a manner that denies them equal opportunity and they’re discriminated against in the early stage of their life. And most times families of these children and young people with disabilities tend to buy into this narrative that they don’t want the communities to see them or to notice them in order to avoid societal discrimination against the entire family or against those of them that are not or don’t have disability. Even the community where they stay also don’t want to associate with them so that other communities will not treat them negatively by a reason of a member of their community that has disability. So we have somebody— so somebody can say, "I mean on that community by the left where you have that child with disability." So with that kind of description using the child with disability to give a kind of description for a community or a family sometimes, it creates a kind of a evidence that supports the fact that communities still indulge in treating children and young people with disabilities in a different way by against their fundamental human rights.*

That’s so interesting because one of our other questions was how visible or kind of how much children and young people included in everyday life within the community. Are you able to expand upon that or kind of if you’re not seeing them out in normal day life what does this mean?

*Yeah. I said I know of families by reason of absence of medicare, absence of legal framework to protect them, limited access to social services that tend to protect these vulnerable people, and state’s carelessness on protecting children with disabilities they can’t come back to Nigeria wherever*
they may be because of the fear and anxiety. And the fear is genuine because these children will not have access. As I speak to you, next tomorrow, on first of July we are going to make public our study on accessible and inclusive education for persons with disabilities in Abia State in Nigeria where I am currently. And our findings show that the state has no policy on children with disabilities education. The state. That's our research finding.

Yeah. So these are some of the issues that children and young people with disabilities face today. There is no enabling environment for them to participate. The attitude of the community is hostile. They suffer bullying. They are exposed to denial or participation be it education, be it recreation, be it even religious services. Even most religious services do not have a place or competent people that can address their needs. So these are some of the things that sometimes parents of children with disabilities these are some of the things that compel them to keep them at home where there is no access to services. Services that can enhance their equal participation. Sometimes they keep them in their homes.

Yeah. Is that what you mean when you're saying parents keep them at home? Do you mean in Nigeria parents will keep their children at home and not let them outside into the community?

Yes. Yes. In Nigeria parents, they don’t bring them out because of these challenges. Lack of tolerance of children with disability and such. They tend to hide them at home in order to reduce the shame they will suffer from the community.

That’s very interesting. Also, you were talking about why some parents won’t come back to Nigeria from abroad if their children have got disabilities. Are you aware of any examples or kind of how any children who were living abroad and were forcibly returned to Nigeria by the country they were living in and how they were treated by families? Sometimes we understand they have to stay with extended families and we’re just interested to know how those children and young people who have been returned are treated if you’re aware of any such examples

I’ve not interacted with any family that returned home with disability from abroad. I’ve not interacted with anyone but I know of many that are abroad that left Nigeria and they traveled abroad with their children and their children that has disability found abroad very good for them to enhance their life. And because of that, they are able to improve the quality of the life of their children. I know of that. But here in Nigeria there is no enabling environment be it institutional, environmental, or attitudinal, to support children with disabilities in Nigeria. Such support is very scarce if you can find it. Even as I speak to you here in Abia State Nigeria there is no secondary school that provide for deaf children in this state. There is none. There is none here. In a complete state, there is none. So you can imagine what such families will go through in terms of supporting their own. It’s a serious issue here.

No, that's very useful information. Could you speak a little more about how family members of persons with disabilities are viewed and treated by local communities?

They are highly ostracized. This is because of this perception that a child with disability brings bad luck. Sometimes they target the child as a bad omen. As such the community are always hostile to
them. They are always hostile to children and young people with disabilities. It’s a very difficult situation here.

And is that throughout Nigeria?

It is widespread in Nigeria. There is no part of Nigeria that is free from this attitude. There is no part of Nigeria be it in the north, be it in the south. There is no part.

That’s very helpful to know. So we spoke a little bit about how visible children and young people with disabilities are within the community and you said they’re not really. They’re kept at home. The fact that there is this lack of visibility do you think that has an impact on stigma and discrimination and state treatment? The fact that they’re not seen in the community.

Of course. Because they’re not seen in this community those that see them frame negative narratives around them. Because they can’t be able to increase and explore their own abilities the society don’t understand them. As such, they frame them in a negative way and this has continued because state institutions line of action by not providing enabling environment for children and young people with disabilities to participate in the society on equal basis with others.

That’s very useful. Thank you. Has the COVID-19 pandemic impacted upon any of these issues?

Yeah. It has affected all negatively.

In what ways?

In terms of access to care and services, this has diminished among children and young people with disabilities and their families. Due to COVID-19 many families have lost their source of earning and this also affects families of children with disabilities. And with limited support by the state for children and people with disabilities and their families the poverty rate has expanded beyond measure. So the advent of COVID-19 affected the persons with disabilities in a negative way.

Thank you for that. So our next few questions are more about exploitation and other sources of harm and mistreatment. And so we couldn’t really find any sources that address the ways in which disability might make children and young people more vulnerable to child-specific exploitation and other types of harm. And so our first question was sources evidence that child abuse, sexual exploitation, child trafficking, forced marriage, and other abuses related to the internal conflict are the most common forms of child-specific harm in Nigeria. Can you comment on whether or not children and young people with disabilities might be more vulnerable to these types of harm?

Of course. They are vulnerable to exploitation and abuse especially sexual exploitation because they are at home and some of them cannot speak or see and so the chances of exposing them to sexual and other violations may be very high. And families also do not want to be noticed as families that have persons with disabilities. As such most times when these things occur family members do not
report because of these issues of stigma and discrimination. In my organisation, we have a free line and we ask people to make calls or to report such issues. Regrettably, we hardly get response. But while in the community you will hear sometimes these things are happening that nobody talks about it.

Yeah. And so have you had examples of some kind of people reporting it to you so as an organisation you’re aware of examples of it happening? Do you have any examples or evidence of this type of mistreatment?

No, that’s why I said that most people do not report.

Okay. Fine.

Most families do not report.

And are there any factors that might make some groups of children and young people with disabilities even more vulnerable to this type of treatment?

Good. I was saying that due to the quest or struggle to overcome poverty these children or young people with disabilities may expose themselves to environment that may mistreat them. And due to government negligence on their part, by not taking measures to provide social protection for children with disabilities and their families there’s chances of exploitation: be it sexual exploitation or otherwise against young people and people with disabilities.

Thank you. When we were doing our research we found evidence from a few years ago of forceful marriage, constraints or being kept in the home, neglect, abandonment, violence, sexual violence, all being committed against children and young people with disabilities by their families or other community members. So firstly, do you know if this type of abuse is still being committed?

Of course. I know that some of this abuse are being committed but the challenge we have is that family members do not report. In order for you to gather evidence or to provide service or support because they do not-- in most case, even if you want to take it up on your own and you will hear something like, "Oh, leave it. God will take control." So they will abandon it at the middle of the road. Victims hardly come out to complain. Victims hardly come out to seek for redress. As such you will struggle to generate evidence that support the prevalence or the pattern of abuse or exploitation among children.

Other than what you’ve said, are you aware of any reasons why parents or families might be unable or unwilling to protect their child from the types of abuse we’ve described?
Yeah. When the society discriminates against you, when the family has suffered exclusion, when the family are economically challenged they may not be able to come out to challenge such exploitation. So that is it.

Written correspondence with Grace Jerry and Olawunmi Okupe, Executive Director and Program Officer, Gender at Inclusive Friends, 18 August 2021

Societal discrimination

We have seen evidence of children and young people with disabilities experiencing stigma and discrimination from families and communities. Can you tell us with examples how children and young people with disabilities with different profiles (see notes) may experience this treatment?

In instances where societal religions perceive the child’s disability as anger of a god or deity upon them, the child is treated with disdain.

Are there factors that make children and young people particularly vulnerable?

Yes because the child is denied several privileges. In addition to the factors you mentioned, there is;
Family acceptability of the child’s disabilities
Economic empowerment capacity of parents to provide necessary assistive aids or medical attention where necessary
Religious beliefs on why the child is disabled as some society sees disability as devilish or annoyance from a god due to their sin.

Are you aware of how children and young people who have been returned to Nigeria to live with extended families, are treated?

They are treated as failures especially where other children or their peers were able to transform the fortune of their family. It doesn’t matter if such proceeds are illicit or not.

How are family members of persons with disabilities viewed and treated by local communities?

It depends on the society some even use the disability status to call such child. This is more prevalence in Northern Nigeria where you hear krumah meaning Deaf.

How visible are children and young people with disabilities within the community?

Children with disabilities are not visible as most parents are ashamed to be identified with them.

What impact do you think any lack of visibility in the community has on;

Stigmatization:
Often times children with disabilities are hidden away by family for fear of stigmatization by the general society and consequently subject the child to isolation which in itself is also stigmatization and could be traumatizing once the child understands the reason behind his/her isolation.

Discrimination:
*Lack of visibility multiplies the discrimination faced by children with disabilities and sometimes make them miss out of interventions targeted at them.*

State treatment (including legislative and policy efforts to protect PWD and implementation):
*Lack of visibility may make children with disabilities absent from the captured data needed to influence policy change or implementation.*

How has the COVID-19 pandemic impacted upon or aggravated any of the issues you have spoken about?

*Vary badly. The COVID-19 aggravated the stigmatization, discrimination and excluding faced by children with disabilities as they are from mostly poor families where resources are meagre. They are often time left without adequate supervision as their parents, guardians or caregivers has to go out to try to make a living. Some of them are even left to fend for themselves thus exposing them to harm and exploitation.*

**Exploitation and other types of harm**

Sources evidence that child abuse, sexual exploitation, child trafficking, forced marriage, and other abuses related to the internal conflict, are the most common forms of child specific harm in Nigeria. Can you comment on whether or not children with disabilities may be more vulnerable to these types of harm?

Do you have any evidence or examples of this?

*An example of this would be an increase in reported cases of missing children with disabilities.*

Can you give reasons for why this might be?

*This may be because their parents or guardians would want to save themselves and other family members without disabilities first as children with disabilities are often considered better off dead. Some parents or caregivers often deliberately leave children with disabilities behind during conflict so they can die and they will be free from the burden of having to care for them.*

Are there factors that may make some groups of children and young people with disabilities more vulnerable to this type of treatment?

*Yes. Children who need no mobility aids can run for safety once instructed as against those who cannot move without assistance. Also children with disabilities from smaller families may be taken to safety alongside other family members as against those from larger families. Children with disabilities with parents who are informed on disability issues may not experience this as against children of illiterate parents who probably see the child as a curse or punishment from the gods.*
Are children with disabilities vulnerable to exploitation? Yes children with disabilities are vulnerable to exploitation.

Do you have any evidence or examples of this?

An example of this was the reported case of a deaf boy who hawks water and is not educated enough to know the exact amount he is given or change he should return to the buyer. Consumers took advantage of his disability. Another case was the story of a blind girl was raped by a guy who refused to say a word all through the act so she won’t identify him by his voice.

Can you comment on reasons why?

One major reason as in the case of the deaf boy is illiteracy because he would have been able to identify the denomination of cash issued to him and know the difference if any. In the case of the blind girl, it could be because she was left in isolation thus giving the perpetrator leverage.

Are there factors that may make some groups of children and young people with disabilities particularly vulnerable to exploitation?

Some of the factors will be the type of disability of the child, level of reliance on others for support or assistance, illiteracy, location, family background, age, among others.

We have seen evidence from a few years ago of forcible marriage, constraint, neglect, abandonment and violence (including rape), being committed against children and young people with disabilities by family and other community members. Do you know if this type of abuse is still being committed?

Yes it is still been committed.

Do you have any recent evidence or examples of this?

An example is the case of a young girl who was married off to an old man who indicated interest in her. Her family even felt grateful that someone would want to marry her and take her off their hands.

Are there factors that may make some groups of children and young people with disabilities more vulnerable to this type of treatment?

Yes. Some factors are poverty, illiteracy on the part of the parents, the type of impairment the child has.

Are you aware of any reasons why parents may be unable or unwilling to protect their child from these types of harm?

Yes. Financial constraints poverty, illiteracy and cultural beliefs.
Other than what you may have mentioned are there any other ways that COVID-19 pandemic has impacted how children and young people with disabilities are treated by society, or aggravated any of the issues you have spoken about?

*The impact of COVID19 is across board due to absence of governance system.*

**Legal and policy framework**

Does the new legislation and related policy, adequately respond to intersectional discrimination faced by children and young people with disabilities? If so, how? Where are there gaps?

*The Act makes provision on the grounds of ethnicity, place of origin, sex, religion, political opinion, disability etc but does not cover discriminations arising from educational qualification or social status*

If the Act does not target intersectional discrimination, what risks to children and young persons with disabilities arise from legislation that fails to comprehensively address this?

*Acts of violence or exploitation against them may not be enforceable if it doesn’t fall under those covered by the Act.*

Are you aware of any legal or policy measure that would ensure children and young people with disabilities who are returned to Nigeria by immigration authorities have effective access to reintegration support? Does this differ if they are returned alone or as part of a family?

*The Child’s Rights Act provides for all the rights of children in Nigeria and it doesn’t matter if they are returned alone or part of a family. Their rights are guaranteed as citizens of this country. But, they are not implemented in all the states in Nigeria*

If there are no legal or policy measures to address this situation, what would happen to these children and young people?

*Infringements on the rights of children with disabilities are enforceable under the child’s rights Act.*

Are you aware of attempts by the State to monitor the number and situation of returnees to Nigeria?

*At the state levels they can get record of the number of returnee children at the point of entrance like the borders or airport from immigration officers charged with that responsibility.*

We understand from Country of Origin Information sources that few legislative and policy initiatives have been taken to protect the lives, health, safety, livelihoods and freedoms of persons with disabilities, since the outbreak of COVID-19. Can you comment on, or give possible reasons for, this (for example discrimination, lack of political will, corruption)

*Absence of representatives at the decision making table.*
Implementation of law and policy

The Act stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible and usable for people with disabilities. No transitional period was stipulated for the remaining provisions of the Act. What has been the progress in implementing the legislation? What are the challenges?

*Implementation is slow. There is need for sensitization on the provisions of the Act and Advocacy to relevant stakeholders.*

How many disability discrimination cases have been taken through the court? And how have the courts responded? How long does it take to get a case through the courts?

*Some of the disability cases we are aware of are probably still in court as nothing has been heard about judgement and award of damages. This may be brought on by the slow pace of sittings and incessant adjourment. Often times, lack of resources to get legal representation is also a deterrent as well as the fear that the case will drag for too long make people lose interest in litigation.*

The Act has not been implemented in every State? Why? How will this affect persons with disabilities, and children and young people with disabilities in particular?

*The Advocacy might need to be improved to boost the will of the incumbent government to do the needful. The implication of the non implementation of the law in those states will be that persons with disabilities in these states are left without legal backing and will be exposed to discrimination with impunity.*

What mechanisms are in place to monitor and evaluate implementation of the Act, and for training and awareness raising of state personnel? If none, what are the implications?

*None exist at the moment but we can gauge the extent of implementation Putting sanctions and punitive measures in place for erring individuals and organizations, mechanism for reporting cases of discrimination. Where none of these are present, PWDs will still be plagued by discrimination at different levels.*

To what extent are persons with disabilities engaged and included by the State in designing and planning interventions? What are the implications for persons with disabilities, and children and young people with disabilities in particular?

*The percentage of persons with disabilities who are involved in the designing and planning of interventions is very low, and often times those selected are those who are willing to bury their will and the welfare of the PWD community in the will of those who selected them. The implication of this is that PWDs are mostly not appropriately captured in targeting, or that the peculiarities of their needs are not taken into consideration thus making the programs almost useless in the end and the goal defeated as a result.*
To what extent has COVID-19 had an impact on researching and evidencing the treatment of persons with disabilities in Nigeria? What have been the consequences of this on the implementation of legislation and policies affecting persons with disabilities? Or any other consequences?

*Because of the restrictions on movement, most research on PWDs had to be carried out virtually and as a result, the majority of PWDs who have no access to the internet were not captured in most of the research and will not form part of the evidence generated. If there’s a projection of numbers needed to foster the proposition or creation of a policy or any other legal framework, they will not get it right because there was no way of getting to those who formed the larger number of the target group.*

**Data Collation**

Why is there a data gap? How does this relate to the visibility of persons with disabilities within society?

*There is a data gap because most of the questions developed to gather data on disability are not constructed in such a manner that it reflects disability types, breaking it into clusters and descriptions that will enable respondents know where they fall particularly if at all. This is a major gap that needs to be addressed locally through availability of funds.*

What are the implications of the data gap for persons with disabilities - for implementation of the Act, policy formation and implementation, and efforts to address discrimination?

*The data gap will create loop holes in targeting, design and implementation of programs as they will not be painstakingly tailored to meet the needs of all disability types.*

What information do you have on the current situation with regard to the sources and level of funding and the implementation of the Nigeria Disability Databank?

*A lot of discussions are going on between development partners to see how funds can be sourced to boost the activities of the NIDDB who is tasked with the responsibility of gathering data of PWDs to aid organizations and government in their inclusion works.*

Has anything you have mentioned been aggravated or impacted upon by the COVID-19 pandemic?

*Yes. The economic downturn resulting from the pandemic has stunted resources that would have been allocated for data gathering and other areas of interventions.*

**Treatment by State actors: discrimination and protection**

**Discrimination**

Are children and young people with disabilities subject to discrimination, exclusion, humiliation, violence or other actions by the State authorities? What examples can you give?

*Yes absence of inclusive education*
Are there regional differences? Between states, rural or urban areas, or territories subject to conflict or insecurity?

Yes every region has its peculiarity

**Child protection**

Is there a functioning child protection system available for children with disabilities across Nigeria? If not, please give reasons (including any factors such as quality, capacity and monitoring).

*Not all states have such laws where it exist, there is little enforcement and implementation*

**Education**

The Child Rights Act provides for free and compulsory education for all children in Nigeria. Yet, despite this legislative provision there is some evidence that children with disabilities do not benefit from it. Can you comment on, or provide reasons, for this implementation gap? Free education is not enough but standard education.

*Where it is free is not the required education. Also, there is a gap from parents who feel girl children do not need education and some parent’s level of poverty makes them send their children to hawk during school hours and some do not belief in western education*

**Interview with Timothy Ali Yohanna, Researcher and author of 'They call us senseless beggars', 29 May & 18 June 2021**

**Stigma and discrimination from families and communities**

In our desk-based research we have seen evidence of children and young people with disability experiencing stigma and discrimination from families and communities. Can you tell us about this? And are there any factors that make children and young people particularly vulnerable?

*It’s not only communities that discriminate against children with disabilities. People only look at the community part of it, but if you look at societal discrimination, there are about six categories. The first one is community, and then religious institutions, and then traditional institutions, and also government institutions. And others as well. Now, this discrimination is in different patterns. The discrimination against children with a physical disability, for example, is different from discrimination against children with a visual, or hearing, or mental disability. Now, you may connect the different institutions to each of those groups. If you look at the issue of physical disability, they become more vulnerable because of the crisis and situation in the northeast. Children with a visual disability are much more discriminated against because people think this did not happen to them naturally, but it happened because of something they did in their family that caused that. And with that notion, they tend to discriminate against them and make their situation more terrible. And people believe that people who are mentally disabled, especially children, are cursed and that they are a source of a bad luck. So, in this case, it’s the community that directly discriminates against them. Some religious institutions will clearly contribute to discrimination. When people bring children with mental disabilities to them and say,
“Okay. Pray for them. This is the situation they have,” they turn round and say that this child is dedicated to an evil spirit, and he is a curse to a community. An example from my direct experience is from 4 years ago in one of the northern states of Nigeria, when a woman gave birth to a baby with disability and an ‘abnormal’ face and she threw the baby away alleging that the baby is controlled with evil spirits and might end up killing her.

So, you see it’s not only communities that discriminate, but even developmental partners, traditional institutions and religious leaders do that in different patterns. Even government officials discriminate, and they do it to children who either have a visual disability or mental disability. Discrimination towards people with a hearing disability is not very common, but discrimination against people with a visual, mental, and physical disability is intense.

Are you saying that development organisations also discriminate against persons with disabilities?

Yes, for example, if you want to distribute food for 1,000 households, and then you only include maybe 50 or 20 people with disability, that is not inclusion. Inclusion is supposed to be like 25% to 30%, but when you give just 5% or 10% to people with disability, it’s not enough, they are far more than that. And so, for me, what they do is inclusion in theory only. And they only repeat what the state is doing. For example, if they were doing a program about governance or peacebuilding, and it’s a workshop, and out of 60 people there were only two people with disability there, how do you define that? There should be at least ten people with disability. In some instances, there was not a single person living with disability. If it comes to recruitment, you see out of 10 program managers, or out of 100 program managers, you hardly see two people with disability. I would say that, actually, they are not including people with disability.

Do you have experience of additional stigma towards children and young people with disability, related to other issues such as gender identity, class, religion, ethnicity, sexuality, family status, or because they’ve been returned or are homeless or exploited?

Take for example a child with any of the four classes of disability I’ve mentioned, some religious leaders discriminate against them by not allowing them to go into a mosque to pray with others because they feel they are not hygienic, and in some instances, they feel like they might not be able to queue and pray with other people. So sometimes they leave them outside. If you look at Christians, for example, they will pray for people with disability so that they get healed and they keep on exposing them to populations of people and they keep on praying for them. And at the end of the day, they don’t get healed and this becomes a stigma against them. I spoke with two or three people who were taken to prayer houses and unfortunately, they didn’t get healed and then people came back and said, "Well, you were cursed, and then you went to a house for prayers, and even God rejected you." And the person experiences such stigma that it’s better he kills himself.

You can see other examples in relation to marriage. If people with disability want to get married, they tend not to do it in public because they will be stigmatized. People will say "Why are you going to marry a cripple? Why are you going to marry someone who doesn’t have eyes? How is she going to give birth?" That is a common thing. And if two people with disability want to marry each, who takes care of who? The government doesn’t provide any access to things that will enable them to live life like others, so they live with stigma. Even if they want to get married, they feel like they are second-class citizens, and people stigmatize them.

People with vision and hearing disability are ridiculed, mocked, and stigmatized by society through their actions. They don’t consider the condition of the disabled person to make access easier for them, but they make a joke about their inability and prank over it. Why would they make fun of their inability and then neglect them? To me, I consider those actions as discrimination.
Are you aware of how children and young people who have been returned to Nigeria to live with extended families are treated?

It’s not a common thing in northern Nigeria because of the level of education, poverty, and everything. Not many people have gone abroad and come back. But I know of one person who has a visual disability who had the chance to go and study abroad in Niger and Cameroon, and he acquired knowledge and then came back, and he was discriminated against. People said "What is a blind person going to do? How is he going to work? And what will that look like?" So that is the only example, I guess.

There were refugees who, because of the crisis in northern Nigeria, were in refugee camps in Cameroon. I know that when they returned, they have been discriminated against and then treated harshly compared to other people who don’t have a disability. That happened in Adamawa State of Nigeria when they came from the refugee camp in Cameroon to a place called Mubi. They were not only discriminated against, but they were falsely accused of being informants for Boko Haram insurgents because of their disability. Boko Haram don’t kill people with disabilities easily because of their beliefs and teaching about disabled persons. Based on that notion, the community believes or assumes they are informants who spy for Boko Haram. On the other hand, Boko Haram do use some people with disabilities as informants and so people look at all disabled people living in conflict zones as Boko Haram informants.

How are people with disability who’ve been returned to Nigeria from abroad by immigration authorities treated?

Yes, I think that happens a lot in the southern part of the country. I have been talking with some of the state representatives of people with disability. They have an association and at one of the meetings we went to in Abuja three of them said something like that. One said that when they returned, they were tagged as people who were committing fraud abroad. He said, "I was accused of fraud, of duping people, and of being deported, but actually, I wasn’t deported. I decided to come back because my visa expired." Another person was scared to share his information because he was tortured when he came back through the airport. He was not deported, he was doing legal things, he just came back to see his family and because of his disability they accused him of committing fraud when abroad, and of being deported. And he was tortured, and so many kinds of atrocities. And another person also experienced the same thing, and not because of anything they had done, just because they were disabled and coming back from abroad, the authorities wanted to know how they acquired the money to go abroad.

For us in the northern part of the country, most people with disability are not educated, so I can’t recall someone who went abroad and then was discriminated.

How are families of persons with disabilities viewed and treated by local communities?

There are two sides to that. The first is that every religion has a teaching about children living with disabilities. For example, Islam encourages you to help disabled people because you are going to get a reward from God, and in that way, it reduces a little bit the problem of discrimination and stigma against them. And then with Christianity, they believe that if someone is disabled, the right thing to do is to pray and heal the person, even though there’s also teachings in the Holy Book of the Christians that says disabled people should be helped and treated. But much of the problem is in society because people tend to think that maybe the parents did something and that is why they have a child that is disabled. And that’s a very strong notion. And again, the parents themselves sometimes discriminate against their children. Disabled children will not be taken to school but will be taken to a street to beg for money.
So, they turn them into an investment where people may have sympathy and empathy with them and give them a little money, and the parent takes that money every time they come home. So, they deliberately don’t put them in school to get an education to make something of themselves. That is one way that parents contribute to the way the community looks at them. The other way is parents who believe that the children they give birth to who are disabled are cursed and that they will never get rich, they will not get what they want, so they tend to abandon the children, not giving them equal rights with other children. And so, these children struggle on their own because they were abandoned and taught that they cannot be useful in the future.

And the government also looks in a terrible shape because of the Ministry of Women’s Affairs and the Ministry of Youth and Sport who are responsible for the affairs and activities of people with living disability. Unfortunately, you will see they have budgets, but you never see anything that goes to people with disability. For example, those who form a committee as a disabled community to celebrate disability day, the government doesn’t give them money to organize their program even though the money has been approved for that. So, this contributes to discrimination and stigma against people with disability.

How visible are children and young people with disabilities in the community?

Well, especially in northern Nigeria, people with disability are commonly seen on the streets and it’s becoming a point of concern because it’s like they have been abandoned. So, because they’re abandoned, they group on the streets and you don’t see them anywhere other than the streets. For example, in Maiduguri, where I am now, you might see not less than 30 people with disability on the streets when you walk for one kilometre.

Did you say that the only context in which you see people with disability in that area, is if they’re homeless?

Yes. Well, you might not say entirely homeless but indirectly homeless because you see someone on the streets from morning till 9 o’clock, and that’s all he does. And when he goes back home, there is no provision for him - he just relies on begging. In the southern part of the country, you can also see northern people with disabilities on the streets, but people with disability in the southern states, they’re more educated, they rely on doing things for themselves, and so you don’t usually see them on the street begging. But the ones from the northeast, they must be on the street because there is no provision by the government to cushion their challenge, despite the ministry of whatever, whatever the federal government was able to establish, it’s just not working.

If people with disability are only seen begging on the street, do you think that this has an impact on how they are treated?

When people with disability are seen on the street it makes the situation even worse for them. It keeps increasing the level of discrimination and stigmatization against people with disability and gives room to armed groups to recruit them because they think they are abandoned. I’ll give you a specific example: there’s one person with disability in Damaturu. The person was not sent to school and he was always on the street. Instead of begging, he decided to sit close to the government house so that he could sell his newspapers. Some people coming out of the building doubled the money for him instead of buying the newspaper and he was earning money. He didn’t dress well but someone advised him “Why don’t you get good clothes since you’re sitting close to a government building and selling your newspaper? Then people will see you as hygienic and they will buy your paper?” So, he took the advice, he dressed very well, and people kept on buying his paper, seeing his disability and giving him money. Unfortunately, a government official came over to him and said, “Look, you’re on the street. You don’t have anything. Now you’re making money and dressing well. It
means you are working with the armed groups, and they are giving you money." And the guy was arrested, taken to prison and tortured. So, you can see the attitudes towards people with living with disability make the situation worse. They are seen as cursed people, as criminals if they are homeless, as second-class citizens, and nobody there gives them a voice. And when people talk about inclusion, it’s just a theory. It’s not happening. Show me the person that is really, really, really saying that he was included in a program. It’s just words. Nothing is happening.

You have said that when people with disability are visible in the community it’s usually in a negative context, such as begging on the street, and that brings more trouble for them and other people with disability. Could you say more about that?

The more people with disability come out in public, then they live a normal life. But here is my question. What kind of normal life? They are coming out in public because they are begging. You refuse to give them access to education, to hospital, to all these things, like all the other people. You see the argument here? You don’t give them the opportunity to live like ‘normal’ people, but you give them the opportunity to live as ‘abnormal’ people. So, they go onto the street as ‘abnormal’ people. That’s a problem for them, but if they go into public like ‘normal’ people, then it’s a positive effect because they will live like ‘normal’ people. Here is an example. In the state assembly, let’s take for example, Borno State, there’s not one disabled person. How will people with disability be considered ‘normal’? If you look at any organization, you never see a disabled person leading that organization. He is not considered ‘normal’. You’re not giving them the opportunity to live like ‘normal’ people. I know of an example of a person living with disability who says he went to a hospital to see the doctor, they were upstairs, and there was no provision for him to get upstairs, and nobody wanted to carry him there. The doctor said he had no time to come down and check him because he had other things to do. So, if people with disability are not treated like other people, then seeing them on the streets constitutes a big problem. But if you want to change the narrative, give them opportunity like other people, then it will be amazing to see a lot of people with disability living like others in the community.

What impact has COVID-19 had on the visibility of people with disability in the community?

Yes, lots of impact. For example, during the restrictions of movement, as the livelihood of people with disability depends on being on the streets, having to stay at home impacted very, very negatively on them because they couldn’t go out to beg anymore, and nobody came to them and that really affected them. Secondly, because of COVID and social distancing it was difficult for people to access assistance. I know of a person with a visual disability who was alone in an uncompleted apartment, and it was raining. The rain began to enter his room and he was struggling to put a bucket to catch water and he fell into a latrine. I’m glad that later I spoke with him and he was fine. Another person with a physical disability was trying to get to the market to buy foodstuff during the restricted time allowed for this. He was struggling to walk along the street because the government didn’t make provision of a hard shoulder on the high road where people with disability can pass. He was trying to avoid being hit by a vehicle and instead he fell into the gutter at the side of the road. COVID has also had a harsh effect on the livelihood and economic activities of people with disability. For example, businesses like making local caps and other things, unfortunately they were unable to continue with that.

Discrimination, exclusion, humiliation, violence by state authorities

In your experience, are children and young people with disability subject to discrimination, exclusion, humiliation, violence, or other actions by state authorities? And if so, do you have any examples?
Yes, let me give you an example. First and foremost is the design of the institutions, they never consider a person living with a disability at all. It's not part of their plan. So, because it was not part of their plan, if they decide to include these people, then automatically it seems so difficult. I shared an example about a disabled person who was selling his newspaper, and, in the end, he was detained, and there are examples of people with disability who are thought to be witches and so they are abandoned. I know of a woman who gave birth to someone who had a physical disability, and people said the child was going to destroy the family, and they went to throw the child away. And the government doesn't take any actions to ensure that people in these situations are rehabilitated and then given an opportunity to live their life. And there's this notion that armed groups use people with disability as informants. Maybe there were a few cases where this happened and then the government started treating all disabled children and people on the streets as if they were informants.

The government will tell you, "No, we're not discriminating" but, in reality, they are doing it. For example, children with a hearing disability. Will they be in a ‘normal’ school with children and understand? Of course not. But is there sufficient provision in all the schools that were built for people with hearing disability? No. What about visual disability? No. So if these people come out of school because they are not getting what they need, are you not discriminating against them? In the hospital, the person with a disability who is in a wheelchair is supposed to go upstairs to see a doctor. I know of a disabled person who was supposed to write an exam and he was unable to climb the staircase to the examination hall and he was waiting downstairs until the exam finished. Is that not discrimination? So, this is the way I look at it, when you don't make access or provision for people with disability to do the things that they want, its discrimination, in my definition.

When we're talking about state discrimination, are you talking about both in the north and the south, or are you focusing on one area?

Well, I think both, but in the north it's worse.

Okay. But what you've said applies across Nigeria, does it?

Yes, it applies all over.

Are there reasons why it's particularly bad in the north?

Yes, the reason is that the population of persons with disability is higher in the north. And the level of education and then poverty - the gap between the poor and the rich is very wide. Another factor is conflict. The armed groups keep on killing people, shooting them, and disabling them. If you survive the conflict, you become disabled.

In our desk research we found very little information online about state discrimination or state violence against people with disability. Does this mean that it is not happening or that it's not reported?

One key factor is censorship by the government. The government will never allow you to publish things related to discrimination against people with disability because you'll be arrested. They consider the action and treat you as if you're violating a law. They will look at it as if you're trying to tarnish the image of the government. So that is the notion behind it, which means they must close it down. For example, in the year 2020 in Maiduguri, Borno State, a Commissioner of Youth and Sport invited leaders of disabled persons to give them capital for small business as a form of economic empowerment. He then decided to give them an amount that is less than $1 and one of the leaders
rejected it and went on his Facebook page to air his concerns. Because of those publications, the commissioner sent political thugs to his house, broke his car, and beat him up severely. They looked at what he did as tarnishing the government’s image.

Second, the negative things that people with disability do is what the media want to report, but they don’t report things that the government does to people with disability. Third, in the mode of writing, intervention, and implementation of projects, people with disability are being discriminated against. Even in the northeast they will say, "we are going to include people with disability," and then you see they are only 1 out of 100. How do you think they can make an impact? These are things that are not reported. If you do in depth research and speak to people, they give you specific examples of things that were done to them, but because people with disability do not have a voice, you will not find it reported online. That’s the basis of why I wrote that research because I keep hearing what people are saying, and nobody says anything about it.

Are there some groups that are particularly vulnerable to discrimination, exclusion, or violence by state actors, based on their profile?

Yes, I think those with physical disability who live in conflict zones, because they target them as people who give information to the armed groups. Apart from that, I don’t think there’s specific groups that the government is targeting, to the best of my knowledge.

Has there been an increased incidence of police brutality, harassment, or abuse towards children and young people with disabilities because of the COVID-19 pandemic?

Yes there’s been a high increase when the government imposed movement restrictions because of the pandemic. People were only allowed to go out for two hours for example, and because it takes people with disability longer to get to a place it would take others 10 or 15 minutes, they may be late returning home, and then they would be flogged, or pushed aside, causing them injuries. There is no consideration that a disabled person cannot move as fast as another person.

Protection by the state

In your experience, does the state provide protection to people with disability from discrimination or violent actions by other state actors?

Theoretically, yes; in practice, no. They are just treated as any other citizen. So, they get protection under the same general clause as other citizens under the constitution of the country. Because of their disability, either the Ministry of Youth and Sport or Ministry of Women Affairs is responsible for their welfare, not for their protection. The only channel they can send their complaint or report against the state to is the National Human Rights Commission. But the National Human Rights Commission is funded by the federal government. So, I’m wondering, how will you be a judge in your own case and at the same time, how will someone you funded be able to do justice for someone who brought a complaint about you. So, in practice, they do not really have any protection at all. That’s in my own understanding. Sometime in the last two years, during the second administration of our President Muhammadu Buhari, the current president, he created a Ministry of Humanitarian Affairs, where there’s a section or department that takes care of people with disability. But, that particular section only theoretically exists, to the best of my knowledge.

In our research we found that in 2020, two years after the 2018 legislation was brought in, they created the National Commission for Persons with Disabilities, which is supposed to register complaints.
Yes. Register complaints and then take care of the welfare of the persons living with disability. But I don’t think it’s working out.

In practice, as far as you know, have there been cases that have gone through the court where a person with disabilities has registered a complaint against a state authority?

Well, they can register a complaint as a citizen, but they may be given the same treatment as other members of the society. But for them to be given special attention or a special court or maybe a special kind of policy that treats them differently, no, I didn’t see it. The first thing that comes to mind is that if a person living with disability goes to court they will be labelled as a beggar and stigmatised. So, I doubt very much they would go to court, except if they have some economic resources and can make their own way, otherwise, I doubt it very much.

Would there be any support provided for people who want to make a complaint against a state authority?

No, I don’t think there is. Except if a member in the community, just on his own, thinks he wanted to help this person out of sympathy. Otherwise, no law that supports that.

Access to healthcare

What has been the progress in implementing the health-specific rights contained in the 2018 Discrimination Against Persons with Disabilities Act?

There are several issues. I don’t think there is a policy for the government to take care of a percentage of the health care bills for a person living with disability, and no insurance provision. There’s not even provision for them to use their mobility equipment in hospitals and the government doesn’t have a database of how many people are living with disability in the country. So, it’s quite difficult. The policy is outdated and was developed by the government without doing grassroots analysis. They took a top-down approach, just gathered some key people with disabilities in Abuja and other places and held a public hearing. Those people’s experience is far, far, far different from those who are sitting in poverty in the extreme northeast. To me, health care is a major concern. It’s even worse for infants and those who are below the age of 10. For instance, many of the internally displaced persons camps have no functional clinic with drugs. I can mention six or seven IDP camps. There will be a clinic there, there can be staff there, but the best you can get in that clinic is adult drugs, such as paracetamol and other things. If a child comes with some complicated health situation and challenges, the child can die in the hospital and the government will never pay attention to them. So, it’s not working.

What are the reasons for this gap in provision?

Three reasons. To me, one key reason is corruption, using people with disability to extort a lot of money from the government. Because people have sympathy for them based on religion and other things, the government approves provision to be made for them. But corrupt government officials divert money from that ministry and people with disability hardly see 10% of those resources. The second and third reasons are lack of political will and poor institutional structures. So, I would not say that the president is not at all willing to help people with disability. Honestly, he is interested because he passed that bill and I was part of the process. I cannot say state governments are not willing to help people with disability. But I will say that they use those opportunities for their own selfish gain. So, they use this opportunity, when poor institutional structures are in place, to channel the funds to their illicit interests and the things they want to use the money for. For example, if there’s a good
institutional structure they can make someone who is qualified and living with disability head of that ministry. How can you bring an abled person and make them head of a ministry that will be responsible for provision for disabled people? How will the person know their problems? They have never given the position of minister, commissioner or even local government chairman to a person living with disability. I only know of one local government chairman out of about 300, who is living with disability, and he became disabled after his tenure, otherwise they wouldn’t have even given it to him. So, to me, corruption is one, political will is two, poor institutional structure is three. And then the fourth reason is lack of awareness about the rights and the needs of people with disability.

In our desk research there was some information in the public domain that children or young people might be treated in a health-care context without their consent. Do you know about this issue?

I will tell you that 85% of what they do to children is without consent. For example, if a child was born in the camp of an armed group and then liberated by the government or rescued and brought into the custody of the military, so many atrocities happen to those children without consent. Even at the government hospital where, literally, you think they are now saved, so many things go on without their consent.

Doe the state monitor and review equal access to health care treatment for people with disability?

I’ll put the question back to you. Do they have a database to monitor this?

No, the evidence from our desk research shows there is no adequate data collection and there isn’t a functioning database.

No, they are not doing anything, nothing like monitoring. There is nothing like a committee or tools to do that.

Could you say how the COVID-19 pandemic has impacted on health care needs of people with disability or their ability to access health care?

Let me start with the vaccine. I have contact with 50 or so people with disability and none of them told me they have had the vaccine. They can’t even get close to the vaccination centre and there is no effort to go and look for them to make sure they get the vaccine first. The government hasn’t prioritized people with disability. Of course, we know that health structures and so many things are affected because of COVID. But things are even worse for people with disability because even when things were normal, they don’t get attention, and now in this abnormal situation - its discrimination, people with disability are treated like second-class citizens.

Child protection

Is there a functioning child protection system across the country, would you say?

There’s this Child’s Rights Act, which just a few states domesticated, and they refused to completely domesticate it in some states, especially in northern Nigeria. They cannot accept the policy about child marriage for example, because of the cultural issue, and so there is no political will to domesticate the law. It’s even worse for children living with disability because there was no specific provision that could protect them. So, I don’t think there’s any child protection bill that is working. Just patches of NGOs that are trying to see how they can work with that policy.
So, if a child living with disability experienced abuse within the family, or went missing, or they were abandoned by their family, is there a state protection system that would step in and support that child?

Well, there are correctional centres for juveniles, where children below 18 are kept for different kinds of offences. The main aim is to rehabilitate them, but the opposite is happening there. But, for example, if a child is born in an IDP camp and dumped, sometimes the government picks them up and takes them to the Department of Social Affairs, and then they keep them there, but I don’t have details about what happens to them afterwards.

If, for example, a child complains about an atrocity done to him by either his father, uncle, mother, or any of the relatives, the community members will address that child with all sorts of bad names such as: stupid, bastard, infidel etc. Some NGOs get involved and get the parent arrested by the state, and then put them in custody for some time, and then they pay their way out and that’s the end of the story. So, to me, there is no way a child can complain and get justice for what has been done to them.

**Institutionalisation**

What type of institutions are there for children living with disability and who would go to those institutions? Why would they go there?

In the north of Nigeria we have 19 states. To the best of my knowledge, there are only two or three schools for people with disability, for example if they have a sight impairment or hearing impairment, and all their needs can be taken care of in those schools. And so, people would go to those three schools to get special education. They call them special schools. They were quite good in the 1980s but from the ’90s to date there has been no renovation, and no new materials. There is only one centre supported by community members and donors that has produced good students who can speak well and even address the public. I know someone that started there at the age of 5 and now he’s around 35 and he had a very high-quality education. These special schools are dilapidated, they were not taken care of, so now the government has made provision for a percentage of children living with disability to go to normal schools - boarding schools or day schools. But that is not working at the same time.

So, there are religious institutions that make provision for children with disabilities. On the Christian side, one of the renowned people was called T.B. Joshua, who came to the north and made provision for their livelihood, school, and other things. Some children living with disabilities can get into those institutions. Also, many of the churches have small schools for children with disability based on their church rules and guidelines. They educate them and give them health care. On the Muslim side, they send these children to clerics who have home-based religious training facilities. There is no supervision, they don’t even know how the children are doing. Those children in Islamic schools will read from morning until evening and then go out in the night to beg food and bring it back to the cleric, which is more or less child labour. Sometimes, they will get like 150 children and take them to a farm on a paid job; once they deliver, the cleric takes the money.

So, there are three categories of institution: government, which deliberately refuses to renovate the special schools and instead enrols children with disability into regular schools, which is more or less punishment for them. Then on the religious side, some Christian churches give special consideration to people with disabilities, even supplying them with special materials to ease their learning, but in very small numbers based on their church ethics. And then the Muslim community takes those
children into their custody. So, none of these institutions seems to be working appropriately, based on policy, constitution, and guidelines.

In the southern part of the country, I think people with disability do better because the level of education there is good, compared with the north. Even government institutions there take better care of people with disability compared to the northern part of the country. People are more enlightened. Most of them can speak good English. They can write a petition directly, they can go to the media to talk about their challenges, unlike in northern Nigeria.

Exploitation

Are children or young people with disability particularly vulnerable to other forms of harm that exist in society? For example, child abuse, sexual exploitation, trafficking, forced marriage, and abuse that is related to the conflict.

Yes, especially in the northern part of the country. I work with this issue a lot. Just between January to date, I can confirm for you categorically that I had access to about nine children living with disability who were sexually exploited. And why? Because people believe having sex with people with disability will increase their wealth or such kind of things. I interviewed around 100 victims in the northeast of Nigeria who had experienced these violations and spoke to many activists and community mobilisers who had similar encounters with others as well. When they share their story, people don’t believe them. They say, "What do you mean? You are a disabled person, why would an abled person come to you?" and that kind of thing. And because they are vulnerable, they can’t fight on their own, they cannot get away, or they don’t have any defensive mechanism against the perpetrator. So, it does happen, so, so many times.

The state also does a lot of things against children living with disability, especially when they say they are associated with armed groups. Sometimes they just kill them and say they were shot in a battle.

Do you have any information about whether children with disabilities are more vulnerable to being trafficked?

Yeah, but in this case, they are not trafficked for money, but for rituals. I know of three or four children that were trafficked to Niger, and then I think from Niger they went to Libya and other places with them. We had a case where they were trafficked so that they can harvest their organs for rituals. It’s not quite as rampant as it’s supposed to be, but it’s happening.

In our desk research we found some evidence of community involvement in some forms of exploitation of children. Are you aware of any examples that are happening?

Yes, members of communities, religious institutions and, in some instances, family members, were even worse in doing this kind of thing. For example, you will see a family member will arrange for a female child living with disability who is just reaching puberty to be married off for financial gain. And in some instances, if they feel like they’re a liability, they marry them off even if they are a child. They just give them away to someone who is not even a responsible member of society. That is a rampant thing that is happening. In some instances, a group of community members, or especially traditional leaders, will form a kind of committee and say, "Okay, we will try to assist or help people with disability." But they use them, they trade them to make money. When someone wants to see them then they pay a little money to the person living with disability and give them a small amount of food, and then they take the money away again.
Do you think the COVID-19 pandemic has made children or young people with disabilities more vulnerable to exploitation and harm?

Yes, because with the pandemic, it’s even easier to exploit children or young people with disability. When someone gives them less than a dollar, they may feel like they’re helping them, although they were using that situation to exploit them. And because of movement restrictions, they become more vulnerable to men, especially in the internal displacement camps. One thing I discovered was that they were using very limited toilets, so when people with disability go in, a man can follow them and then sexually abuse them, and then nobody knows, and they can’t get away because they can’t dress as quickly as others.

Interview / written correspondence with Theophilus Odaudu, Program Officer (Nigeria), Disability Rights Fund and Disability Rights Advocacy Fund, July 2021

Does the new legislation-related policy adequately respond to intersectional discrimination faced by children, young people with disabilities? And if so, how and where might the gaps be?

So in Nigeria, as it is we recently got the Discrimination Against Persons with Disabilities (Prohibition) Act signed. That’s about two years ago and prior to that there have been several laws that attempt to protect the rights of the child like the Child’s Rights Act that was domesticated in Nigeria and several states have followed suit, about 11 States; and states are yet to domesticate the act at the state level. But this legislation did not address issues of intersectional discrimination against children with disabilities. So surprisingly the legislation on disability, that’s the National Disability Act did not specifically address issues around children with disability and I agree that it is a gap in the legislation. Of course, there are certain provisions that to an extent try to prevent exploitation especially when using persons with disabilities to beg on the streets or using their disability to solicit for alms. Of course, that’s common or that’s more common among children and young persons with disabilities. It’s easier to get a child with disability and have them go to beg on the street and all of that. So that provision of course one can give an extended interpretation to cover children with disability but the act itself did not particularly address any of those provisions to children with disability.

And the Child’s Rights Act also did not adequately capture the needs of children with disability even though it recognised the fact that some children might require special attention or might have special needs and that has to be provided but it’s not too specific on children with disabilities. Another act as well like the Violence Against Persons (Prohibition) Act (VAPPA) also failed to adequately capture that. So there’s a lot of gaps around legislation when it comes to specifics around children and young persons with disabilities.

Thank you. That’s really helpful. Following on from that then given those gaps what risks to young people with disabilities arise from this gap or from these gaps in the various different legislations you’ve described?

So the risk is that a lot of children and young persons with disabilities do not get the needed protection under the law. While every other provision can be broadly interpreted to include children and young persons with disabilities the fact that they’re not specifically referenced or specific provisions are not made for that category of persons makes it difficult to argue for their specific rights. So it leaves a lot of children with disabilities and young persons with disabilities without adequate protection under the law. And it also makes it difficult to create needed awareness about the rights of children with disabilities. It does not provide that platform where one can reference a specific provision that addresses the needs of a child with disability and one has to draw inference
from several pieces of legislation and struggle to make different interpretations in order to make people understand that a child with disability have rights like every other child. So the major risk I see is that lack of adequate protection under the law and bringing all the children under one umbrella means that a lot of them will be neglected or several needs will be left behind.

Thank you. Following on from that, children and young people who are returned to Nigeria by immigration authorities, are you aware of legal or policy measures that would ensure that children and young people in that group would have adequate access to integration support? And would it be different if they were returned as part of a family or returned on their own as we know that some young people and children are returned alone?

So generally, I’m not aware of any structured measures for protection or rehabilitation for persons who are returned to Nigeria. And if the general policies or legislation are dicey then we can imagine what it would be for a child or a young person with disability. There is no structured arrangement for such rehabilitation or measures to integrate returnees into the community or into the family. None of such that I know about, and most times persons are left to their fate when they’re returned and they have to struggle to fit in and find their ways around. So the difference that will make if they return as a family is probably the ease at which such children might be able to fit in because when they come back as a family it’s no longer an individual struggle and the family could more easily find acceptance in the community. It’s different if a child or a young person with disability is returned as an individual. You have to struggle for reintegration first of all into the family or his own immediate relative circle before the issue of reintegrating into society and because already persons with disabilities are already struggling to get along in the society due to various barriers it kind of creates a difficult situation for someone who just returned and is struggling to fit in.

Do you mean more easily than someone on their own or would they face challenges? Because you were saying that there really isn’t support available for people when they return, I wonder if you could expand slightly on this?

So it’s more easy for those returned as a family when compared to an individual. Of course, there are still those challenges. So usually, and I’m trying to be a bit practical about what normally happens, when someone is abroad, the expectation here generally in the community is that the person is doing well and so the expectation also is that when such persons return they’re also supposed to be in the upper class and are supposed to be well-to-do and to also be of help and support to others who are on ground. So when people return in a state that are not able to provide such support it becomes difficult because then they face a lot of stigma and there’s a lot of stereotype around someone who travelled and got returned. Issues around whether they were deported or whatever the situation is. So it’s also not going to be easy for even if you return as a family. But because you are back in a family and the family is a group then it’s easier for them to identify with the community and get absorbed than when you struggle alone as an individual.

Thank you. So my next question was so what would happen to these children and young people?

So as for support from the government there’s really not any much. There’s really not anything on the ground that I’m aware of as way of policy or programs that are specifically designed for children in that category. So it’s going to be a situation of maybe survival of the fittest. It depends on how well and how fast that individual can blend with the society and move along with the trend. So basically persons are left to their fate and to their ability to fully integrate themselves into the society.

Are you aware of any attempts by the state to monitor the number in the situation?
Well, I know that they are supposed to be doing that because we do have a commission for refugees and there’s a commission that’s supposed to be in charge of persons that are returned to Nigeria. They’re supposed to keep that record. But it’s not in the public domain. It’s not something that is generally known or information that’s out there for persons to access. So I do not have any clear knowledge as to if that record is available because in the public domain we are not aware of such record. We are not aware if such matters are being monitored. Of course, when we listen to news sometimes we hear statistics being thrown about, numbers being put out there but there are no indications as to how these are collected or actually see all these numbers. They’re just based on estimates. But generally the issue around data collection and tracking numbers it’s actually a serious issue in Nigeria and on a general note the government is not doing well in that regard. So I don’t expect that there will be anything different in this situation.

Thank you. The next section is looking at the implementation of the law and policy. So we’re kind of interested to know what has been the progress in implementing that legislation given that it was two years or more ago. What’s been the progress and what are the challenges to implementation?

Okay. So the act, yes, the five-year transitional period is for buildings and other facilities and what that means is that the other aspects that do not concern modification of buildings, and vehicles, and other accessibility facilities are supposed to take effect from when that act was signed. However, not so much has been done around implementation. Or better put, not so much has been realized around implementation of the act. So the way the act is structured is that the implementation and enforcement is supposed to be done by the commission which was recently created sometime last year and beyond that there’s no policy, no program yet specified by the government on that. I know that earlier in the year the president in a meeting with members of the commission did commit to implementation and did promise to sign an executive order mandating all government departments to design programs and policies that will implement the act but that has not yet happened. And I know organisations of persons with disabilities, a lot of whom I work with as part of my work with the disability rights fund, are pushing for implementation of various sections of the act and several awareness raising campaigns are being carried out.

However, the major gap, for instance, that can be seen is that the Ministry of Information is mandated by the act to create necessary awareness around the act but nothing has come forth from the Ministry around creating this awareness. And so a lot of people, a lot of organizations, do not know about the act or its provisions or how it consigns them. And because it doesn’t seem to be a priority for the government the awareness process is very slow. And that’s where the commission is supposed to step in to be more rigorous and vocal about the act. Of course, I will say it is doing a little and it has made some effort but that has not yet translated into visible policies or programs that are specific to implementation. And I know you did mention about budget allocation. The only budget allocation worth monitoring will be budget to the commission. There was budget for the commission in the 2021 budget and even though I had several discussions with someone in the commission who has also confirmed that the budget to the commission is very little and may not be able to support them to achieve a lot. But he also said that he has received assurance that the commission will be also considered in the supplementary budget to be submitted later in the year. This conversation was around February and I don’t have any information whether or not that supplementary budget has been submitted or whether the commission was considered in it.

I so much doubt because not even in the news has there been a mention of a supplementary budget that has been sent to the national assembly for consideration. Yeah. So something little was allocated to disability rights through the commission and that’s what’s it’s using for its operation. The commission has had visiting tours to some states where they’re urging some states to try to adopt the legislation or domesticate their own laws. Some states have their own disability laws. Some came about after the act was signed into law. Others came into force even before the national act was signed into law. A lot of this especially those in the latter category are also needing to modify their
laws in line with the act. Some have taken that step like in Plateau State for instance I know that there was a move last year to amend the state law on disability, and the Disability Rights Advocacy Fund supported one of the OPDs to carry out advocacy in that regard. That process was on before COVID-19 and now it's still in progress but most states are yet to enact disability-specific legislation. And that's one direction I see the commission pushing towards. Besides all of this implementation, I will say has, been very minimal because there have also been so many records of rights violations against persons with disabilities that have gone on with rest and it isn't like a lot of the agencies, ministries, and departments are aware of the law and what the rules are in the implementation. Maybe just to add that the five-year transitional period which we have less than three years now there's still no concrete steps. We've not seen any visible measures or policies designed to make existing buildings conform with the provision of the act. Of course new buildings-- currently I know a few that have come up and have had some consideration for accessibility but it's not something that I will say was informed by any policy as a result of the act and it's probably something coming out of a lot of advocacy work done by the various organizations of persons with disabilities as to the need of accessibility in public spaces. So yeah, the process is still on. The push is still on for implementation but not so much is being done yet.

Thank you. That was such a comprehensive answer and I think you covered a number of the other questions in that section. Just to pick up on what you were saying about people asserting their rights and having them not necessarily being able to do that yet under the new act. Are you aware of any disability discrimination cases that have been taken to the court? And if there have been, how has the court responded? How long does it take a case through the court and so on?

So I can speak of one particular case which perhaps is still the only major case and that's a bit tricky also because rather than a person with disability going to court it's the agency that did take the person with disability to court; and now the disability community is considering a civil action on violation of their rights. So late last year, in December to be precise, there was a case of discrimination against a person on a wheelchair at the airport in Abuja. There have been several of such cases especially by carriers in the aviation sector where persons with disabilities are ill-treated or even denied boarding. So in this particular case, someone came and was supposed to board but was denied because he was in a wheelchair. And even though he came with an aide that was supposed to fly with him the airline company said that they have a policy that they don't fly persons with disabilities at night. I do not know why that should happen and we did not see the policy. In the ensuing altercation that followed with him insisting that he has to be flown that night and that he did book his ticket and it was even the company that rescheduled his flight and trying to say he was even discriminated against even though he has bought two business class tickets for himself and the aide that was supposed to fly with him and all of that.

I think he became also agitated and they said he destroyed some of their equipment as a result of that so they decided to take him to court for that particular act. But now the argument from the disability community is that barring all that had happened there was also a violation of his rights and that he was discriminated against and that was also a violation of the Discrimination Against Persons with Disabilities Prohibition Act. So that's still the case in court. So there's going to be a countersuit against the airport authority and the airline about the discrimination he suffered and that's one case that could link up several other cases. I know that the house of representatives had made reference to this particular case recently about two weeks ago while calling on the government to ensure that such cases do not occur again. But besides this particular case, there have been no known cases in the court yet as a result of the rights being violated and this could be attributed to several factors. First, it could be because even among persons with disabilities there need to be a lot of awareness about their rights and about what they can do in the face of violations. Not too many persons with disabilities have this knowledge or know what constitute the violation of their right and steps that they can take in seeking redress.
Another factor could be also that litigation can be expensive and of course, a lot of persons with disabilities may not have the resources to want to engage a lawyer or institute a case and pay all the necessary fees and all of that. So that can also discourage a lot of cases from going to court. And this is where the disability commission can step in and fill a lot of the gaps. This it can do by engaging relevant authorities and departments whenever there is a case of rights violation. With this, people may not have to bear the cost of litigation, especially where redress is got through the intervention of the Commission. A third thing could also be that the judicial system here can be very slow and a case can take years to be concluded. For instance, the case I just mentioned which was instituted in January or late December, not much progress have been made. Proper hearings on the case have not begun up to this point, and the judiciary have been on industrial action for the past two months and all of that. So all of these factors make it difficult for such to happen and I know that there have been suggestions around instituting class action or doing public interest litigation around these issues, that is, compounding some of these violations and bringing them forth in a single suit. That’s one possibility and that’s one thing that I know some groups are looking at, but that’s yet to happen.

Thank you. That's really helpful. You mentioned about disability rights activists' groups continuing to advocate and lobby for implementation of the legislation and so on. To what extent are persons with disabilities and included by the state in designing and planning interventions?

So when you say interventions, is it in the context of the act or interventions generally?

I mean in terms of implementing the act, translating the act to policy and other interventions, are persons with disabilities included in that process?

Well, I would say to an extent because since the commission was inaugurated most issues around disability are first of all referred to the commission especially if it is coming from a government and in that process persons with disabilities are usually involved. I also know that through their various programs supported by various funders, OPDs (organisations of persons with disabilities) in their advocacy work have also established relationships and connections with relevant authorities and that they're also being consulted before certain steps are taken. So, for example, there was a policy that was formulated in 2019 on sexual health rights of persons with disabilities with special focus on women and girls. I am aware that this was designed in full consultation with persons with disabilities and one of the OPDs was involved in the formulation and also when the Federal Ministry of Health was trying to do the cost analysis and projecting the allocation for that particular policy, they also held a session with different disability groups cutting across different sectors to try to get their input. So compared to what was there in the past there is an improvement on consultation of persons with disabilities in designing programs and all of that. What I will still say is that that's not being done in most cases or it's not done as it should be in every program but there is an improvement from what used to be.

Thank you. In relation to the COVID-19 pandemic situation, we understand from the information sources that we've seen that there have been few legislative and policy initiatives to protect lives, health, safety, livelihoods, and freedoms of persons with disabilities since the outbreak of the pandemic. I wonder if you could comment on this at all what the reasons might be for that gap and what the implications might be for persons with disabilities in this context.

Okay. For COVID-19 one thing that came out clear was the fact that persons with disabilities in Nigeria and I guess it’s the situation across many countries in the globe were left behind in terms of policies and programming because a lot of the interventions happened not to be inclusive and in many cases, persons with disabilities were not involved or consulted or carried along. And of course, there were several regulations that were passed to kind of bring relief or help curtail the spread of
the virus and all of that. And only on few occasions, only one that I also remember, did it mention persons with disabilities as needing special or specific kind of intervention. So a lot of this has to do with the fact that it has been the usual practice to design policies and programmes without considering the implication on persons with disabilities. It is not a culture in policy-making or designing in Nigeria to give consideration to persons with disabilities and that thought pattern was carried into the policies, the regulations, and all that were designed in the wake of COVID-19. So you find a situation where after every policy or every regulation persons with disabilities do point out areas of exclusion and make their advocacy points to try to see how such can be retracted or amended or corrected in subsequent policies or regulations to be made.

I guess the gap is, like I said, just as a result of the fact that it has not been a culture— it's not a practice to always consider persons with disabilities in policy formulation or design and that's probably the same thing that was carried into COVID-19 interventions. So even when the government decided to do some humanitarian interventions around COVID-19 providing relief materials to persons especially the vulnerable and the poor in the society there wasn't specific consideration for persons with disabilities until organisations of persons with disabilities decided to regroup and begin to demand for such inclusion that the government began to also consider persons with disability in that light. So a lot has to do with— I don't want to say ignorance. Maybe negligence is better on the part of the government and those who design policies.

So the sources that we found were saying that basically there's been a sort of historical and current lack of data relating specifically to persons with disabilities and they raised concerns on the effect therefore on the sort of political commitment, the funding, the efficacy, implementation of the recently announced disability databank. So yeah, maybe if you could speak to that data gap and how does this relate to persons with disabilities in society and their visibility within society.

Okay. So the issue around data is a serious one for Nigeria, especially for the disability community. If you do ask persons with disabilities or any group at all to talk about persons with disabilities you will hear different figures about the population of persons with disabilities. While some will tell you 19 million, some will tell you 25. Some will tell you 27. You'll get 30 million. So there's no particular figure. People project based on whatever consideration they are doing. And looking at the Nigerian population then try to get the 15% following the WHO standard and all of that. So that's what usually happens. And this is largely because the data collection process is not usually disaggregated by disability. The last census, for example, was in 2006. I did remember participating in that particular census. And of course, while you can indicate that you are a person with disability, the way the questions are structured also make a lot of persons with disabilities indicate that they are not with a disability. So it has to do with the methodology used in collecting data across the board as a lot of these do not make it easy for persons to be able to identify areas of their disability or for those analysing the data to know that this is referring to a person with disability.

There have been a lot of talks about adopting the Washington Group Methodology in data collection and that's still on. We’re yet to see that happening. Recently, the Disability Rights Fund has provided support to one of its grantees in the country to work around COVID-19 vaccines distribution and trying to get the government to prioritise persons with disability. Whether you have data that's collected of persons that have been vaccinated or those who want to be vaccinated there is no provision for disability-related data in it. And then it, therefore, means the government will also, for instance, not have any data to find out how well persons with disabilities are responding to the vaccine because that information was not provided for. So it's a gap in our data collection system, the data gathering methodology in the country and that's largely responsible for the data gap. There have been talks around disability data bank. I've heard people talk about it. I've heard even from the disability commission saying issues around data we prioritise. But I am also not aware of any concrete steps yet even as a part of the disability community. I don't know of any concrete steps that have been taken to actualise that data bank. It's a good and laudable initiative if well-followed but
we are yet to begin to implement that and that level of data collection is probably still at the planning stage. Well, it’s not a popular program yet in the disability community.

Thank you so much. That’s been really comprehensive. Was there anything else you wanted to add on this section because I feel you’ve answered our questions really thoroughly? But was there anything else you felt you wanted to add around legislation, policy implementation, and data?

Well, maybe just to add that-- for data, like I said, we perhaps are waiting for the national census which was being planned for, but that seems to be on hold now due to the pandemic and more because of the level of insecurity at the moment in the country. So, we are yet to know exactly how persons with disabilities will be included in that particular program. But that was a major point of data collection - the population census where we hope to see the involvement of disaggregated data using The Washington Group questions; and it will redefine how data are gathered in the country. I do not know exactly what will happen. For the legislation, the disability act, several parts of it are also. How to say? There is a link between the act and several existing laws and policies. And even though they are not specifically designed as a result of the act, their implementation is also helping to realise the act. So for instance the commitment of the government at the Global Disability Summit 2018 (GDS18) to do certain things can also be linked to the act and I can see the government is making some effort in that especially around accessible facilities and assistive devices. Several steps have been taken on the reproductive health of patients with disabilities, but not so much around employment or political participation. There have been so much discussion about persons with disabilities especially with the enactment of the law. The fact that there are so many conversations going on disability, and several government officials at different levels even at the highest level have made reference to disability, to disability rights, to the act, and all of that gives some glimpse of hope that as the conversations continue, over time we may begin to see some positive impacts, and the law being implemented if the government gets serious about putting their words into action.

Thank you. Maya, I didn't check with you before. Was there anything else you would want to pick up on or add to?

No, no, Theo, your answers were super detailed and comprehensive. So I’ll look at child protection first. We found very little information about provision and quality of child protection services at all let alone for children with disabilities. And so some of these questions may be slightly broader than some of our other sections. But the first question is, is there a functioning child protection system for children with disabilities across Nigeria? And if not, please give any reasons for why it’s not functioning such as factors like quality, capacity, and monitoring.

So there are no child protection systems for children with disabilities. At least none in the formal sense of it, and a lot of the time children with disabilities, except those protected by the family, do not really have access to any level of protection from the government. We do have some-- you may have organizations and people stepping into perform some certain roles that are akin to protecting the child, like I said in the previous section that to a large extent, issues around disabilities are usually talked about without little action. That’s also the same thing that applies to children with disabilities. So even in terms of policy, you may see a lot of policy around protecting children but nothing specific on children with disability. And then even on a general note, for child protection, there is little implementation of any existing policy. There are different departments that are supposed to play different roles ranging from trafficking, exploitation and all of that, but no disability-specific service. so they sometimes do this on a case by case basis. You’ll sometimes hear of one case that comes up and how the department stepped in to play a certain role and all of that but nothing broad. Nothing that one can easily point to as a structured arrangement to offer any form of protection to children with disabilities.
That's very helpful. So you kind of already answered this but just to make sure I've asked you specifically, so what support would be available if a child with disabilities experienced abuse, perhaps within the family, went missing, or was abandoned by their families?

Yeah. So nothing exists that's different from what's in the general framework and that if there is an abuse there's always the department that one can make reports to. The human rights commission, the agency against trafficking and persons, and then even the Nigerian police, and all of that depending on the nature of the abuse or exploitation or the nature of violence that's been committed against the child. But there is nothing specific for a child with disability. And even on that general note like I've earlier mentioned that of course these instruments or departments or institutions are there but the way they function not too many people access their services and not too many people benefit from what they do.

Thank you. And so again I suppose-- yeah, just to maybe kind of probe slightly further. The services or the structures that you've said that do exist generally what are the obstacles that children with disabilities would have in accessing them? So including perhaps children with different types of disability or intersecting vulnerabilities such as those who have been returned to Nigeria, street children, trafficked children, or any other reasons a family would maybe not seek support.

Yeah. So there are several barriers that might prevent children with disability from accessing services like they have to. One of these has to do with communication barrier especially for persons that use the sign language. A lot of the time when there's abuse whether for children with disability or even adults or young persons with disability who are deaf you always have that issue about how they communicate with the relevant authority and most of the time they're not able to fully express themselves or fully state their case. And sometimes they're not even heard or given the opportunity because it is just generally assumed that they won't be able to communicate fully. So this creates a lot of barriers. The physical environment can also be prohibiting especially for persons on wheelchairs. Accessing some of those buildings and trying to go and file reports that could be an issue. There's also this educational gap because then you need to write your report, you need to be able to state your point, and sometimes the necessary assistance to help people do this are not available. There have been cases of persons with disabilities who are violated. Either being harassed sexually or different kind of abuse and rather than reporting to the authorities the families will sometimes step in and try to do a mediated kind of settlement internally maybe because the perpetrator is a family member or someone who is close or perhaps there has been some offering of monetary benefit to the family in order to forget about the case. And because the persons involved are probably young persons that cannot ordinarily step up to speak for themselves the case ends up dying. So there have been several of such cases that have been in the public in the past and all these combined together do usually serve as a barrier for persons with disabilities to access justice especially for children with disability who in most cases will need to rely on someone to provide necessary support for them in the process.

Thank you. Yeah. That makes sense. So if the child with disabilities could not live with their family is there any alternative care available from the state? And if so, is it accessible and adequate for children with disabilities?

So I will perhaps also ask for some context because when you say a child with disability cannot live with their family could that be as a result of the child deciding not to live with the family or because the family cannot also provide for the child? I need to get some clarity around that.
Yeah. Of course, so I suppose I would give you an example of how it works in the UK. So if, for example, the child has been abused within the family then the government, like a local social services department - so Child Protection Departments - would intervene and they would take the child out of the family and place them in a children's home or with what they call a foster carer. This would also happen if the child or young person is abandoned by the family because the family are not equipped to support the child or because of stigma around children with disabilities. And so, yeah, in the UK, the government provides alternative care for children in this position where family is either unable or unwilling to care for the child or there are safeguarding concerns. Does that make sense?

Yes. Very well. Thank you. So here in Nigeria, we do not have such structure. Of course, there is the department of social development that's supposed to provide such kind of protection to children and even children with disabilities who are in such a situation. They are homeless or they have difficulty living with their families. But the social development also do not have shelters that can accommodate children with disabilities. I know and I've heard of temporary accommodation being provided for persons with disabilities especially women with disability who suffer violence - maybe domestic violence or intimate partner violence and all of that but nothing too specific on children with disability. There's probably one or two centres that existed in the past which I'm not sure if they still do and the level of awareness among persons with disabilities and such existence is very poor. We also have organisations stepping in to provide some of those shelters trying to accommodate children and bring children with disabilities that are on the streets or that do not have a home or cannot live with their families. But in most cases, these are NGOs or individual family charities that do provide such level of protection. So you get more of that than anything from the government.

That makes sense. Thank you. So I'm going to skip the questions around slightly. So one of our questions what happens to children with disabilities in alternative care arrangements when they turn 18 but I suppose if you're saying that there are really no alternative care arrangements then I suppose nothing changes? There's no support available so there's no kind of alternative care arrangements for an 18-year-old to kind of be having to leave. Am I understanding that correctly?

Yes. So formally there are no such alternative arrangements. Like I said, there are one or two homes here and there that you see which are mostly run by charity where you have children with disability being catered for. In most cases, there's really no exit plan for children as they grow older. I think most of the time it depends on when the child is grown and is able to engage in one or two things to fend for himself and even provide support to the home at a later stage then that child can go independently as they go into adulthood. But there are no known structured exit plans for children from homes into the society.

Thank you. So from the research that we did, it suggests that it's very common for children with disabilities to be placed in institutions. So I suppose again it would be helpful to kind of explain what we mean here. So rather than the government looking after children where the family are not able to or they're not willing to, we found that what we're talking about here is when families will send their children to institutions. Can you comment on any possible reasons for this or even kind of flesh out what is happening here? Because it was not very clear from the sources where the differences were between kind of institutions for people perhaps with mental health issues and kind of special schools. Also the reasons why families would send their children to various types of institution?

Yeah. So of course there is a prevalence of such cases here in Nigeria where you have children with disabilities in different institutions and these cut across different sectors. So a lot of people and families do this when a child, especially a child with psychosocial disability, you often see them in psychiatric homes. Somewhere they keep persons and care for them in terms of their psychiatric
needs and all of that. Most of the time they’re institutionalised for care against their will but often families do this to also keep the children away from the family, to keep them away from the public and due to maybe stigma or lack of capacity to provide needed care for these children. And a lot of these institutions, especially for persons with mental health conditions are usually not well looked after and the children there do not also end up getting the care for which they were sent to those homes. A more common form of institutionalisation like you have mentioned can be seen in the special schools and this could be at the primary level or at the secondary level and we have children with disabilities in a lot of these schools across the country. You would find school for the blind, school for the deaf, school for children who have autism and those with cerebral palsy and all of that. And there are different special schools across the country where you have children with disability being institutionalised and some of them are very young children below the age of 10, some 6, and all of that and they are sent to these schools, far away from home in most cases. And I would say that families do this most of the time because, one, there are probably no alternatives, especially at the preliminary levels. Inclusive education is still far from being realised in Nigeria and there are really no schools in the immediate community that can provide the needed educational support to children with disabilities. And so parents who want their children with disabilities to go to school might end up having to send them to some of these special schools where they are kept in boarding homes and then they are attended to. And perhaps I should, before going forward, just say something before I forget. I remember while going through the questions there was something around education and about absence of that in the Discrimination against Persons with Disabilities Act. Something around inclusive education and so on and so forth. So let me quickly state that there is actually a provision in the act from section 17 up to section 20 of the act that deals with education of persons with disabilities. And it did, even though not explicitly, provide for inclusive education and provide for the availability of special teachers in mainstream educational sector that can provide support for children with disabilities. It did mention about integrating sign language and the use of braille and other kinetic modes of communication into the curriculum of schools. So yeah, to an extent others provide for this but, yeah, just like I also said earlier implementation is still far from being realized.

That’s really helpful. Thank you. The next section I was going to ask you about was the institutionalisation section. So we can perhaps go into a bit more detail there. But the last question on child protection other than what you’ve mentioned already are there any ways that COVID-19 might’ve impacted upon the provision and quality of child protection services or aggravated any of the issues you’ve spoken about and have some profiles been impacted more than others?

Yeah. So the thing around COVID-19 is—so there are a couple of information out there and couple of things that I have heard about and because we still have this issue with data like I always say it’s difficult to speak with certainty on some of these issues. But I know that due to the pandemic a lot of children in institutions have to return to their families. Especially in special schools and all of that. And going back to the families where there is no alternative arrangements to provide continuous support to the children just like there was for other children from their various schools and all of that and the various platforms were also not accessible. So a lot of children with disabilities were left behind in terms of their educational needs and other support that were needed. And also the various institutions like for those with psychosocial disabilities, there is actually no record on the prevalence of the pandemic in such institutions but unconfirmed reports have it that to a large extent the children with disabilities in those institutions were prevented from moving around especially those that did not return to their families and access to such children, even to access the level of care that they receive or for people to even come in and provide certain support were highly restricted in some cases, and in others, children were exposed to more risk because the institution depended on outside support to be able to provide care for the children. And so these people need to also come in contact
with the children. And because they're coming from outside this also expose the children to a number of risks.

There is a centre for children with autism here in Abuja where even during the pandemic they did welcome visitors because the visitors bring food items and other essential needs for the children and the children, of course, have to interact with these visitors and this exposes them to risk. While like I said a difficulty in speaking about this is the absence of specific data on perhaps how some of these activities have led to increased cases of COVID-19 among children with disabilities or quantifying the amount of risk that these children were subjected to. Such information is not available.

Thank you. So we found data about institutionalisation on children and young people with disabilities was missing. Information was patchy. It provided a lack of clarity as to the relationship between segregated education, alternative care, and institutionalisation on the grounds of mental health, psychosocial, or intellectual disability. The first question was who, why, and when an individual might be institutionalised? You've already spoken to that a little. Was there anything else you wanted to add to that?

Yeah. So usually, like I said, you have different schools for different disability category: the blind, the deaf, those with autism, persons with cerebral palsy, and we have institutions for persons with psychosocial disabilities. There is a school for persons with intellectual disabilities somewhere in Ibadan (of course, not the only one) and all of these institutions do target children with disabilities. In some cases even young persons with disabilities who probably did not have access to early childhood education. And some of these children are accommodated in a lot of those institutions. And usually, because there is a gap in terms of education for children with disability there is no restriction as to age in most cases for persons to be admitted because by doing that, of course, you also leave out a lot of persons with disabilities who in their adult age try to acquire education. They won't be able to do that. And because there's no adult education for persons with disabilities a lot of them land in the same environment and are institutionalised alongside with the children.

Thanks. So if someone is institutionalised what procedures are followed? So I suppose legally if they are institutionalised in the kind of classical sense. So that is more likely to be because of their mental health, psychosocial or intellectual disabilities. Can you speak to that a little? What kind of framework is used and is there any protection available for someone who would want to oppose their institutionalization? That kind of legal institutionalization.

Yeah. So usually there are supposed to be some documents that legally where the caregiver for the person who is to be institutionalised, will sign indicating their consent and there's usually an arrangement for visiting where the caregivers can come to visit. And even restrictions for the level of care that will be provided. These are usually signed on paper, and where someone is recommended for institutionalisation but the family or anyone wants to oppose it, they're usually allowed to sign an undertaking that they are doing that against professional advice and that they are taking the patient home based on their own conviction and not because the hospital or the institution did advise that. So yes, people are allowed to oppose institutionalisation but that rarely happens, especially in mental health situations where patients are admitted to receive treatment. That is in a typical hospital or psychiatric hospital setting. Families can also choose to want to take their family member away from the institution after signing necessary documents to indicate that that is been done against professional advice. Often, the institutions usually kick hard and will usually want to deploy every move. They always want to have the patient institutionalized even against the will of the patient or against the will of the family. But sometimes or in most cases, the families do prevail and do end up taking their patient out of such facilities if they so desire.
Okay. So there a kind of legal provision for the institution to be able to override the family or the individual if they're opposing?

*Well, usually in most cases the individual is not given that opportunity to make their choice as to what they want. Most of the time the decision is made on their behalf by the family and in most cases the institutions cannot legally override the wishes or the decision of the family but I know that they do deploy a lot of methods, a lot of things to try slow down the process or look for other ways that they can prevent that from happening. But at the end of it, families can still succeed in taking their patient away.*

Okay. So one other question was do families initiate institutionalisation or state actors? And so if it's families as well what factors cause families to seek the institutionalisation of children and young people with disabilities?

*The institutionalization?*

Yeah. Yeah. So, the first part of the question was do families initiate institutionalisation or state actors? And then the second part was when families do initiate it what factors cause families to seek the institutionalisation of young people with disabilities? So, for example, poverty or lack of support facilities in the community, stigma, etc.

Yeah. So of course, sometimes we have families seeking to have their family member institutionalised maybe because the person has been diagnosed to have a mental health condition and because in most cases they feel they don't have the capacity to provide adequate care for this person. They try to take them to institutions where they believe they can be better cared for. A lot of this is because, one, sometimes they feel it is expensive to be able to provide the needed care. Depending on the level of the disability some require round-the-clock support and constant surveillance and all of that and the families may not be in a better position to do that and they sometimes they prefer that they go to institutions where such support can be provided. And maybe I should mention at this point that the disability act for instance did provide in its section on health, that persons with mental health disabilities, are to get free medical attention in all public institutions. This provision is not yet being implemented but I envisage a situation where this will cause an increase in the number of persons to be institutionalised or hospitalised as a result of mental health conditions, because many families don’t take their family members with disabilities to these institutions because they don’t have the needed resources.

Also, many who cannot afford treatment in formal institution end up taking their family members with disabilities needing such care and treatment to other alternative care and healing arrangements. And this leads to a conversation around other forms of institutionalisation besides the formal one like the hospitals and those that are led by NGOs and other organisations. So you have religious centres, you have traditional healing centres and these are spread across the country and here you find persons with disabilities kept in undignified state. A lot of them being shackled as they try to get some kind of healing either spiritually or through traditional forms of medicine and all of that. And that’s also another way that family do resort to if they cannot afford the cost for the formal type of care. And this leads to further violations, and in a way it takes the burden from the family such that they don’t have to provide that daily care for these persons, not minding the deplorable conditions that a lot of these centres are.

That's really interesting. The next question actually was-- one of the next questions was what are the conditions like for children and young people with disabilities who are institutionalised and if there is any evidence of ill-treatment or neglect. And so is there anything you'd like to add on that? Both in formal institutions and perhaps the less formal ones that you already mentioned.
So like I already mentioned there's a lot of rights violations that do go on in these institutions. Even in the formal institutions, we’ve had cases of people being shackled or chained to their bed to prevent them from moving. We have cases where persons because they're in the institutions where their bodies are being violated as several procedures are carried even against their will or without their consent. For instance, currently, we are funding an organization that's working with persons with psychosocial disabilities, and by we, I mean the Disability Rights Fund. And as part of their work to document abuses, there was case of a lady who reported the level of violation she was exposed to at the medical facilities where she was taken to for care and even when she opted to leave, she discussed with her mother that she needed to leave. Her mother saw reasons to take her out, the institution resisted this by bringing several forms of delay tactics to keep her and she was not allowed access to her phones, for example. So she could not make real-time reports. and at the point when the mother did smuggle a phone for her to use the nurses on duty kind of tried to search her things without her consent and even tried to search her body down to her panties and trying to discover if she hid the phone there. And in doing this she was held down by a male guard and while this was going on in the full view of everyone. So this is just one case out of the many types of violations that go on in such institutions. More often than not persons with disabilities are treated with lesser dignity in a lot of the institutions where they're supposed to be getting care. There is a report of I think it's Human Rights Watch. Their research in Nigeria in 2018 and '19 I think and that did provide a comprehensive insight into how persons with disabilities in institutions across the country are being treated.

**Healthcare**

What has been the progress in implementing the health specific rights contained in the Discrimination Against Persons with Disabilities Bill?

The discrimination Against Persons with Disabilities (Prohibition) Act provides for the health rights of persons with disabilities. However, the provision is not very comprehensive. It is one of the provisions That I feel failed to reflect the spirit of the CRPD. Besides this, even the little it provided for is not being implemented. The provision is yet to influence legislative and policy changes, even though through advocacy work of OPDs, several commitments have been made to improve access to health services for persons with disabilities, especially women and girls, and it is not out of place to find one or two modifications here and there, no major changes has occurred in the health sector following the enactment of the Act. As part of my work with the disability Rights Fund, I am working with some grantees to advocate for inclusive health services delivery.

What are the challenges?

Are there any barriers that have affected its progress (discrimination, lack of political will, corruption)?

As mentioned above, there seem to be a lack of political will to implement the Act; and this is not just for health alone, but several (if not all) provisions. For instance, the Act provides that persons with mental health conditions are entitled to free health care in government owned hospitals. I am not aware that this is happening, and I do not have information that the Ministry of Health has taken any steps to ensure budgetary allocation for this purpose. Generally, the awareness on the Act is poor, even among government officials; and the enforcement mechanism is weak. More has to be done to strengthen the Disability Commission to take up its responsibilities to the disability community.
The same sources describe gaps in programming such as a lack of early intervention, gaps in budget, poor training etc. Can you comment on, or think of any reasons for, these gaps in programming (for example discrimination, lack of political will, corruption)?

There is high level of discrimination being faced by persons with disabilities in the society, and the health sector is not immune from this. Ignorance is a great factor constituting barriers to inclusion of persons with disabilities, because, attitudinal barrier constitute a major prohibiting factor. Persons with disabilities have often complained about attitudes of health workers towards them when they visit health facilities. Of course, there is no gainsaying that facilities in health centres are largely inaccessible, but sometimes, a little compassion and display of respect for the dignity of the person can make a huge difference.

Education

The Child Rights Act provides for free and compulsory education for all children in Nigeria. Yet, despite this legislative provision there is some evidence that children with disabilities do not benefit from it. Can you comment on, or provide reasons, for this implementation gap?

First, not all the States in Nigeria have domesticated the Child Rights Act. This means that the provisions do not apply in those states that have not ratified. Also, in Nigeria, implementation of laws is a great challenge. We may have it good on paper, but very poor at following the letters. That said, Nigeria is far from achieving inclusive education. This means that children with disabilities have to travel far away from home to attend schools. So, even though basic education is supposed to be free, families with children with disabilities still spend more money to send children to school. For instance, some fail to send their children to school because they cannot afford the cost of transportation and upkeep. These costs would have been avoided if the children were to school nearer home and within the community. Again, the cost of assistive devices for the children to learn is often on the high side. Many special schools are underfunded and students are expected to buy their learning materials.

Are there regional differences? Between states, rural or urban areas, or territories subject to conflict or insecurity?

Yes. Most states yet to ratify the Child Rights Act are the core northern States. The major reason is because of the minimum age for marriage for the girl child. While the Act provides for 18 years as the minimum, it is often argued that Islamic law provide for a lower age. But this has also affected other aspects of the lives of children. Also, the insurgency in the North has led to the closing down of schools. Children with disabilities in such places are not also able to attend school.

There are no explicit provisions for free and compulsory education within the Discrimination against Persons with Disabilities (Prohibition) Act 2018. Can you comment on any possible reasons for this omission, and its impact?

The Discrimination Against Persons with disabilities (Prohibition) Act provides for free education for persons with disabilities. Sections 17-20 of the Act contains provisions relevant to education. It provides for free education up to secondary level for persons with disabilities; and mandates the Commission to make provision for assistive devices. It also went further in Section 18 to provide for inclusive education. However, more than two years after, these provisions have yet to translate into actual changes on ground in the education sector. Even though there is a National Policy on Inclusive Education, implementation remains very poor. In my work with OPDs, many are advocating for inclusive education at various levels, and my understanding is that there is a poor understanding
among the relevant officials and department of what inclusive education entails. Also, you may want to ask: how free is the education that one has to travel for hundreds of miles to attain?

Can you comment on the impact segregated education has on children and young people with disabilities?

_Segregated education have several negative impacts on children and youth with disabilities. First, at a tender age, children will have to leave their families to institutions, under the care of strangers in the name of getting education. Many children miss the early childhood bonding with parents and siblings. I remember my experience and the pain my father felt when he had to take me far away from home just to attend primary school. Again, segregated education affect the self-confidence of children with disabilities, because from such a tender age, the seed is being planted in their tender hearts that they do not fit into the regular society. Yet, there is no separate society for persons with disabilities. So, when they leave these institutions, it is usually difficult to freely mingle and function as expected. Again, segregated education contributes to the stigma being faced by persons with disabilities. Inclusive schools will pass the message to children that children with disabilities are not different. They may require special attention or facilities, but they can study together, play together and grow in one environment. This will help fight stigma. But segregated education does the opposite._

Some sources state that many children with disabilities are sent to boarding schools. Is there a link between these schools and institutionalisation?

_Most special schools for children with disabilities are boarding schools; and yes, it is a form of institutionalisation. Against their wish in many cases, children are sent off to such schools because there are no options to learning. This is common with blind children, deaf children, children with intellectual disabilities, and other developmental disabilities._

Do you know of any evidence of how children are treated in these schools?

_Many special schools are underfunded. They usually start up well, with good welfare packages and care for the children. But my experience and observation is that over time, facilities grow old and hardly get replaced, funding for the schools reduce, number of students increases, and gradually the initial enthusiasm dies. This is not only with government owned institutions, but also private and mission owned. Many examples of such institutions can be found in Nigeria. Hence, special schools are characterised with poor care, poor nutrition, lack of learning facilities, poor funding and so on. Not too long ago, there were reported cases of sexual molestation of girls with disabilities in some special schools by students and teachers. Many special schools here depend on charity and philanthropy to survive._

Can you comment on any reasons why families might be inclined to send their children away to these boarding schools, rather than seek education in the community?

_Like I mentioned earlier, sometimes, the families have no option as the regular schools in the community will not admit children with disabilities. The usual language is ‘we do not have facilities for them’._

Other than what you may have mentioned already are there any other ways that COVID-19 may have impacted upon provision of education to children and young people with disabilities, or
aggravated any of the issues you have spoken about? Have some profiles been impacted more than others?

Of course, with COVID-19, schools were closed down and various home learning methods were designed. Children with disabilities were left out in all of these. If schools and curriculum were inclusive, the need for inclusion would have been factored into whatever is being designed. But because children with disabilities were segregated, they were forgotten. Also, learning platforms were largely inaccessible.