UNIVERSITY OF NIGERIA NSUKKA

DEPARTMENT OF MICROBIOLOGY

TOPIC:
THE INCIDENCE OF CHILD ABUSE AND NEGLECT IN NIGERIA

BEING A TERM PAPER WRITTEN IN PARTIAL FULFILMENT OF THE REQUIREMENT OF GSP 104 IN SOCIAL SCIENCES

BY

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TITLE PAGE
THE INCIDENCE OF CHILD ABUSE AND NEGLECT IN NIGERIA
DEDICATION

I dedicate this term paper in a special way to God Almighty whom made it possible for me to write this creative work. I also dedicate this work to my dearest parents whose moral and financial contributions, I have found priceless.
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My special recognition goes to my lecturer, Mrs. J. I. Ugwu whose valuable instructions, guidelines and suggestions made the production of my term paper possible.

I am immensely grateful to my family for giving me their great and priceless support and encouragement during the production of this work.

My sincere appreciation goes to my parents Mr. and Mrs. Agu for their financial support and moral encouragement. To my typist Nkechi Ogwu, I say thank you.

Above all, I will eternally remain grateful to my best friend, the Holy Spirit for his inspiration, to God Almighty for his love and to Jesus Christ my savoir for his grace.
PREFACE

The menace, Child abuse, has not only been overlooked in the Nigerian society today, but has also been neglected.

The aim of this work is to critically appraise the consequences of child abuse and neglect in Nigeria and Africa as a whole.

Chapter 1 talks about the introduction: Definition of child abuse and its neglect in Nigeria.

Statistical records of child abuse in Nigeria which includes data collection from Ibadan and University Of Port Harcourt Teaching Hospital is discussed in chapter 2. This term paper discusses in chapter 3 the basic child rights. In chapter 4 the forms of child abuse is discussed.

Finally chapter 5 deals with the effects of child abuse and the supposed remedies to this menace is explained.
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CHAPTER ONE
INTRODUCTION

The best interest of the child is that his fundamental rights are respected. The appropriate decision makers for children are presumed to be parents especially at home.

Nonetheless, in developing countries critically looking at Nigeria as a case study, the level of literacy is low and numerous cultural practices are prevalent. Parents also lack the ability to make informed decisions in the management of their children at home.

The aim of writing this research work is to analyse the forms of child abuse and its consequences.

My earnest concern is what the state of our society in the nearest future would be, seeing the increase in the neglect of child abuse in Nigeria and Africa as a whole. It should be known at this point that the proposed remedies cited in this research work is quite a formidable task.

I then go further to explain the term "child abuse".

1.1 definition of child abuse

Child abuse can be defined as the crime of harming a child in a physical, sexual or emotional way.


1.2 NEGLECT OF CHILD ABUSE IN NIGERIA

Child abuse in Nigeria has been neglected over the years. As the days go by, the menace worsens as no effective preventive measures have proven fruitful.

There is an increase in child mortality as a result of health hazards involved with child abuse. This research work will critically work at the statistical data showing the extent to which the neglect has damaged the lives of Nigerian children.
CHAPTER TWO

STATISTICAL RECORDS OF CHILD ABUSE IN NIGERIA.

In Nigeria, there are various incidences of child abuse that have been recorded statistically. This research work will give some relevant data collected from the streets of Ibadan and the University of Port Harcourt Teaching Hospital.

2.1 DATA COLLECTION FROM IBADAN

In this sub-chapter I will be discussing the social and health behaviours in youth of the streets of Ibadan, Nigeria.

Qualitatively, two Focus Group Discussions (FGD) and two in-depth interviews (IDI) with 20 boys and 2 community leaders were conducted on separate occasions in order to discover common behaviours and patterns of street youth – Quantitatively, 169 youths (89.3% male) were interviewed consecutively from five sub-cultural areas in Ibadan, Nigeria.

A snowballing technique was used to access the street youths by “Area boys” (Adults, who serve as a symbol of authority for street children)

In the results, the mean age of participants was 18.4 years. Most of the children were on the street for financial reasons and had been on the street for more than 1 year, and had not completed their primary school education.
69% had a history of alcohol abuse, 27% school suspension, 47% school truancy, 349% of drug abuse, 24% operated as drug couriers, 46% reported school refusal. 49% admitted to being sex workers and 11% had been raped and were at risk of contracting sexually transmitted diseases (STD).

One-third of youths had been arrested for various offences, including drug abuse and street fighting. While females were in the minority, they were more likely to engage in antisocial behaviours compared with boys.

2.2 DATA COLLECTION FROM UNIVERSITY OF FORT HARCOURT TEACHING HOSPITAL (CPTH)

The expected benefits of medical intervention should outweigh the possible harm. Some parents and guardians occasionally adopt some medical interventions which are futile and harmful to the Nigerian child.

According to Adeyigbe Folayan, "in Nigeria, parents still subject children to unorthodox treatment as first aid therapy in emergency conditions at home". I would like to outline the unorthodox treatment of convulsions which led to the admission of children into the children's emergency ward (CHEW) of UPTH over a 3 years period (1997-2000).

The treatment administered includes ingestion and/or application of traditional concoctions or exposure to burns. Okoji Peterside stated that "A total of 90 children were admitted with convulsion and only 50 cases
notes could be retrieved and analysed.² Fourteen (28%) of the 50 children were exposed to harmful substances at home during cases of convulsion.

The gender distribution of the children was 8 (57.1%) males and 6 (42.9%) females (M:F 1.3:1). The ages of the children ranged from 8 months to 12 years (mean 3.3 years). Ten (71.4%) of the 14 patients were aged two years and below. The unorthodox treatments administered included palm kernel oil in 9 (64.3%) cases, herbal concoctions in 2 (14.3%) and crude oil in 1 (7.1%) patient. These were given to the children to drink. Some were forced into the orifices including ears, eyes and nostrils. The complications arising from unorthodox treatments included aspiration pneumonia (7.7%), chemical conjunctivitis with bacterial conjunctivitis (7.7%) and wound sepsis in 2 (14.3%) of the 14 patients died.
CHAPTER THREE
THE BASIC CHILD RIGHTS

Before one can plan effective strategies, it is pertinent for planners to be conversant with the basic child rights as stated by the African charter which recognizes the fact that the rights of most African children are disregarded due to irreconcilable facts that pivot on hunger, exploitation, armed conflicts, natural disasters, their socio-economic, cultural, traditional and developmental conditions. Let's go further to look at the rights of the Nigerian child.

3.1 THE PRIVATE OF PERSONAL RIGHTS.

The private rights include the right to a name and nationality, the right to a protected and united family, the right to parental care and protection, the right to procedures protecting the best interests in case of adoption, the right to be protected against sexual exploitation, drug abuse and finally the right to fair trial and special condition of detention in case of crime.

Oladejo Lawson also stated thus posing this question, "These rights appear feasible on paper but how would they be implemented?"

3.2 THE SOCIO-ECONOMIC RIGHTS

These rights include the right to survival, health, education, the right to be protected from all form of economic exploitation, the right to leisure, recreation and cultural activities.
Oladepe Lawson also stated that, "Since Limited resources is invested in such ventures as education, employment and accessible health care there is a possibility that the rights and future of Nigerian children are endangered."  

3.3 THE POLITICAL RIGHTS

The political rights of the Nigerian child can't be over emphasized.

The may include the right to non-discrimination, right to freedom of thought, conscience and religion. The right to freedom of association, the right to be protected against torture, right to freedom of expression, the right of protection of privacy, the right to be protected in the case of armed conflict and the right to be protected against harmful social and cultural practices among others not mentioned.

Due to the persistent problems of the military dictatorship and disregard for the democratic principles of freedom of speech, thought and fair trials, it is almost impossible not to wonder how African states especially Nigeria that nonchalantly violate human basic rights could adopt appropriate measures for the protection of its maltreated children.
CHAPTER FOUR

FORMS OF CHILD ABUSE IN NIGERIA

In this chapter, this research work would explain the forms of child abuse in Nigeria. They include Female Genital Mutilation (FGM), Child Labour, Female or Child Trafficking, Early Marriages, Street Children or Child Beggars. Other forms that might not be explained in details include child soldiers, sexual abuse and domestic violence.

4.1 FEMALE GENITAL MUTILATION (FGM).

Female Genital Mutilation is indigenously practiced in different forms. They are: the excision of the clitoris, and the dangerous act of infibulations and the removal of the clitoral hood or labia minor. FGM is been practiced by about 33% of all homes across religious and ethnic groups in Nigeria but with a high rate in the eastern and southern regions.

In the last, the private sector constituting mainly Non-Governmental Organisations and women groups spear headed the campaign against FGM. Presently, no legal action has been taken to eradicate the practice even while the Government denounces FGM as a result of the psychological, emotional, physical and health hazards.

4.2 CHILD LABOUR

There is an active trade in children both within and outside the country. This involves the old practice of handing children from poor families to live with affluent relatives. The child helps in house hold
chores. On the other hand the affluent relative trains the child for a brighter future.

On the contrary, more often than not, these relatives might end up not enrolling these children in school. The children end up as unpaid servants or street hawkers.

Children are affected emotionally and psychologically. There may even be cases of road accidents due to hawking, or inhuman treatment such as chopping of hands, starvation or bathing with oily or hot water by their ‘Ogas’ and ‘Madams’ (their present guardians).

It is even more disheartening that child labour has escalated to the point where children are used for money making rituals. In Niger Delta there is an active trade in child labour to Cameroon, Benin, Gabon and Equatorial Guinea where the males work in agricultural enterprises while the females are enticed to prostitution.

4.3 FEMALE OR CHILD TRAFFICKING

Child trafficking can be defined as the illicit and clandestine movement of children across natural and international borders, largely from developing countries with economies in transition with the end goal of coercing women and girl children into sexually or economically exploitative situations for the profit of traffickers, recruiters and crime of syndicates. Immigration officials throughout Europe have reported an influx of Nigerian females ensnared and sold into prostitution in such
European countries as – the Netherlands, Italy, and Czech Republic. For example, in 2001, Italian officials deported hundreds of commercial sex workers to Nigeria.

It is interesting to note that the practice of child trafficking originated from the African character of sending children to live with affluent relatives. Prevention strategies should begin at the community level.

4.4 EARLY MARRIAGES

In Nigeria there is a traditional practice of early sale of the girl child for marriage. Some studies report that female children are given out in marriage before reaching puberty as a means of evading the act of premarital sex.

Other reports show that early marriages are strategies adopted by poor families to supplement negligible incomes. It is important to note here that early marriages, constitute the greatest abuse to the girl child as they result to early pregnancies which these young ones are not well developed to carry; higher death rates and infant mortality; and greater mother complications or even death during delivery.

4.5 STREET CHILDREN OR CHILD BEGGARS

Williams Godoy threw more light on this by stating that, “the only thing that could be considered deviant about street children is that they take up residence in public places where middle and upper class society
acknowledge their presence and do something to alleviate their plight.

Still discussing child beggars we consider the Nigerian environment where little girls and boys act as guides to blind beggars. It is apparent that these children have learnt to adjust to circumstances and adapt to the environment they have been born into.
CHAPTER FIVE

EFFECTS OF CHILD ABUSE

The effects of child abuse cannot be over emphasized. It leads to some hazardous effects such as health, physical, emotional and psychological effects.

5.1 HEALTH EFFECTS

As in the case of street begging children are exposed to harsh weather conditions such as extreme heat or cold which lead to certain diseases which children are susceptible to. They include common cold, influenza, cough, catarrh etc. In child trafficking the Nigerian girl being exposed to prostitution also gets her exposed to so many sexually transmitted diseases such as gonorrhoea, Acquired Immune Deficiency Syndrome (AIDS), Human Immune Virus (HIV), Syphilis etc.

They are also exposed to physical injury and death via road accidents while hawking. In child labour there are severe cases of burns, chopping of hands and beating with dangerous objects to the state of coma by guardians. All these are the physical and health effects on children.

5.2 PSYCHOLOGICAL EFFECTS

Children are exposed to emotional and psychological shock. This is mainly experienced by girls, who are exposed to rape and other forms of sexual abuse.
CONCLUSION

The possible solution to child abuse may include the following: mass education by health care practitioners and appropriate Government agencies to enlighten the public about simple methods of managing convulsion at home. The use of traditional remedies such as palm oil, onion leaves should be avoided. Further more the government should enforce the children’s decree in order to control all harmful practices.

Truly, a brief highlight of some forms of child abuse existing in Nigeria clearly shows that the some strategies for tackling the problem of neglect and maltreatment in developed countries cannot be assumed to be applicable to or even have similar success rates in a developing country as Nigeria.

In developed countries, children can freely call in welfare officials to report cases of abuse or parental neglect without fear of parental or societal retribution. This is not the case for a Nigerian child. However, Nigerian children are not open concerning their plight and would rather endure the pains of child abuse.

Undoubtedly, forms and causes of child abuses and neglect differ from country to country and should be isolated by Child Advocacy Professionals before profaning laudable strategies for their prevention.
It will not be wise to buds the effectiveness of any child abuse preventive strategy over the other especially if none of the selected strategies eventually have little impact in solving the problem.
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Peteride Okoji "Childhood Convulsions; a hospital survey on traditional remedies" (Lagos: Tonad publishers, 2004), P. 15.


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