Revitalization of Nigeria - equal access: A case study on people with disabilities in Nigeria

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Boston College School of Theology and Ministry

REVITALIZATION OF NIGERIA - EQUAL ACCESS: A CASE STUDY ON PEOPLE WITH DISABILITIES IN NIGERIA

A Thesis Submitted in Partial Fulfillment

Of the Requirements for the Licentiate in Sacred Theology (S.T.L)

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SUPERVISORS: PROFESSOR MARY JO IOZZIO
PROFESSOR KENNETH HIMES, OFM

DEDICATION

TO

MY BROTHERS:

EVAREST NWAKANMA
REV FR MAURICE ASHLEY AGBAW-EBAI
CHINONYE ANICETUS UGWOEGBU
WITH LOVE AND GRATITUDE

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Acknowledgement.

I am thankful to God for the completion of this project. At a point, it seemed impossible but God made the crooked way straight. Glory to God in the Highest. I owe thanks to Professor Mary Jo Iozzio for inspiring me into advocacy for People with Disabilities and for mentoring me with Fr. Kenneth Himes, OFM in achieving this dream. I am most grateful to them.

I am also thankful to Frs Andrea Vicini, Randy Sachs and Andrea Brouillette for their advices and supports to me at the School of Theology and Ministry. To my brother priests at the Somerville trio parish collaborative, Fr Brian McHugh our pastor who gave me free accomodation, and Frs Sabastine, Ignatius, Chika, George, Emmanuel, Abraham, Andrew, Gabriel, Stanly, Jaques, Harry, Richard, Henry, I say thanks to them for being there for me these past years. Without their support, this project would not have been realized.

More so, I am most grateful to my Dad, Prof. Ifeanyi Ugwoegbu and my Mum Dr Florence Ugwoegbu who have supported me in my academic life from my kindergarten days until today. May God continue to bless you. Your worthy examples have led me thus far, remain blessed. Thanking you too my siblings, Chinonye, Marytheophilia, Sixtus, Smart, Anuli, Bobby and Sr Ogonna Amaka, your prayers saw me through at my darkest moments. Thanks so much. To Sarah Marie Toces and Bradley James who helped me at the critical period to read through this project, and making corrections; I thank God for friends like you. Blessings.

Finally, Dr Evarest Nwakanma, Barrister Chinonye Ugwoegbu and Rev Fr Maurice Ashley Agbaw-Ebai, this work is dedicated to three of you, thanks for showing me love in abundance and for teaching me how to love. Ad Maiorem Dei Gloriam.

Introduction

The dignity of the human person is a transcendent value, always recognized as such by those who sincerely search for the truth. Indeed, the whole of human history should be interpreted in the light of this certainty. Every person, created in the image and likeness of God (cf. Gen 1:26-28) and therefore radically oriented towards the Creator, is constantly in relationship with those possessed of the same dignity. To promote the good of the individual is thus to serve the common good, which is that point where rights and duties converge and reinforce one another. (Johnpaul II. Message for the celebration of World day of Peace, 1 January 1999).

Every human being is precious before God and every life is sacred. There is no dichotomy before God in creatures, and God's plan is that all share equally without discrimination in the oneness of that plan. In the face of discrimination, marginalization and social exclusion of certain members of the society, the church warns us through its hierarchy, on the dangers of such tendencies, through what has come to be known as Catholic Social Teaching. Respect for the dignity of all is not a reserved privilege.

Nigeria is the most populous country in Africa. A country blessed with many mineral resources, but such resources have not been used effectively for the betterment of the nation at large. Bribery and corruption are two sides of the same coin that together represent the key problems faced in Nigeria today. Those who find themselves in the corridors of power, instead of rendering services to the nation, end up becoming wolves in human skin. The attitudes of past leaders and other statesmen who served the nation in different capacities have made Nigeria a place of the survival of the fittest. This thesis will focus on "Revitalization of Nigeria - Equal Access: A Case Study on People with Disabilities."

Reasons for Writing this Thesis

My classes on disability ethics with Prof. Mary Jo Iozzio and classes on Fundamental Moral Theology and Global Health and Theological Ethics with Prof. Andrea Vicini, SJ marked a critical point in my academic experience at the Boston College School of Theology and Ministry. Being part of these classes opened up new pages in my life, calling my consciousness to this most important aspect of life, though most neglected by so many people. Growing up in Nigeria, I encountered many people with disabilities (PWD), whose lives have been wasted not just by their families but also by the government, who have not worked hard enough to provide basic care for all. I have seen many PWD die for lack of love and care by the society. I am ordained for Enugu diocese in Nigeria and worked for four years in the diocese of Mamfe, Cameroon. In both places, my experiences of attitudes toward PWD were not at all positive. People with different impairments visited my rectory on daily basis in search of food and shelter and am sure I could not do enough for them. It is time now for me to stand up in advocacy for them especially, in healthcare and inclusion into the mainstream of the church and society.

My focus is the Nigerian nation, hoping to impact other African nations as well, granted that continental influence of Nigeria. The Church in Nigeria has not done enough to incorporate PWD in the everyday life of the Church and this lack promotes stigmatization and marginalization of this group. My aim is to trumpet this concern to the government and the Church so that actions will be taken that will put smiles on the faces of Nigerians and PWD in particular. The emancipation that I ask for is not a privilege, but a right for Nigerian citizens who are entitled to enjoy good life.

The primary reason for this writing is to have a sound conversation using the tools I have gathered from my studies at Boston College, to tackle problems related to the healthcare system and disability care apathy in Nigeria. I work in advocacy for the voiceless, oppressed and

marginalized poor in Nigeria who have none to advocate for them. I know I have what it takes to make a difference, and I believe that this voice will be heard.

Thesis Statement

Healthcare is a basic prerequisite in human life and Nigerians have the right to such a basic need. Most especially, this right to healthcare must be extended to PWD. My focus in this thesis, which I have captioned "Revitalization of Nigeria - Equal Access: A Case Study on People with Disabilities," concerns revitalization and improvement of the healthcare system in Nigeria, and inclusion for PWD. Nigeria needs healthcare reform and, while some attempts have been made in the past, the workability remains utopic, and PWD have not been given adequate attention. If the healthcare system in Nigeria is revitalized, it will be a sure emancipation for PWD whose rights as citizens of Nigeria and as humans have been trampled upon by past regimes. This research, using human rights and theological ethics of solidarity and option for the poor seeks to tackle the anomalies of the Nigerian government with regard to disability care and healthcare of the citizens in general. I will recommend the principle of participation at the end of this thesis as a practical means of advocacy for PWD in Nigeria.

Synopsis of this Work.

In Chapter One, "The History of Nigeria, Equalities and Inequalities, and Consequences," I provide a description of the history of Nigeria which led to equalities and inequalities in Nigeria, beginning from the British rule till the independence of Nigeria in 1960. The amalgamation of the Northern and Southern protectorates by the British high commissioner Frederick Lugard in

1914 which left Nigeria a divided country is discussed and the varied problems which resurrected as consequences of that act.

At the Independence in 1960, Alhaji Tafawa Balewa became the first prime minister, but his reign came to an abrupt end on the 16th of January 1966 with a military coup. There were other coups and counter coups from 1966 until 1985, leaving so many contemporary conditions unfavorable. As aforementioned, Nigeria has become a land of lawlessness, violence, injustice, with a pervasive culture of bribery and corruption that has been enthroned.

In the second part of this chapter, I shall consider the consequences of the above-mentioned issues in Nigeria's history: British rule segregated peoples on the basis of income, power and administration. Military coups intensified inequalities in Nigeria, leading to the collapse of morality in the political arena, and promoting the enthronement of "the money syndrome" in Nigeria. Some of the contemporary challenges as a result of the instabilities in Nigeria are noticeable in the educational and healthcare systems.

In Chapter Two, "Healthcare in Nigeria and Attitudes toward People with Disabilities," I examine the situation of healthcare management in Nigeria. The key problems faced by the poor in Nigeria as a consequence of poor healthcare and how the rich take advantage of the system to flaunt their affluence through medical tourism and the likes, constitutes the central nexus of this chapter. I consider the obscure situation of PWD who have been sidelined in the society, not only by the government but also by members of their families. Attitudes toward PWD and how labeling play a role in their marginalization are all part of this chapter. Healthcare for PWD is not given the attention it ought to receive, both by the Church and government. As such, I expose such phenomena in order to challenge them.

In Chapter Three, "Theological Resources to Address Contemporary Challenges and Strategies," I employ the Catholic Social Teachings of preferential option for the poor and solidarity. The marginalization and stereotyping of the poor in the society, especially PWD puts them into difficult situations and, as such, the church calls her children to embrace an "option for the poor" and to pursue social justice for them. The option for the poor is a response to God's mercy that is noted all through history as proven in and through the Bible. The Judeo-Christian tradition points to this direction, in which because all humans are created in the image of God, one can reasonably make the argument that all should have access to basic healthcare, education, and to other goods of life. In addition, granted that the poor are the privileged recipients of revelation in the Bible, one would expect that a society that owes much of its history to the formative influence of religious faith should accord the poor a certain primacy in its everyday life.

Solidarity for the poor as a key social teaching of the Church is another theological ethic to consider in pushing for equal access to healthcare for PWD in Nigeria. In order to offer help, we need to bring PWD close to us and listen to them. In so doing, the Church affirms their equal worth in the society. Through solidarity, I advocate for the rights of PWD, seek justice for them and call for a united effort in incorporating them into the very essence of the society.

The second part of this chapter draws inference from these two principles of Catholic social teaching to provide strategies on how to curb ongoing injustices to PWD with regards to access to healthcare and to the mainstream of the society. This requires dismantling prejudices and attitudes against PWD. I will conclude this chapter with a look at Jon Sobrino's metaphor of the "crucified people as Yahweh's suffering servants."

In Chapter Four, "What can the Church do/What role can the Church play," I look at the role of the Church in order to improve the suffering of the marginalized poor. The Church has to play the role of the united family of God. The principle of participation is imperative for a country like Nigeria in advocacy for PWD, and I recommend this teaching of the church. More so, a Biblical anthropology through Acts 2, will be important too. I use these to call on the Nigerian Church to stand up for an all-inclusive Church where segregation, marginalization and oppression will no longer be tolerated to become a country where the fundamental human right of all will be respected and the dignity of every human person promoted. In the words of Pope Francis: "In the poor we see the face of Christ who became poor for our sake (Twitter@Pontifex, October 2 2015)."

Chapter One.

All powerful and merciful Father, You are the God of Justice, Love and Peace. You rule over all the Nations of the Earth. Power and Might are in Your Hands and no one can withstand You. We present our country Nigeria before you. We praise and thank you for you are the source of all We have and are. We are sorry for all the sins We have committed and for the good deeds We have failed to do. In your loving forgiveness, keep us safe from the punishment we deserve. Lord, We are weighed down not only by uncertainties but also by Moral, Economic and Political problems. Listen to the cries of your people who confidently turn to you. God of infinite goodness, our strength in adversity, our health weakness, our comfort in sorrow. Be merciful to us your people. Spare this nation Nigeria from chaos anarchy and doom. Bless us with your Kingdom of Justice, Love and Peace. We ask this through Christ our Lord, amen (CBCN 23rd June 1993)

1.0 The History of Nigeria, Equalities and Inequalities and Consequences

In this chapter, I begin (1) with the prayer for Nigeria in distress, which was authored by the Catholic Bishops of Nigeria. I mention (2) few unifying symbols and then give the history of Nigeria. I focus on the coming of the British and why they came to Nigeria, the amalgamation of Southern and Northern protectorates, which is at the foundation of the present equalities and inequalities/inequities in Nigeria. Another important emphasis of this chapter (3) is on religion and ethnicity, which stand as key divisive factors in Nigeria. My reason for tracing the history is to establish the foundation of the crises in Nigeria (4), from (5) Amalgamation to (6) a recapture of Disunity, and (7) especially regarding the lack of access for PWD to human commerce.

1.1 Nigeria in Distress

The history of Nigeria since the colonial rule continues to keep Nigeria in distress. As a minor seminarian, our Rector Fr Uche Obodoechina insisted that the prayer, which opens this chapter *Nigeria in Distress*, composed by the Catholic Bishops Conference of Nigeria must be learned as a prerequisite for entrance into St. John Cross Seminary in Nsukka, Nigeria. In response to this

command, more than one hundred of us, who had come for the yearly entrance interview at St John Cross, take to solitude in order to memorize this prayer.

Nigerians who have good knowledge of history remember that this prayer was composed in the aftermath of the June 12th Presidential annulment saga (1993), which put the country in a crisis situation. On the 23rd of that same month, the Catholic Bishops Conference of Nigeria released this prayer, which has been taught and recited in all Catholic institutions and Churches in Nigeria until now. The annulment of the June 12th elections was seen as the Waterloo in Nigeria's political history. A critical line-by-line reading of this prayer gives us the knowledge that the Holy Spirit inspired the composers and that the hand of the Almighty rests on them. The prayer conveys the message of a country that has passed, and is still passing, through political *cum* economic quagmires. Nigeria is a country where crises and conflicts are the order of the day, a country whose past is not better than the present, and the future is unsure. In response to this instability, the Bishops had a singular goal, to foster a prayer for peace and unity in Nigeria.

Even as a young man 26 years ago, my schoolmates and 1 faithfully recited this prayer every morning, as we reflected on our country's troubles. We prayed for Nigeria in distress, hoping that one day, God would release us from the mistakes of our forefathers and our colonial masters. The Church in Nigeria continues to echo this prayer daily, even Nigerians in diaspora are not excluded from this ritual. Today, I hear the resonance of this prayer, and I sit and ponder whether, as Nigerians, we mean what we say. Every now and then, people are elected into public offices, and they become wolves in human clothes. Nigeria is a country that is so blessed with human and natural resources, but it has become the laughing stock of God's creative expertise. It is a country where humans dehumanize others. A country so blessed, but cursed by the wounds

afflicted on her people by her purported rulers and leaders. A country where things have fallen apart that the center can no longer hold. A country in a complete mess, my country, my Nigeria.

Thinking about Nigeria, I am bound to ask myself questions like: Is Nigeria really cursed? Why are there these political and economic instabilities when we are so richly blessed? Why are so many full of smiles, while many others are impoverished and forlorn? Why the class wars and discrimination as the rich possess more while the poor get poorer? Why the poverty of leadership, leading to a failure in the educational and healthcare systems? Why are there no workable healthcare systems, which should be all inclusive for the rich and the poor? People with disabilities who make up the majority of the poor in Nigeria are at the mercy of others as a result of these fluctuations. Unfortunately, the same people who crucify the country are the same people who arrive at our Churches, echoing the prayer for *Nigeria in Distress*.

1.2 Symbols of Unity.

Apart from the prayer for *Nigeria in Distress*, which is now taught to all Nigeria's Catholic children, we had the privilege of reciting the Nigeria pledge and anthem at the assembly grounds, every morning, before classes. These are two of the major symbols of unity in Nigeria. By symbols of unity, I tend to look at those important days and activities like the 1st of October (Nigeria's Independence Day), festivals in states, and the different national soccer and sports teams that unify Nigeria. All these are keys to Nigerian unity, but the most important are: The National Anthem, the Flag, the Pledge and the Coat of Arms.

The Nigerian anthem before gaining Independence was British, but after the Independence of 1960, it became paramount to have an anthem that would replicate the population's intentions and goals, dreams and visions, of Nigerians as one state. The first version

of the anthem, "Nigeria we hail thee," was composed by Lilian Jean Williams and the musical support was from Frances Bende, two British expatriates, adopted and in use from 1st October 1960 until 1978.¹ This anthem was in use up until the pogrom of Biafra at the moment of secession. At that point, the country witnessed a mouthful of tribalism, ethnicity, injustice and chaos. Since the first anthem lacked the unifying vision that Nigerians vocalized, there was a move to compose a befitting anthem that would thematize the feelings of the nation. A competition was held in 1978 to pick a composition that would be an embodiment of the desired unity of the nation. At this competition, the present anthem worded by John A. Ilechukwu, Eme Etim Akpan, B.A Ogunnaike, Sotu Omoigui and P.O Aderibighe was applauded and put into music by Nigerian Police Band directed by Benedict Elide Odiase.² The second stanza, "Arise O Compatriots Nigeria's call obey, to serve our Fatherland with Love and Strength and Faith, The Labours of our heroes past shall never be in Vain, To serve with Heart and Mind, one nation bound in Freedom, Peace and Unity," remains a hope yet to be realized.³

Symbols of unity in the Nigerian State are also seen in the National pledge and flag. The national pledge composed in 1976 by Prof. Felicia Adebola Adedoyin is a call to service, obedience and faithfulness to State. This patriotic pledge goes thus: "I pledge to Nigeria my country, to be faithful, loyal and honest. To serve Nigeria with all my strength. To defend her unity and to uphold her honor and glory, so help me God." This pledge encapsulates the demand for loyalty from the citizenry to the Nigerian State.

Added to these, other unifying symbols in Nigeria's effort to maintain a united diversity is notable in the national Coat of Arms and in the national Flag. The various Federal universities

¹ B. A Ubleble, "The Imperative of Testing the Might of Unity in Diversity and Peaceful Coexistence Through Symbols of National Unity in Nigeria," *Research Journali's Journal of Sociology* 2 No 10 (2014): 1-12; ISSN 2347-8241.

² Ibid. 3.

³ "Arise O Compatriots," https://en.wikipedia.org/wiki/Arise, O Compatriots.

and Federal University teaching hospitals are administrative developmental efforts to unify Nigeria. Notwithstanding these efforts, one major question remains: is Nigeria a united country? If it is a united country, the varied inequalities notable in the country today would not exist. Neither, the class discrimination between the rich and the poor nor the negligible attitude to education and access to healthcare for all would exist. In such a country where nothing seems to be working right since gaining independence, I ask: what is the fate of the poor and impoverished, whose majority are PWD? Nigeria needs a revitalization of both educational and healthcare system for equal access to all.

1.3 Nigeria my Country

Nigeria is the most populated country in Africa, with about 169 million people. Among these, 25 million are PWD, and about 3.5 million have mobility impairments.⁴ Nigeria's history has sowed injustice and presently reaps the consequences of her actions, as depicted by the struggles of her impoverished and disabled people. What could have caused these conditions, given rise to so much inequities and inequalities in Nigeria? Something for certain must have put Nigeria in this incredible situation. The key issues I see as fundamental to these inequities are: ethnicity and religion. In what follows, I will explore these issues.

1.3.1 Ethnicity

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⁴ Precious Sango, "Visible but Invisible: People Living with Disability in Nigeria" (November 13 2014) https://books2africa.org/visible-but-invisible-people-living-with-disability-in-nigeria/.

Ethnicity plays a fundamental role both in the life of Nigerians and to the divisive nature of the country. Ethnicity has developed from the nation's vast geography and topography. The population is overwhelming, as Nigeria consists of more than 200 ethno-linguistic groups.⁵

There are two major zones that make up the country: the savannah in the North and the rainforest in the South. In the North are the Hausas, while in the South are the Yorubas and the Igbos. These are the three major ethnic groups. Both the North and the South have different trade systems, which are known to be the heartbeat of the two zones. The presence of Tsetse fly, which is synonymous with rain forests, makes the rearing of cattle and horses an almost impossible venture in the South. Therefore, trade in the North was based on cattle and horses whilst in the South forestry and elementary farming was the norm.⁶

Perfect knowledge of the earliest history of Nigeria is not clear. However, it seems likely that from the seventh century, empires and states flourished in the region. Michael Gould maintains that the Arab invasion at this early period created trade and communication across the Sahara, from the north to the south. Some of the earliest and most powerful states he mentions are the Kanem, Bornu and Hausa states. In the south there existed important states like the Nupe and Kwarafa. The northern states were interconnected, which kept trade and communication intact between the Arab rulers and the rest of the north. However, northern trade maintained a considerable distance from the south of Nigeria.

In the south, the Yorubas and the Igbos flourished. The geographical setting and topography of Nigeria never allowed much interactions between the Hausa north and the rest of the south. The southern Yorubas had an organized chieftain system through the Oba, who was in

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⁵ Toyin Falola and Mathew M. Heaton, A History of Nigeria (New York: Cambridge University Press, 2008), 5.

⁶ Jean Herskovits, Nigeria: Power and Democracy in Africa (New York: Foreign Policy Association, 1982), 8.

⁷ Michael Gould, *The Struggle For Modern Nigeria: The Biafran War* 1967-1970 (New York: I.B. Tauris 2012), 9.

⁸ Ibid.

charge of the empire. Several other chiefs were appointed to care for other towns scattered throughout the Yoruba land. The Southeastern people, the Igbos, lived in large village groups, administered by councils, which were presided over by senior men who held office by virtue of their personal ability, age or lineage. The Hausas in the north were greatly influenced by Islamic religion, which made their way of life completely different from the southerners, who had limited Islamic influence. The office of the Oba is held supreme to the extent that no other chief could establish an ascendant power that would challenge the Oba. Influences in the South east and South south is predominantly the embrace of Western education as introduced by the early Christian missionaries.

From the onset therefore, the picture reveals an historic division between the Northern and the Southern parts of Nigeria. Firstly, the topography of both are not compatible, and secondly, the rigid Islamic influence in the North exaggerates these incompatibilities. These incompatibilities played a big role in the moral decadence in the Nigerian State, leading to inequities in Nigeria. Religion is another fundamental issue that has given rise to the fluxes in Nigeria, and in what follows, I give a closer appraisal of its role.

1.3.2 Religion

Historically, Michael Gould tells us that Islam came to Kanem in the eleventh century and was made known in Hausa land in the thirteenth century by Wangrawa from Mali. ¹² Through the use of camels, trans-Saharan trade was carried out. Originally, this trade was carried out by the Berbers, but was taken over by the Arabs after their conquest of the region. The Muslim Arabs

⁹ Gould, The Struggle for Modern Nigeria, 10.

¹⁰ Suzanne Cronje, *The World and Nigeria: The Diplomatic History of the Biafran War 1967-1970* (London: Sidgwick and Jackson Ltd, 1972), 4.

¹¹ Gould, The Struggle for Modern Nigeria, 10.

¹² Ibid., 11.

prospered in their trade of gold and ivory. There was a need for slave trading too, and because their religion prohibits trade of fellow Muslims, they turned to black Africans for their slaves. At this point, Fulani migrants who converted to Islam began to occupy the northern part of Nigeria around the eleventh century.

The Hausa Fulani people became indignant towards their rulers whom they saw as not keeping to the traditions of their religion. For this reason, there was a major revolt led by Usman dan Fodio. He justified this Jihad by asserting the non-commitment of their rulers, whom he perceived as upholding a double standard. He claimed they pretended to profess Islam whilst at the same time they mixed their beliefs with pagan traditions. Gould notes further that: "By 1808 this Fulani Jihad had brought most of Hausaland under its control and it laid the foundation of the Sokoto Caliphate. By 1830 the Fulani were masters of modern day Northern Nigeria." The success of this Jihad and the enthronement of Islam as a key religion in the North, sequels the hegemony of the Hausa Fulani in Northern Nigeria. The reception of other religious groups in this region were impeded and interactions with the south never blossomed. Integration with the rest of the country was a problem because for the Hausa Fulani, their religion demands obedience. The purported obedience prevented the people in the north from integrating well with the rest of Nigeria.

As the North embraced Islam, the South embraced Christianity. European missionaries entered Nigeria after the abolition of the slave trade in the early 19th century. Evangelicals from Britain established schools in order to teach Nigerians how to read and write in the western way. The South progressed tremendously as a result of this opportunity brought to them by the European missionaries. This progress in language and education skills could not be enjoyed by

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¹³ Gould, The Struggle for Modern Nigeria, 11.

TH Ibid.

the north whose religious affinity was protected by the British to the detriment of the northerners. Christianity was impeded to a great extent in the north, which explains the minority Christian presence there today. The leaders and followers of Islam were not comfortable with European religion, and made every effort to destabilize the move for Christianity's spread into the North. This North's suspicion of European education created an imbalance in educational achievements in Nigeria at the time of independence in 1960. At independence, the South had 842 secondary schools, while the North had only 41. 15 At this point, most educated Southerners occupied important positions in the North since they were able to master the European language. Tribal discrimination erupted at this point leading to more frictions between the North and the South, and eventually leading to the War of 1967. According to Gould, major problems followed:

The first was that as the country drew closer to independence so more and more government jobs were Nigerianized, at the expense of the European community. Generally the only people competent and capable of fulfilling these roles were from the South, those indeed who have received a European-style education. Many of these Southerners increasingly took up professional careers in the North. Under equal conditions these jobs would have been taken by Northerners, but because of the lack of European-style education in the North they were simply not available. Indeed it is interesting to note that the North was reluctant to expunge its European workforce knowing that it would have to replace them with Nigerians from the South. ¹⁶

These problems portray clearly the condition of things in the North due to lack of education. The North became a ripe place for the Southerners to seek greener pastures, since the North lacked basic education and educational facilities. Gould continues that the North's unwillingness to participate in European education evolved from a simple jealous misunderstanding leading many Northerners to fear the encroachment of Southerners into

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¹⁵ Gould, Struggle for Modern Nigeria, 12.

¹⁶ Ibid, 13.

northern Nigeria, and thereby changing, usurping and taking over their way of life.¹⁷ This fear caused many inequalities in the north, as the Northern people became indignant with the Southerners, whom they saw as threats to their progress. In terms of economic and financial securities, the Southern people who occupied strategic offices were more buoyant than their Northern counterparts who had no education.

We can see that ethnicity and religion acted as two frontiers in the historical progress of Nigeria. These were sensitive issues that needed a more nuanced approach by the colonial masters. Unfortunately, the British were not sensitive to these issues when they thought of the plan for 'Nigeria.' The level of injustice and inequalities in Nigeria, which led to the decadence present today, is traced to the magnitude of insensitivity exhibited by the British colonial masters. A look at the amalgamation of the Northern and Southern protectorates of Nigeria is important at this juncture in order to buttress the history of equalities and inequalities in Nigeria.

1.4 Amalgamation of the Northern and Southern Protectorates of Nigeria in 1914 (Precolonial era to Amalgamation).

The British, in their scramble for Nigeria in the later part of the 19th century, focused essentially on trade. In agreement with other European powers, the boundaries of modern Nigeria were drawn. In about 1850, political and economic transformation was already peaking in the region, which is today called Nigeria. The savanna area had been built up into a strong Islamic territory having Sokoto as its midpoint, while the Oyo Empire at the heart of Yorubaland collapsed. The established slave traders of Calabar, Niger Delta and the East would take a turn into Palm Oil trade due to the collapse of their trade. Lagos became a British Crown Colony in 1861, and a series of treaties signed with local chiefs allowed Britain to declare a protectorate over most of

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¹⁷ Ibid.

the South. 18 The Northern part of the South was administered by the then National African Company, which later became the Royal Niger Company. This company acted as a mélange of British business interest along the River Niger. In 1900, the British government took over responsibilities for the territories of the Royal Niger Company from George Goldie, the Chairman of the company, for a cash compensation of 450,000 pounds, plus a royalty on minerals from the company's former territory for a period of 99 years. 19

The British takeover introduced, in a more intense manner, the protectorates of Northern Nigeria, the Niger Coast and the Lagos Colony territories. Trade in these three protectorates generated enormous income for the British, who made great effort to see that these protectorates were sustained. Lagos became the pivot, since most transactions passed through Lagos, making Lagos an economic mega city. The first six months of 1888 registered a surplus in cash revenue worth 1,172,840 pounds from palm oil, and more than half of these profits belonged to British traders.²⁰ From this revenue, one deduces the British interest in the takeover of these protectorates.

Frederick Lugard was appointed in 1900 as high commissioner for the protectorate of Northern Nigeria. In the north, Lugard anchored the dictates of indirect rule. He allowed Muslim law to run alongside British law as a dual system. ²¹ In an understanding and agreement with the leaders of Islam, he excluded Christian missionaries in the region in order to promote Islam and to limit Christian intrusion. Indirect rule was viable for Lugard and the British especially in the North. Their interest was to build a well rooted bossier in the North so as to be incomparable

 ¹⁸ Cronje, *The World and Nigeria*, 1.
 19 Michael Crowther, *The Story of Nigeria* (London: Faber & Faber, 1978), 171.

²¹ Cronje, *The Struggle for Modern Nigeria*, 15.

with any other region. These were actually seeds of discord for the future of Nigeria since indirect rule promoted northern hegemony, a factor in the life of Nigeria today.

In 1906, the Colony and Protectorate of Lagos was amalgamated with the Niger Coast Protectorate to form a single Protectorate of the South.²² Lugard's attempt to introduce indirect rule at Yoruba in the South did not have much success. The Yorubas had a very organized and energetic system of government. The Oba is in charge and does not act absolutely like the Emirs of the North. The Yoruba Oba runs a consultative chieftaincy government and cannot lord it over the people. This stance made indirect rule partially unsuccessful in the Yoruba south.

In the Southeast, indirect rule was a complete failure, as the Igbos have no chieftain structure. The Igbos lived in village clusters, cared for by councils presided by men whose leadership qualities were acceptable to all. In Igbo we say "Igbo enwe Eze," which means that the Igbo man has no King. For this reason, indirect rule made no progress in Igbo Land. In response, Lugard and his people chose Warrant Chiefs for the different towns in Igbo Land. These Chiefs are still disputed in different localities today in the Igbo eastern part of Nigeria.

Notwithstanding Lugard's effort, Northern Nigeria was not as successful as he hoped. They were not economically viable and trade was not flourishing as in the Southern region where trade blossomed. The North depended on the South economically. As a result, when Lord Lugard was made governor in 1912, the decision for the amalgamation of the Protectorate of Northern Nigeria, and Protectorate of Southern Nigeria was made. Having been so used to the system in the North, Lugard could not hide his attachment to them. In the words of Cronje quoting Lugard: "I am anxious to prove to these people (the Fulanis) that we have no hostility to them and only to insist on good government and justice, I am anxious to utilize if possible their wonderful

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²² Falola and Heaton, A History of Nigeria, 177.

intelligence, for they are born rulers, and incomparably above the negroid races in ability."²³ Lugard and his cohort saw the Hausa Fulani Islamic people as the right people to bestow control of Nigeria as a country. Lugard believed that they possessed such a genius for rule and so much intelligence that their continuance in positions of responsibility was best for the people subject to British rule.²⁴ Because of Lugard's love for Hausa Fulani, he coopted territories outside the northern region and bounded them up into the north in order to give Hausa Fulani political control in Nigeria. This favoritism demonstrates why the northern part of Nigeria insists on maintaining its Hausa Fulani hegemony. They are not the most educated people in Nigeria, but colonial administration favored them.

In 1914, the Northern and Southern protectorates of Nigeria were amalgamated against popular opinion, which favored disintegrating Nigeria into four or five regions. At the success of this amalgamation, Lugard became the first Governor General of a unified Nigeria. His first order was to make the South contribute to the North's deficit from alcohol abuse. Meanwhile, suggestions circulated for a divided Nigeria that would develop into three, four or even five major states, since the people are completely different, were offered. One suggestion was for four areas: North, Central, West and East. The other was for five regions: the Hausa States, the Chad Territory, The Benue Provinces, the Western Provinces and the Eastern Provinces. To these, Lugard did not comply rather, he amalgamated the two regions of North and South and these, though incompatible, the country called Nigeria. The Southerners, having enjoyed the white man's language of reading and writing, cooperated more among themselves at that initial period and would have remained a better country if it became one. The colonization of Nigeria,

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²³ Cronje, *The World and Nigeria*, 3.

²⁴ Ibid.

²⁵ Ibid. 16

²⁶ Crowther, *The Story of Nigeria*, 197.

however, was more like a forced marriage, where very distinct towns and villages were mandated to unify. The British forced their desires on the African people using the barrel of guns in order to bring together a country called Nigeria. Looking at the above stages of equalities and inequalities caused by the British and their colonial rule in Nigeria, one question arises: What was/is the situation in Nigeria after the British rule and the amalgamation?

1.4.1 Colonial Era (After the Amalgamation)

Life in Nigeria after the amalgamation presented a colonial system whose primary interest situates on building up the Nigerian economy. For the British, there is a possibility of bringing Nigerian societies into civilization by building a modern economy. They believed that they were fulfilling the dictates of the Dual mandate, making the colonial endeavor profitable for both European merchants and Nigerian producers.²⁷ Notwithstanding this assertion, it is clear that colonial interests did a lot more to satisfy British interests than those of the colonized. Toyin Falola and M. Heaton put it this way: "In fact, the colonial economy did far more to enrich existing British commercial interests than to develop Nigerian industry and commerce into a viable modern economy."²⁸ The immediate interest of the British after the amalgamation was to open trade avenues for the exportation of goods from Nigeria to Britain and then, to other European countries. The second part of the trade was to ensure the importation of European finished goods to Nigeria.

The Colonial economy in Nigeria was simply exploitative. The Colonial masters took advantage of Nigeria and Nigerians in order to enrich their own economy. Railway lines were built, which helped in developing the transport sector, but with the primary aim of enhancing

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²⁷ Falola and Heaton, A History of Nigeria, 118.

²⁸ Ibid. 119.

trade through routes that would enable access for transporting such goods from Nigeria to Europe. The exploitative nature of the colonial economy ensured that very little sustainable development occurred during the colonial period.²⁹ It was a deceptive government where, "the more you look, the less you see." This government created the opportunity for exploitation in Nigeria, which is practiced today by Nigerian politicians.

1.4.2 The Rise of Nationalist Movements: A Critique of Colonialism

These inequalities introduced in the Nigerian economy did not leave the majority of Nigerians pleased. So many of the young people who were privileged to receive a European style education gradually began to kick against the colonial masters and promote more nationalist movements. Hebert Macauley, the grandson of Bishop Ajayi Crowther and founder of the National Democratic Party, was the first to raise questions on British rule in Nigeria. He created the first nationalist party in Nigeria that promoted criticisms of the British government. He questioned British rule on the education of Nigerian people both in primary and secondary schools, and then, the full involvement of Nigerians in civil service. Macaulay's opposition came through Lagos' Kings College students, who started the Lagos Youth Movement in 1934 and was reinforced by the homecoming of Nnamdi Azikiwe, who was trained in the United States and worked in Gold Coast for three years. These developments were all efforts at the local level to promote nationalism.

1944 opens up a new page with the British and the American Atlantic Charter, which confirmed the right of self-determination by people for control of their homelands.³⁰ At this point, the struggle for Nigerian nationalism grew. There were formations of different regional

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²⁹ Ibid, 121.

³⁰ Gould, *Struggle for Modern Nigeria*, 18.

party systems that pushed for an internal self-government as a means of turning away from the doom of colonialism. The National Councils for Nigeria and Cameroon (NCNC) was formed in 1945, which was a party for the South, comprising the Yorubas and the Igbos. For tribal reasons, Action Group (AG) was formed by the Yorubas to distance themselves from the Igbos grabbing the control of the NCNC. The Hausas in the North formed the Northern People's Congress (NPC). Since Nigeria already existed in regions with strong centers, ethnic rivalry in Nigeria reached its climax.

1.5 Independence and Post-Independence Nigeria

Nigeria finally gained independence on the 1st of October 1960, with Dr. Nnamdi Azikiwe as the President, and Alhaji Tafawa Belewa as the Prime Minister. Britain departed leaving the government of Nigeria in the hands of the Hausa Fulani northern dominated NPC whose leader was Tafawa Belewa. The NPC were in a coalition with NCNC, therefore, Nnamdi Azikiwe, the leader of NCNC, became the Governor General of the Federation, an office that was merely ceremonial and without a portfolio. Nigeria was partitioned into the Western Region, Northern region and the Eastern region.

There were crises and counter crises because of what I call the "Nigerian Money Syndrome" and what some other people might call "a share of the National Cake." Questions are raised on why the Hausa Fulanis and the Igbo coalition are allowed to partake in the national "chop chop" alone (bribery and corruption)?³¹ For them, at least the Yoruba business men and elders can partake of this too. This crises roll into the census of 1962, inflated to a large extent to favor the north and thereby gain more seats in the federation's parliament.

³¹ Ola Balogun, *The Tragic Years: Nigeria in Crisis* (Benin City: Ethiope Publishing Corporation, 1973), 16.

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Political crises continued in Nigeria, as there was tribalism, instabilities, and thuggery in all the spheres of the Belewa-Azikiwe era. Nigerians were worn down with the state of the nation and finally, to the excitement of many, the army invaded through a coup d'état on the 15th of January 1966. This coup was spearheaded on the grounds of corruption by five Nigerian majors: Kaduna Nzeogwu, E. Ifeajuna, D. Okafor, C.I. Anuforo and A. Ademoyega. The elections of 1964-65 were a massive show of decadence, thuggery and violence, which led to a national crisis. The Army could not take it any longer and took over the government, killing the Prime Minister Tafawa Belewa. Others, such as The Premier of the Western region and other Ministers, including the Sardauna of Sokoto also were killed. The coup was bloody, and only partialy successful, as many perpetrators were thwarted.

This coup caused much damage in the history and life of Nigeria, and is seen as a tribal effort by the Easterners to get rid of the Hausas from the seat of the government. The leaders of the Northern and Western regional government were all killed, as such it led to a split within the army between Southern and Northern formations.³² The reins of power were transferred to General Aguiyi Ironsi, who was the highest in Rank in the Nigerian army. He was asked to pilot the affairs of the country as the highest ranking military officer.

Since secession had been an underlying factor in all the regions, there was a counter coup on the 26th of July 1966, by the Northerners to avenge the killings of their elites in the first coup. This coup, named 'operation Araba' (literally, secession), was planned by Major Murtala Mohammed, Captain T.Y. Danjuma and other Northern allies to kill Aguiyi Ironsi, the Commander in Chief and other Eastern military officers. Their purpose was simply to avenge the killings of their people and not a takeover of the government.

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³² Eghosa E. Osaghae, Crippled Giant: Nigeria since Independence (Indiana: Indiana University Press, 1998), 57.

Prior to this coup, there was a shift from Federalism to a Unitary government with Decree no. 34 of May 24, 1966, by Aguiyi Ironsi. 33 The regions were proclaimed 'Groups of Provinces' to the dislike of the North. This decree caused a series of crises in the North marked with the massacre of the Igbos, who were already settled in different positions in the north. The promulgation meant the collapse of the strength of the regions, with the abolition of the public services. Only one official introduction of one public service was made. Military governors were appointed to head the different provinces, these appointments inflated the crisis, leading to the coup and the killing of Aguiyi Ironsi.

General Yakubu Gowon, a Northerner, took over the government after the killing of Aguiyi Ironsi. The crisis in the North continued, leading to the slaughter of many Easterners, who were seen as infidels (Nyamiri). Gowon was slow to avert these killings. Between May and September 1966, an estimated 80-100,000 Easterners were killed, and several thousands more wounded in different parts of the North.³⁴ At this point, Colonel Chukwuemeka Odumegwu Ojukwu, the governor of the Eastern province, after consultations with the Eastern regional assembly, declared the Republic of Biafra on the 30th of May 1967. This declaration led to the Nigeria Biafran War of 1967-1970. The Nigerian Military government, led by Yakubu Gowon, saw this as rebellious and insisted on bringing the purported State of Biafra down. After the war, the military junta continued until 1983.

The Military government of Yakubu Gowon was toppled in another coup in 1975 by Murtala Muhammed, who was assassinated by Suka Dimka, which paved the way for Olusegun Obasanjo who served as Military Leader from 1976-1979. During this period, crude oil had been discovered in Nigeria, which increased the impetus for him to become Nigeria's president. In

³³ Eghosa, *Crippled Giant*, 60 ³⁴ Ibid, 63.

1979, Olusegun Obasanjo organized the election that introduced the second republic in the history of Nigeria.

In 1979, Alhaji Shehu Shagari was elected the President of Nigeria with Chief Alex Ekwueme as his Vice President. In 1983, this second republic government was overthrown in a coup on the 31st of December by Muhammed Buhari, an army officer, on the basis of massive corruption in the government of Nigeria. General Ibrahim Babangida became the next President after another coup on the 27th of August 1985. He promised to hand over power to the civilians, then he planned and executed an election in 1992, which was won by Bashiru M.K.O Abiola (Presidential candidate for the Social Democratic Party), though nullified by Babangida on the basis of electoral malpractice. In 1993, he relinquished the presidency to an interim government, which was headed by Ernest Shonekan. On the 17th of November 1993, General Abacha announced that he had accepted the 'resignation' of Ernest Shonekan and had 'dutifully' taken over as head of state to save the country from drifting further into collapse. 35 Abacha's promises were only an attempt to placate the Nigerians. His ascendancy to the Presidency of Nigeria was in no way different from the others. It was yet another coup d'état, which pushed Shonekan's interim government away, making Abacha the military leader. Abacha died in office on the 8th of June 1998, and was replaced by Abdulsalami Abubakar, who finally prepared the way for the third republic. In May 1999, Nigeria returned to civilian rule and has continued until today.

I have taken time to run through the history of Nigeria to make clearer the blazing fire on which Nigeria and her citizens sit on since the amalgamation. This history better explains the effects on nationhood from the Independence of the 1960s until today. This history is important in order to understand the present predicaments of Nigerians, which leaves the numeric strength

³⁵ Ibid., 273.

of Nigeria so confused. Next, I highlight some of the consequences of these equalities and inequalities, and how they affect contemporary situations today.

1.6 Consequences of Disunity: Equalities and Inequalities in Nigeria

In the beginning of this chapter, I started with the prayer for *Nigeria in Distress*, a prayer composed primarily for 'Peace and Unity' in Nigeria. I highlighted the presumed efforts made by the government to promote Unity in Nigeria though, in all reality, there has been no success.

One of the key reasons why Nigeria is divided today, based on the discussions so far, arises from the ethnic with religious affinity. Nigeria is a country of two major religious bodies, Islam and Christianity. There are still patches of African Traditional Religious groups in Nigeria, but these groups do not play a key role in the lives of Nigerians, as a majority of them have converted to either Christianity or Islam. Due to different religious affiliation, a peaceful coexistence continues to be an unrealized utopia in Nigeria. The belief system is completely different, where Christians cannot tolerate Muslims and vice versa. For some Islamic fundamentalists, Christians are infidels and should be killed at any opportunity. One instance of this fundamentalism was exemplified in the killing of the Igbos, which eventually led to the war of 1967. The Igbos were called *Nyamiri*, which means infidel and, once addressed as such, the person is killed.

Inclination to religious beliefs is fundamental in the retrogressive government of Nigeria. In terms of religion, Nigeria has never been 'one' people. During the Babangida regime, there was a need for religious tolerance, which would have helped in the peaceful transfer of government to civilians, but such transfer did not happen. Babangida had rationalized that the Abrahamic root of Christianity and Islam supposes an understanding between both, but this understanding is not the case, as adherents of both religions in Nigeria tend not to be allies. The

1987 Report on Political Bureau on return to civilian rule declares uncompromisingly that: "The two organized religions have the tendency to delay 'national integration' because of their negative tendency 'to create competing social orders' and to 'define the most basic community, thereby challenging the national community of Nigeria."36 Religious tolerance is an issue to state building in Nigeria, and added to it are the ethnic biases, which intolerance increases too.

Nigeria is a heterogeneous country with many ethnic groups. The many states making up Nigeria are not likely to be merged to become one. The amalgamation of the Northern and Southern protectorates in 1914 forced people from different ethnic groups into one country called Nigeria. The Northern part of Nigeria and the Southern part were never meant to be together, because the North and South are home to completely different people. It is important to note that colonial policies did not leave Nigeria a united country. Lugard made it clear that his task was to unify administrations and not peoples.³⁷

Amalgamation increased and entrenched the culture of hate in Nigeria, where people from different ethnic groups refuse to operate peacefully. Amalgamation remains a fundamental calculated attempt by the British to keep Nigeria eternally divided. Gould notes that: "Lugard's control of Northern Nigeria created the right atmosphere to induce divisiveness in the future, but it also fostered much hatred and distrust between the peoples."38 Tribal politicking has inflated so much that any attempt to improve national unity becomes impotent, since the different groups are not ready to cooperate to see unity to fruition.

This tribal politicking is evidenced in the 1962 and 1963 census of the first republic in which the figures from the North were highly inflated leading to national crisis. The various elections carried out from the first republic until today are not different from those of the first

Federal government of Nigeria, *Report of the Political Bureau* (Lagos 1987), vol. 2, pp 460-1
 Gould, *The Struggle for Modern Nigeria*, 5.
 Ibid., 16

and second republics. Voting is achieved only through ethnic and tribal means, "I can only vote for you, if you are my tribe's person," and this tribalism hinders Nigeria's ability to act as a unified country. Tribalism has augmented political instabilities, and instigated crises and thuggery in the political life of the nation.

Indirect rule made direct tax practicable in the North and in the South. There was imposition of stupendous tax rates on the people by the British, which caused riots in Lagos in 1908 and the popular Aba women's riot of 1929. This rioting was as a result of excessive taxes imposed on local traders in Aba, Southeast of Nigeria.

Finally, the coup and counter coups further hindered Nigeria by introducing dictatorship. All the Military regimes, like the civilian regimes, could not do anything to improve equity and justice in Nigeria. They squandered the national wealth, especially at the discovery of oil and its boom in Nigeria. It was a period of 'share the money,' which continues to this time. The soldiers who ruled Nigeria exploited the country, and fled away with huge sums of money belonging to the public. Corruption and human rights abuse reached their peak during these military dictatorships.

1.7 Contemporary Consequences of these heinous acts

The primary focus of this thesis is to advocate the "Revitalization of Nigeria-Equal Access: A case study on people with disabilities," as a call to include PWD into the life of the society and the Church. Nigeria as a country witnesses failures upon failures since its colonization. These failures make it impossible for the normal running of government, and eventually lead to the economic and social problems of today. These failures are most notable in the healthcare and educational systems. The healthcare system in Nigeria is in total chaos. There is no workable

plan for healthcare right now. This failure to plan affects the poor, and PWD all the more. Access to healthcare is a fundamental human right, and denial of such is an infringement of this right. In what follows, I look at healthcare for all, especially for PWD in Nigeria.

Chapter Two.

At the origin of many tensions that threaten peace are surely the many unjust inequalities still tragically present in our world. Particularly insidious among these are, on the one hand, inequality in access to essential goods like food, water, shelter, health; on the other hand, there are persistent inequalities between men and women in the exercise of basic human rights. (Benedict XVI. Message for the celebration of the World day of peace, 1 January 2007).

2.0 Healthcare in Nigeria and Attitudes toward People with Disabilities

In the previous chapter, I gave a historical overview of the problem in Nigeria, which is traced back to the colonial era. The mistakes of the British led to tribalistic tendencies in Nigeria, which led to the eventual breakdown of the moral as well as governmental administrative systems. An enthronement of corruption of different kinds normalized, eventually leading to the collapse of the healthcare system in Nigeria. In this chapter, I look at healthcare delivery in Nigeria, beginning with (1) healthcare financing in Nigeria, (2) substandard and fake drugs, (3) a need for rehabilitation and construction of hospitals, (4) infant and maternal mortality, consequences of poor healthcare facilities, (5) medical tourism & brain drain problems, (6) poverty, an obstacle to quality of life for PWD, (7) implications of social exclusion, and (8) general attitudes toward PWD.

2.1 Healthcare Financing in Nigeria

The Nigerian healthcare system has witnessed a gradual decline in recent years due to the inability of the government to provide the essential facilities that help in the better running of a healthcare system. The decadence in healthcare facilities in Nigeria, has to do with all the facets

of healthcare: personnel management, good hospital infrastructure, emergency services, keeping data sensitivity, pharmaceutical companies and so on.

The rise of oil trade in Nigeria in the early 70s and 80s, caused a considerable decline in budgetary allocation to the health ministry, instead of witnessing a considerable growth in the health system. Budgetary specification on the healthcare system in Nigeria hardly exceeds 3 percent of the overall national budget outlay.³⁹ With this state of affairs, primary attention cannot be given to healthcare improvement, as politicians loot and embezzle billions of dollars from the national treasury without being charged for their crimes.

Ichoku et al in explaining the rigidity of healthcare financing in Nigeria notes that in the 1980s, health spending averaged 1.9 percent of the expenditure of the Federal government. In 1996, it improved to 2.55 percent, 1.96 percent in 1997, 2.99 percent in 1998, 1.95 percent in 1999 and 2.5 percent in 2000. Budgets hardly exceeded 3 percent. 40 It is clear from this finding that the government gives little or no attention to the health of its citizens. The total spending of the government on healthcare funding is less than 0.2 percent of the GDP in comparison with the 1 percent standard set by the Commission on Macroeconomics and Health, and the 15 percent of annual national budget as stipulated by the Abuja 2001 declaration on "roll back malaria." More so, from these findings, it means that government expenditure amounted to only about a \$2 healthcare subsidy per capita while the ideal expenditure per capita on health is \$15. The government is only responsible for about 13 percent expenditure on health in the economy. The government, as such, is not satisfying its healthcare responsibilities to its citizens. The yardstick per capita spending in low income countries as agreed by WHO is \$34. This failure entails that

³⁹ Hyacinth Ementa Ichoku and William Munupuibeyi Fonta, "The Distribution Impact of Healthcare Financing in Nigeria: A Case Study of Enugu State," PMMA Working Paper 2006-17, October 2006. http://www.researchgate.net, Posted June 5 2014.

most families are left responsible for the financing of their health in Nigeria. 41 By 2010, the share of government expenditure on health did not exceed 3.5 percent, which still shows that the greater majority of families made up of poor people still financed their healthcare. In its 2010 documents, WHO notes that: "millions of people cannot use health services because they have to pay for them at the time they receive them. And many of those who do use services suffer financial hardship, or are even impoverished, because they have to pay."⁴² This hardship is true, especially in Nigeria, where people had to utilize ordinary chemists, who mix drug compounds and unlicensed medical practitioners to receive the care they needed.

Due to the negligible attention to the healthcare system, there is an explosion of private health practitioners in Nigeria, which has made the populace more vulnerable than ever. People now rely more on private healthcare systems than government provided health services. Since the government limits its attention toward healthcare, most of the available services are either too costly or not functional. Many private clinics do not have the standard facilities needed for the treatment of particular illnesses. This limit leads to the proliferation of poor healthcare in Nigeria. In response, many become chemists or sell medicine in order to relieve the health conditions of the poor and disabled. In some states, 75 percent of healthcare is provided by the private sector. 43 Private medical practice is also on the increase in Nigeria, as fewer medical doctors opt to work with the government. Some who work for the government also use the opportunity to manipulate patients by inducing them into visiting their private clinics instead of the government hospitals.

⁴² "The World Health Report - Health Systems Financing: The Path to Universal Coverage," WHO (2010a) http://www.who.int/whr/2010/10_summary_en.pdf. 43 Ibid.

The practice of selling and buying medications without prescriptions in Nigerian Chemist shops has become an opening for many dealers to extort money from the people. Originally, the intention was to help the poor, but many corrupt agents set up shops to exploit them. The healthcare system is porous, and the poor become more vulnerable. They are exploited by the doctors who invite them to their personal clinics, and when they cannot finance their medications, they purchase behind- the-counter medicine, where they are exploited all the more. It is important to note that all payments are expected before receiving service. There are few hospitals in Nigeria where the health insurance program is healthily active. The Federal Ministry of Health estimates that over 70 percent of healthcare payments are made out-of-pocket. 44 I remember taking a young accident victim to the hospital for treatment, and he was refused treatment until I made a deposit for care. Out-of-pocket payment is the most accessible way to procure healthcare in Nigeria, and this reality has stifled access for the poor and disabled who are not financially sound enough to participate in this option. The level of out-of-pocket in Nigeria is about US\$ 22.5 per capita per month, which accounts for 9 percent of total monthly income. Half of those who could not access care did not because of its cost. 45 It is very clear in Nigeria that out-of-pocket payment for healthcare and other economic consequences of illness impose a far greater burden on poor families than on high income households. 46 The unavailability of good insurance programs and other options fostering low payments to minimize out-of-pocket health expenditures has done a lot of damage in the lives of the vulnerable populations in Nigeria. It is the developing countries who suffer most for a lack of access to healthcare and the

⁴⁴ "National Bureau of Statistics: Poverty Profile for Nigeria 2010," http://www.nigerdeltabudget.org, posted February 12, 2012.

⁴⁵ "Federal Office of Statistics: National Living Standard Survey (NLSS) 2003/2004," Federal Office of Statistics Abuja, Nigeria.

⁴⁶ D. Mclyntre, M. Thiede, G. Dahlgren, M. Whitehead, "What are the economic consequences for household of illness and of paying fot healthcare in low- and middle- income country contexts?" *Social Science and Medicine* 62 no 3 (2006): 858-865.

other goods of life. In the midst of the poor, PWD are often the poorest of the poor, and the world's largest minority. In Nigeria, like other developing countries whose leadership is woeful, PWD suffer most since they are not just poor, but they are simultaneously segregated. They are segregated because most people think of them as less humans.

To revitalize Nigeria, healthcare facilities must be improved. This process must begin with the rehabilitation of our hospitals. They must be updated with the most recent and sophisticated healthcare equipment and infrastructure for sustainability of good health and access for all. Pharmaceutical companies are to be upgraded too in order to avoid fake and substandard drugs from entering the healthcare market. When these fake drugs enter the market, it is still the poverty-ridden masses who cannot afford creditable healthcare and inevitably suffer the most.

2.2 Substandard and Fake drugs as threats to healthcare delivery in Nigeria.

Poor quality drugs enter the healthcare market through the back door posing a big problem to healthcare security in Nigeria. The National Agency for Food and Drug Administration and Control (NAFDAC) in Nigeria has fought this problem since 1993 and has actually helped to safeguard the lives of Nigerians through the constant war it wages against fake and substandard drugs and medications in the Nigerian healthcare market. The former director of NAFDAC, late Dora Akuyili, had many enemies in high places. She found herself in bad relations with "Ogas at the Top," who promoted this corruption through illegal importation and production of substandard and fake drugs. In 2009, WHO defined substandard drugs (out of specification products) as "genuine medicines produced by manufacturers authorized by the national

medicines regulatory authority which do not meet quality specifications set for them by international standards."⁴⁷ These drugs are counterfeits, unlicensed, and are not up to standard.

In Europe, when drugs do not meet regulated standards they are recalled. The European Medicines Agency recommended the recall of eight generic medications containing clopidogrel for which the active ingredient, API, produced in India, was found substandard following an inspection of the manufacturing site. 48 Similar cases were recorded in United States, and companies suspected of marketing substandard drugs were suspended and the drugs recalled. Ranbaxy is a typical example of such a company. 49 Western countries work hard to subjugate these problems while Nigeria disperses them at large and without regulation.

Nigeria imports these substandard drugs and delivers them into the healthcare market. In many cases too, licensed Nigerian companies manufacture these drugs and push them into the market to the detriment of poor consumers. For a better life and better health in Nigeria, pharmaceutical companies and hospitals must be regulated and improved, to better care for people.

2.3 A need for the rehabilitation and construction of hospitals in Nigeria.

At this point in my project, it is important to draw attention to the urgency needed to construct new hospitals in Nigeria. Hospitals are at the heart of global and public health security because without good hospitals, a country's health system cannot function well, if at all. I see the maintenance of the existing hospitals and the construction of new ones as the key to the health challenges we have in Nigeria. Further attention is needed on rural primary health care and

⁴⁷ World Health Organization, "Counterfeit medicines: frequently asked questions," 2009. www.who.int/medicines/servicescounterfeit/faqs/QACounterfeit-October2009.pdf.

⁴⁸ Atholl Johnston and David W. Holt, "Substandard drugs: a potential crisis for Public Health," Journal of Clinical *Phamacology* 78, no. 2 (2013), 218. ⁴⁹ Ibid.

donors are intent on securing basic preventive services.⁵⁰ Preventive services are very important. Intervention is also very important.

In Nigeria many people are sick, poverty-ridden and languishing while some rest in affluence. Most do not have access to hospitals that are able to assist them, as the few hospitals available are expensive and in the hands of private practitioners. Poor people cannot pay since there is no workable health insurance program established. In the rehabilitation process of hospitals in Nigeria, the government is supposed to bear in mind that it should encompass all the spheres of hospital life. The target is not just the construction of a new hospital, but maintenance of the existing structures. In addition, more attention must be given to nursing and doctor services, improvement of infrastructure, transportation, health equipment and so on, which will guarantee equal access for all.

I call attention to hospital management and maintenance in general, that is why I am using the word "rehabilitation." Problems emanating from wages must be addressed as this causes doctors, nurses and even the administrative staff of the government hospitals to strike. When a strike happens, rich patients can immediately switch from the government hospital to the private clinics of the doctors. However, the impoverished patients who cannot afford the dubious charges of most of the private clinics are unable to make this switch so easily. What becomes their fate? It is very simple: most end up dying unless they are fortunate enough to be covered by volunteer nurses and doctors of the Catholic workers volunteer force. No matter the plans of the government with regards to healthcare delivery, there is an urgent need to improve the dilapidating and dilapidated hospital system in Nigeria.

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⁵⁰ Maureen Lewis, "Better Hospitals, Better Health Systems: The Urgency of a Hospital Agenda," *CGD Policy Paper 053*, (2015), at www.cgdev.org.

I remember one of the fascinating stories I read online, an interview by Lowell Bergman, with Nuhu Ribadu, the former EFCC (Economic and Financial Crime Commission) Director in Nigeria, on the corruption charges against Jack Stanley, the former KBR (Kellogg Brown and Root) engineering company chief executive, who pled guilty for instigating bribery worth about \$180 million for an oil contract in the Niger Delta area of Nigeria. There had been a report by World Bank that Nigeria lost about \$300 billion over the last few decades over corruption. The case implicated many top government officials and the "Ogas at the Top," including the then Vice President, Atiku Abubakar. Ribadu explained that he saw this action as scandalous and a sabotage to the nation. Commenting on this, Ribadu said: "A hundred and eighty million dollars could build 100 hospitals. This \$180 million could build schools, probably, will provide thousands of kilometers of roads by African standard." All these facilities mentioned by Ribadu are essential amenities necessary for a good life. The money stolen could have been used to better the lives of the poor masses in Nigeria, but was instead siphoned by corrupt, greedy and duplicitous politicians.

The Nigerian Health Minister on the 17th of December 2014 urged Nigerians in his speech on the "National Health Act" to be patient, as a top priority in the President's agenda is the good health of Nigerians. In his speech, Dr Khaliru Alhassan states:

The Health Sector is one of the most important sectors which impact on ALL areas of national life and economy and not an institution. It encompasses several tiers of Government including the private sector. It is one of the two most critical social sectors which form the bedrock of the transformation agenda of Mr President and a major area of impact. Following recent upheavals across the world and the impact of disease agents on human relationships, movement etc, health issues have become critical to the economy, national security and development. That is why the world is now advocating for a paradigm shift towards "Health in all Policies" in order to ensure that Health issues are at the center of

⁵¹ PBS News Hour, "Economy: Corruption Case Exposes Scope of Bribery in Nigeria." posted April 24, 2009. www.pbs.org

National priorities. Therefore in assenting to the NHB, the President has unleashed a most critical transformation in the Health Sector. WE thank you sir. 52

This is a beautiful speech by the minister, but this is not the first time such rhetoric is used to confuse Nigerians. In the past many beautiful speeches have been given, though when it is time for action, the project will not be realized. It is important that the government makes promises, but it is more necessary that the promises be fulfilled. Of course, this promise was never fulfilled, because that same government was shot off by Nigerians, as they became tired of the wickedness of certain individuals who siphoned millions of dollars from the National coffers and then President Goodluck Jonathan was unable to checkmate them. ⁵³ The world advocates for equal access and Nigeria is part and parcel of this process. The problem will always be in execution. For, more than likely, the finances will end up in the hands of some cruel and greedy politicians, who decide to divert funds for their own private interests. Alhassan's speech was given on the eve of the elections, therefore, while its promise is hopeful, it could have simply been a political manifesto. For that administration, just like the past regimes, proved to be marred with corruptive practices which contributed to their non-re-election.

Nigerians have been relegated to abject poverty because of the bizarre leadership witnessed through the history of the country. As in so many nations, the poor and disabled get poorer while the rich get richer. In Nigeria, their poverty is exacerbated by corruption. Nigeria's poor dwell in dilapidated houses and the government does not care about their wellbeing. There are no homeless shelters apart from the few owned by the Church. Our politicians and their cronies are busy looting the nation to bankruptcy, when the poor and needy have no daily bread,

⁵² Federal Republic of Nigeria, "Statement of the Honourable Minister of State/Supervising Minister of Health on the National Health Act," Abuja, Nigeria, 17 December, 2014.

⁵³ Morgan Winsor, "Nigeria Corruption Under Goodluck Jonathan Administration: Former Minister Accused of Mishandling \$700 M Bridge Project Funds," posted February 9, 2015. http://www.ibtimes.com.

few places to lay their head, and most are dying for lack of healthcare. Corruption manifests itself in the ever increasing poverty levels in Nigeria. In fact, Nigeria was featured in *Transparency International's* most corrupt countries in the World. The most recent survey of the Nigerian Public sector places Nigeria 136th most corrupt country in the world out of 167 countries and 3rd most corrupt country in Africa, after only Somalia and Guinea Bissau. ⁵⁴ Nigeria is shamefully one of the most corrupt countries in the world.

In the most recent past, Nigerians have come out openly to condemn the actions of an adviser to the presidency on security matters, Namadi Sambo Dasuki, who was accused of stealing about \$2 billion from arms purchase money, which he shared among his friends to the detriment of the nation. This theft amounts to billions of Naira (Name for Nigerian currency), which would have been used for the betterment of the lives of the vulnerable populations in Nigeria. When arraigned, Dasuki claims to have distributed the money to PDP (Peoples Democratic Party) presidential primary election delegates – an act the Economic and Financial Crimes Commission said was punishable under section 315 of the penal code Act, Cap 532, Vol. 4 laws of the federation 2004. This flagrant corruption is the dilemma of Nigeria, where a public servant squanders a national treasury without being called to give an account. This tremendous amount siphoned could be used rather to build hospitals with the highest technological inputs for the poor and needy in Nigeria. It could be used to enhance the dilapidated insurance programs in the country accessible only to a few civil servants, thereby marginalizing the poor.

⁵⁴ Nigeria News Desk, "Nigeria Ranks 136th Most Corrupt Country in the World," January 27 2016. https://nigeriannewsdesk.wordpress.com.

Fox News, "Nigeria orders arrest of official accused of stealing \$2B meant to buy Weapons to fight Boko Haram," November 17 2015. http://www.foxnews.com.

⁵⁶ Nigeria News Desk, "Nigeria Ranks 136th Most Corrupt Country in the World."

My insistence on a hospital agenda is because without good hospitals in Nigeria, any serious move for better and equitable access to other goods will not be achieved. Global and public health needs cannot be realized in a country where existing hospitals are not accessible to the majority. As Maureen Lewis, a researcher with the Center for Global Development in Washington DC recognizes, "Adjusting to shifting health care needs of chronically ill through improved continuity of care across inpatient and outpatient settings, and moving away from episode-specific treatment will be an essential element of reinventing hospitals." To improve the lives of the critically ill, disabled, and chronically ill in Nigeria, whose lives like the lives of those without healthcare needs, are very important, hospitals with the most advanced technological facilities are needed.

Apart from improving the State and Federal teaching hospitals in Nigeria, Psychiatric hospitals, rehabilitation homes for the disabled, a host of other private hospitals, and community health centers are also of paramount importance to healthcare delivery. So many people living in the rural parts of Nigeria are denied good healthcare services. This lack contributes to the high infant and maternal mortality rate in the country. Many community healthcare facilities are rustic and unable to meet the growing demands of healthcare. Community health centers are primarily made up of four different departments: (1) preventive clinicians who visit schools and the neighborhood providing care to chronically ill patients; (2) outpatient elderly care clinicians who visit the aged to check their blood pressures, prescribe and give treatments; (3) maternal care clinicians who look after pregnant women, making sure they are fine; (4) and other clinicians who work to prevent anemia, rickets and other illnesses associated with kids between one

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⁵⁷ Maureen Lewis, "Better Hospitals, Better Health Systems," 3.

through six.⁵⁸ These four components are prerequisites for every community healthcare center, but in Nigeria, it is rare that a community healthcare center operates at this level.

Most of the community healthcare centers, especially those in the remotest parts of Nigeria have in most cases, just a single nurse. These nurses in most cases are midwives who are planted for the purpose of child delivery. One hardly finds any permanent nurses in these community health centers. Most times, nurses refuse to work in rural communities. Further, due to the challenge of visiting centers located in rural communities, doctors rarely visit them, and abandon their obligations to the poor.

When medical doctors and nurses flee from their obligations to these poor communities, the resultant effect is always negative. So many of the villagers will place their attentions toward the local herbal doctors and other traditionalists for health purposes. In child delivery, many women choose traditional midwives over properly trained and educated practitioners, as a result of the gap created by the health personnel shortages. Nigeria registers high infant and maternal mortality because of the negligent attitude of nurses and doctors who have been posted to work in certain communities but do not fulfil their obligations. Patrice Spath reminds us that, "Inadequate systems often impose conditions that limit, constrain, or in other ways control people's behavior in ways that produce mediocrity." These nurses and doctors are constrained by the challenges they face as a result of the government's inability to provide necessary incentives. Infant and maternal mortality are high in urban areas too, demonstrating that we still need well-trained and well-equipped doctors and nurses throughout Nigeria.

⁵⁸ Nancy M. Kane and Nancy C. Turnbull, *Managing Health: An International Perspective* (San Francisco: Jossy Bass Publication, 2003), 39.

⁵⁹ Patrice L. Spath, *Leading Your Healthcare Organisation to Excellence: A Guide to Using the Baldrige Criteria* (Chicago, Illinois: Health Administration Press, 2004), 1.

2.4 Infant and Maternal Mortality, consequences of poor healthcare facilities.

Infant and maternal mortality are two sides of the same issue, and have become a threat to public health in Nigeria and in other developing countries. Infant and maternal mortalities were both included as a key issue for the United Nations project in the "Millennium" Development Goals" (MDG). ⁶⁰ This concern raises awareness of government and healthcare workers in the whole world to work against the threat imposed by infant and maternal mortality. In Nigeria, as elsewhere, there are still cases of infant and maternal deaths today. The term "maternal mortality" used in this chapter corresponds to the term "pregnancy-related mortality," as defined in the latest version of the International Classification of Diseases (ICD-10). 61 In explaining the meaning of maternal mortality, the health survey document notes: "The ICD-10 definition of a pregnancy-related death is the death of a woman while she is pregnant or within 42 days of the termination of her pregnancy, irrespective of the cause of death (WHO, World Bank, UNFPA, and UNICEF, 2012)."62 The survey done in Nigeria reveals the urgent need of tackling this problem. According to WHO reports in 2001, approximately 529,000 maternal deaths occurred with more than 99 percent occurring in developing countries, and among these countries Nigeria rates second most with an estimation of 37,000 maternal deaths annually. In this ratio, it is important to note, two-thirds of the deaths occurred in the rural areas of Nigeria. ⁶³

In the 1999 Multiple Cluster Survey, maternal mortality in Nigeria at the rural areas was double of that of urban areas. In rural areas annually, the ratio is 828 maternal deaths per 100,000 live births while the urban is 351 maternal deaths per 100,000 live births.⁶⁴ In most cases, these

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⁶⁰ The World Bank, "Millenium Development Goals," http://www.worldbank.org.

⁶¹ National Population Commission (NPC) and ICF International, "Nigeria Demographic and Health Survey 2013," (Abuja, Nigeria and Rockville Maryland, USA: NPC and ICF International, 2014), 301.
⁶² Ibid.

⁶³ K.M. Osubor, Adesegun O. Fatusi, and J.C. Chiwuzie, "Maternal Health Seeking Behavior and Associated Factors in a Rural Nigerian Community," *Maternal and Child Journal* 10, no. 2 (2006), 1. ⁶⁴ Ibid.

mothers pass away in child bearing due to hemorrhages and complications, including complications due from past abortions. These situations can be averted and safe delivery assured if women had proper access to healthcare, but the primary problem is that so many women, especially those in the rural areas, have limited or no access to health facilities. The attention given and accessibility to antenatal care delivery and services play key roles here. The availability of obstetricians in cases of emergency are all necessary in order to reduce death during and following delivery. In 2008 and 2013, demographic and health surveys showed little or no discrepancy: the ratio in 2008 was 545 deaths to every 100,000 live births and then in 2013, 576 deaths to every 100,000 live births. Research shows that Nigerian women living in rural areas suffer most in the present condition of healthcare delivery and security.

For lack of accessibility to healthcare, most poor women in the rural villages in Nigeria succumb to "Traditional Birth Attendants" (TBA) to seek refuge. Some of these TBAs have no formal education; they only manifest their gifts and talents in a traditional way, sometimes through the use of herbs. Proper care during pregnancy is essential, but some of these rural women believe that they get more attention from TBAs as compared to professionally trained health workers. This belief is a result of the attitudes of some health workers toward mothers from rural areas. Factors associated with the choice of place of birth include age, education, distance from health facility, attitudes of health workers, quality of service, and cost. 66 Since TBAs are not professionals, in some cases the result is either maternal or infant mortality. In some cases, gender inequality also plays a role in denying rural women access to professional healthcare workers. Some cultures in Nigeria mitigate the rights of women; as such, their

^{65 &}quot;Nigeria Demographic and Health Survey," 306.

⁶⁶ IP Okafor, A O Sakoni, SS Ezeiru, JO Igboaja, V Inem, "Orthodox versus unorthodox care: A qualitative study on where rural women seek healthcare during pregnancy and childbirth in Southwest, Nigeria," *Malawi Medical Journal* 26 no. 2 (2014), 45-49.

husbands are ranked higher than they are. In antenatal care, research shows that some men in Bauchi State refuse their wives antenatal care, sometimes because such care will reflect badly on them.⁶⁷ This thinking is a traditional belief that women are incapable of self-care and dependent on the decisions of their husbands. Education is still a weapon and people should be taught to be more sensible.

Infant mortality is the other side of maternal mortality. So many infants lose their lives at birth and others before the age of five. One of the focus of the MDGs is to reduce under-5 mortality to 64 deaths per 1,000 live births and infant mortality to 30 deaths per 1,000 live births by 2015 (Federal Republic of Nigeria, 2010a). Early childhood mortality rates are high as evidenced from the demographic proof. Infant mortality in Nigeria is also not encouraging as one sees from the records:

The infant mortality rate was 69 per 1,000 live births for the five years preceding the survey, and the child mortality rate was 64 per 1,000 children surviving to age 12 months, and the under-5 mortality rate was 128 per 1,000 live births. This implies that one in 15 Nigerian children die before their first birthday and that one in eight die before their fifth birthday. During the same five-year period, the neonatal mortality rate was 37 deaths per 1,000 live births, and the post neonatal mortality rate was 31 deaths per 1,000 live births.

This data, published in 2013, shows that from 2008 to 2013, infant mortality remained a big problem in Nigeria. From then until today, considering the focus of the MDG to decrease early child mortality, the situation remains terrible in Nigeria. The most frustrating reality is that causes of early child mortality can be controlled through fidelity to care during pregnancy for the

⁶⁹ Ibid.

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⁶⁷ Khalid Omer and Sani Abubakar, "Seeking Evidence to Support efforts to increase use of antenatal care: a cross sectional study in two states of Nigeria," *BMC Pregnancy and Childbirth* 14, no 380 (2014), 5. www.biomedcentral.com

⁶⁸ NPC and ICF, "Nigeria Demographic and Health Survey," 145.

child to be born healthy, postnatal care, and vaccination for preventable diseases, nutritional support for mother and infant, and so on.

Accessibility to community health centers for vaccination and early infant care is always a problem encountered in the bid toward these goals. As noted above, one in every 15 Nigerian children dies before reaching the age 1, while in the under 5 mortality, one in every 8 Nigerian Children die. 70 Moreover, this research shows that Nigerians in the rural villages, like Bauchi State of the north, suffer more than any other group from limited access to healthcare. Since colonization and independence, access to healthcare has always been a problem more in the north than any other part of Nigeria. Gender and social inequities and inequalities are also manifest both in the culture and attitudes of the past governors of the northern states. The decline in healthcare delivery, and healthcare in general, in the northern states is a big concern for health and disability advocates in Nigeria. Due to these problems encountered in healthcare systems and delivery in Nigeria, the infant and maternal mortality rates as well as substandard/fake drugs, limited personnel, poor infrastructure, many Nigerians who can afford it now seek healthcare overseas for fear of unwarranted and careless death.

2.5 Medical Tourism and Brain drain problems as byproducts of failing healthcare facilities and delivery in Nigeria.

Nigeria and some other developing countries witness a massive embrace for medical treatments overseas. I remember a politician friend who said, "I cannot visit a Nigerian hospital for medical treatment, when I am sick." He explained that he visits the United States for his routine health checks. I remember asking him, "If my grandmother in the village is sick, can she make it to the United States too for treatment?" I cannot blame him for coming to the US on a medical trip,

⁷⁰ Ibid.

because he has to take care of his health, but I blame people like him in the government, who have not done enough to guarantee safety of life and properties for the poor masses.

Medical Tourism is the movement of individuals abroad or overseas to seek medical services.⁷¹ Reports have it that Nigeria loses more than \$500 million annually to medical tourism. 72 This tourism is due to lack of adequate medical facilities that force Nigerians, who can afford it, to travel abroad to find the best treatment. Patients and their families spend between \$20,000 and \$40,000 per trip on each sick person. The construction of new healthcare facilities will help Nigeria to minimize this loss to its own economy. This money invested in healthcare could also help Nigeria economically increase. 73 Medical tourism is simply a byproduct of the ailing healthcare system in Nigeria and other developing countries, but it can be stopped if Nigeria provided necessary treatments for the sick. India, Thailand, Malaysia are some of the developing economies where most Nigerians visit for medical treatments. India is positioning itself as a key player in the global medical market and is known for care of heart related diseases and cosmetic and joint surgeries. 74 In India, nevertheless, there is a greater percentage of poor people to compare with the rich. Foreigners and rich country men enjoy this "Special Patrimony," while as in Nigeria the rest of the poor cannot afford the same luxuries. Who is fooling who? This is a question every sensible person should answer; it can as well remain "food for thought."

Secondary to medical tourism is the rising 'brain drain' problem in Nigeria today. Health workers after graduating from the universities and nursing schools migrate to the western countries to continue their lives. However, it is not only a Nigerian problem, as countries like

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⁷¹ Kristen Smith, "Problematization of Medical Tourism: A Critique of Neoliberalism," *Developing World Bioethics* 12 no. 1 (2012), 2.

⁷² Joseph Ibrahim, "How Nigeria is improving its health facilities," <u>www.nigeriamuse.com</u>, posted April 13, 2013

⁷⁴ Smith, "The Problematization of Medical Tourism," 1.

Ghana, Cameroon and other developing nations suffer this same migration. The brain drain of qualified health professionals, is a child of unemployment and malfunction in the Nigerian healthcare system. If there are good hospitals, pharmaceutical industries and other important facilities in Nigeria, the rate of migration for greener economic pastures to the global north will surely reduce. The medical brain drain represents an enormous transfer of wealth from the global South to the North. Nigerians and people of other developing nations leave because they find better opportunities in the countries of migration in terms of wages and job opportunities. Most Nigerians and Ghanaians, for example, migrate to the United States or United Kingdom to relieve fears of a language barrier as well as surety of job opportunities. For this reason, the Nigerian health sector lacks employee power and as such, most rural communities are denied healthcare services. The effects of these denials are suffered most by PWD.

2.6 Poverty: an obstacle to Quality Life for People with Disabilities.

Poverty is the greatest problem PWD face in Nigeria as elsewhere. For A. Amusat, an advocate for PWD in Nigeria, "Poverty makes people more vulnerable to disability and disability reinforces and deepens poverty." In Nigeria, poverty is the 70% cause of disability. If the poor on the streets are educated, empowered and have something meaningful to do, the rate of poverty in Nigeria will decrease drastically. However, it is not enough to give them food. One must liberate them from their present situation, which will be advantageous to the society. It is also important to think of how to make the lives of poor people and especially PWD better through

⁷⁵ Ruth Groenhout, "The brain drain problem: Migrating medical professionals," *International Journal of Feminist Approaches to Bioethics*, 5, no.1, (2012), 2.

⁷⁶ A. Amusat, "Disability Care in in Nigeria: Need for Professional Advocacy," *African Journal of Physiotherapy and Rehabilitation Sciences 1*, no 1 (2009): 35.

education, skills development, employment, nutritional support, and access to housing and healthcare.

Many PWD are sick and need healthcare, but because of their conditions most health professionals avoid them. Many PWD are uneducated, consequent to their inability to fund themselves in school. It is only a few wealthy families who are able to help family members with disabilities to go through school, while others are reticent to seek these opportunities, especially when it is a child with intellectual disabilities. The greater percentage of PWD in Nigeria is consequent to poverty. A disability survey made by Natalie Smith in Kogi and Niger states of Nigeria in 2005 reveals that poverty is the key to disability in Nigeria.⁷⁷ In this survey, one discovers that PWD are more prominent in the Muslim or Hausa speaking areas of the north than in the Christian dominated area of the south. This prevalence is attributed to poverty, lack of education and reluctance to access antenatal care like the Bauchi scenario noted above. PWD might have an interest to improve their lives but do not have access to the enabling environment and infrastructure to pursue education. In this project, Smith working with the Leprosy Missions, investigated 1,093 people with disabilities. She found that 37 percent had visual disabilities, 32 percent lack mobility, and 15 percent are deaf and mute. A greater percentage of them were young people below the age of 21 years. What is interesting here is that 72 percent of these people are Muslims and 61 percent were unemployed. 78 Most of these people are young, disabled, and from a particular locality. It is clear that poverty and illiteracy are the commanding factors for disability in that locality. It is appalling that the government, through her delegated powers to the states and local administrators cannot do anything to rescue the lives of these impoverished PWD.

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⁷⁷ Natalie Smith, "The Face of Disability in Nigeria: A Disability Survey in Kogi and Niger States." *Disability, CBR and Inclusive Development 22* no.1 (2011), 36.
⁷⁸ Ibid.

PWD are often labeled as society and state nuisances, the majority could not make it through elementary school, their primary occupation becomes sitting at the gates of churches, hospitals, mosques, government auditoriums, market places and other public places in search of alms from passersby. In most cases, they become objects of pity instead of respect until he or she proves capable of overcoming a physical or mental limitation through extraordinary feats. ⁷⁹ To overcome these limitations involves creating an opening by the government and the Church which enables PWD to engage their potentials. In Western countries, these openings have been created through disabilities rights movements. In Nigeria, these opportunities remain an unachieved utopic ideal.

2.7 Implications of Social Exclusion in Nigeria.

Exclusion by the able bodied of PWD remains a key factor in the decadent situation in Nigeria, in the government and also in the church. Growing up in Nigeria, my understanding of disability rights was minimal and, as a result, I gave limited attention to issues concerning PWD. The presence of so many advocacy rights activists attempt to bring more awareness and consciousness of the deplorable state of PWD in Nigeria. However, the primary concern of the government in Nigeria is how to appropriate power, re-election, and handing the position over to someone able to cover up their mess. Africa, as a whole, is very selfish, and refuses to promote disability rights and advocacy at many levels. Disability rights are about justice, not favoritism or corrupt privilege. Giving to each, what is due, not out of sympathy but by their merit as members of the human community, equal in dignity to all. As with others, PWD have the right to a good

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⁷⁹ Joseph P. Shapiro, *No Pity: People With Disabilities Forging a Civil Rights Movement* (New York: Times Books, 1993), 17.

life, educating social amenities, infrastructures promoting their healthy wellbeing, and sources of rehabilitation.

At budget deliveries at the beginning of each year, many things are said about the needs of PWDs, but at the end, none or very little are provided. Popay, et al, commenting on social exclusion writes, "the consequence of social exclusion are unjust allocation of resources and unequal rights within the economic, political and cultural spheres."80 As a weapon of inequality, exclusion dilapidates a country's well-being. Exclusion promotes a system of an unjust distribution of resources, power and authority that fails to provide the conditions necessary for entire populations to meet and go beyond basic needs. Alternately, inclusion enables participatory and cohesive social systems, values diversity, guarantees peace and human rights, and sustains environmental systems.⁸¹ The anti-disability rights in disguise and openly in Nigeria is endemic. This anti-rights attitude is found in people outside the government and within both the legislative and executive arms of the Nigerian government. The result is a kind of a lackluster attitude of the government to address the concerns of disability rights activists in Nigeria and stop the prevailing exclusion against people with disabilities. It wouldn't be an over statement to say that corruption has become so pluralizing in Nigeria that it has reached a point of no return. This situation can only be remedied if the government and all Nigerians reconvene to discuss the national conscience, so as to work for the betterment of Nigeria, with special attention on disability rights. If about 25 million Nigerians are disabled as noted above, one begins to ask many questions, especially when so many are marginalized.

⁸⁰ J. Popay, S. Escorel, M. Hernandez, H. Johnston, "Understanding and Tackling Social Exclusion", WHO Social Exclusion Network (2008), 7.

 $http://www.who.int/social_determinants/knowledge_networks/final_reports/sekn_final\%20 report_042008.pdf \ ^{81}\ Ibid.$

If exclusion impedes economic stability, then the marginalization of about 25 million people in Nigeria is a fundamental set back to the growth of the nation's economy. Fundamentally, the colonial masters did not do their homework well before amalgamating the northern and southern protectorates. This failure leaves Nigeria unsettled until today. Being at the helm of affairs in Nigeria until 1960, when Nigeria had her independence, what role did the British play in the area of Special Education for children with disabilities in Nigeria? Reading through history, one sees that Special Education is not as novel an approach as many may think. As early as 1810 in Australia and 1901 in Argentina, then countries like Iran in 1945, and Brazil in 1961 recognized Special Education. The first mention of Special Education in Nigeria was in 1975 with the Lagos Education Act. ⁸² This late development shows how behind Nigeria is with rights and advocacy for PWD.

The able bodied tend to neglect PWD in Nigeria, and this neglect continues because the government also neglects them. Nigeria is part of the World Health Organization and vows allegiance to the group. In 2005, WHO gathered and focused a significant percentage of their discussion on the empowerment of PWD. Here are some of the excerpts from that conference:

To organize a meeting of experts to review the health and rehabilitation requirements of persons with disabilities. To promote studies of incidence and prevalence of disabilities as a basis for the formulation of strategies for prevention, treatment and rehabilitation. To produce a world report on disability and rehabilitation based on the best available scientific evidence. To ensure gender equality in all measures, with special attention to women and girls with disabilities, often subject to social, cultural and economic disadvantages. To participate actively and constructively in the preparatory work for the United Nations comprehensive and integral international convention. To promote and

⁸² Josephine Agujiobi, "A Comparison of equal rights, beliefs, attitudes of Nigerian Parents living in the United States and Nigerian Parents living in Nigeria to People with Disability" (Ph.D. diss., Columbia University, 2007), 25.

protect the rights and dignity of persons with disabilities, in order that it may be adopted by the General Assembly as a matter of priority. 83

Eleven years since and looking at the implementation of the consensus reached by WHO member states, Nigeria is still far from what is mentioned above. Reading through this excerpt challenges Nigeria all the more to reconvene in order to incorporate the excluded PWD in its affairs.

The consensus of Nigerian signatories promises to take care of PWD with special attention to health and rehabilitation, promotion of equality rights for all whether disabled or abled. In the heart of this excerpt are the rights of women, who in a country like Nigeria, where hegemonic normativity is the norm are seen as unequal to men. A culture that promotes promiscuity and infidelity among men, corners a woman as a vixen when she is found either promiscuous or unfaithful. A typical example is the case of Amina Lawal, a Hausa woman who was sentenced to death by stoning by the sharia (Islamic) court in 2002 for sleeping with another man though already separated from her husband at the time. This sentence is arrant barbarism, and if not for the intervention of human rights activists in Nigeria and the world at large, Lawal would have been stoned. According to the embassy of the Federal Republic of Nigeria (2001-2003), "Nigerian Society functions in a highly patriarchal fashion, with men exerting broad control over the lives of women, who are less educated and have limited access to health and social services."84 The document records that this inequality is more prevalent in the Muslim communities since the women are confined at home according to an Islamic tradition called Purdah (Seclusion of women from public places). Oppression and violence against women is still

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⁸³ WHO, "Fifty Eight World Health Assembly Document" (May 25, 2005), 3. http://www.who.int/disabilities/WHA5823 resolution en.pdf

⁸⁴ Okafor Cyprian Uzoigwe, "The Relationship Between Culture, Gender, Beliefs, and The Attitudes of Nigerians Toward People with Disabilities" (Ph.D. diss., Columbia University, 2007), 4.

prevalent in Nigeria, and other developing countries, and this violence leaves many women vulnerable to disabling conditions in Nigeria today.

2.8 Attitudes and Negative biases against People with Disabilities in Nigeria.

Often, I ask myself and my friends, why Nigeria and Nigerians treat PWD as second class citizens? Why is it so difficult to incorporate them into the system? Most times, this is a result of misunderstanding and limited experience in relating to PWD. Attitude is defined as a relatively lasting cluster of feelings, beliefs, and behavioral tendencies, directed towards specific persons, ideas, objects, or groups. 85 Attitude is behavioral, it is how one expresses his/her feelings toward or against another person. Uzoigwe, who did her doctoral dissertation at Columbia University on culture, gender and disability, writes that attitudes are able to fit together because people's attitudes derive from some underlying core system of values or beliefs or culture. 86 The way Nigerians see PWD stems from a cultural with ethnic beliefs that try to subjugate PWD as social ills or the evils of the society. Attitudes follow beliefs and in most cases cannot be separated. Culture also plays a role in the formation of attitudes toward PWD, as well as women in Nigeria. Culture propels people, by its belief system, to have a particular understanding about disability. The understanding one learns in Nigeria, leads to the formation of a fundamentally negative bias against PWDs. Fundamentally negative biases conceal the positive attributes a person with disability has, and these biases act as a powerful source of prejudice that further mistreats those who are already disadvantaged. 87 In such situations, PWDs become stereotyped into an ungodly confinement.

⁸⁵ Ibid.

⁸⁶ Ibid.

⁸⁷ Harold E. Yuker, ed, Attitudes Toward Persons With Disabilities (New York: Springer Publishing Company, 1988), 3.

Culture is a system of life of a community that is passed from generation to generation and age to age. It influences the life of the community as members begin to act in accordance with the dictates of the culture. Nigeria is a country of diverse cultures, since she is rich in ethnicity, it is a country made up of three major ethnic groups of Hausa, Yoruba and Igbo, then more than 500 other (minor but large) ethnic groups. This situation makes it more difficult for peaceful co-existence between PWDs and the able bodied due to the negative connotation of spiritism and mystical understandings of disability in some ethnic groups. Culture influences the way people think, their beliefs and values, and in most cases, it determines what people take as true. Culture goes with stigmatization and labeling. In the Hausa religious with traditional culture, you see how women are stereotyped and rendered impotent to engage their horizons especially in the matter of education.

In Igbo land, the eastern part of Nigeria, many people are stereotyped and stigmatized by a particular cultural concept called *Osu*. *Osu* is a traditional belief that a particular individual, group or community has been sacrificed to the gods and as such have nothing to do with the rest of humanity. Marital unions are not allowed between an *Osu* and the rest of the people, so they are confined to themselves. The Church has fought and is still fighting this pervasive stigmatizing belief, but to no avail. Many pretend exclusion is over, but I know it is not, as people still reject communication and mixing with the *Osu* in certain societies. Even in the church, it is presumed to be over, but the catechist would not give his daughter for marriage to one labelled as *Osu* because they are still seen as outcast.

Some others see PWD as a punishment from the gods. They call them *Ogbanje*. An *Ogbanje*, depicts bad luck. Children who are *Ogbanje* are killed or taken to the traditional shrines and exorcised. Growing up in the midst of such stigmatization does not give the

individual the freedom and authenticity to succeed in the society since the person will not have the opportunity to prove his/her worth.

In Yoruba, the Southwest of Nigeria, research has shown such stigmatizing situations on PWDs. Ogundola Olusola notes that a person with disability is commonly referred to as abirun in rural communities. The word abirun connotes a "person who is contagious," 88 not as carrying a contagious disease, but being contagious her/himself. Framing PWDs in this way promotes inequality and leads to unequal opportunities. In a country like the US and other Western countries where disability rights are better respected, to some extent, such persons might succeed, but in Nigeria, where survival of the fittest rules, success among PWDs is rare. These negative biases become embedded in the community and make the life of PWDs ever more difficult in Nigeria.

Having noted some of the challenges faced by the poor and disabled in Nigeria, as a result of poor governance, especially in matters of healthcare delivery and general attitudes, I focus the next chapter on a theology of liberation and emancipation for PWD in Nigeria. Through the Church's teachings on solidarity and the preferential option for the poor, I will advocate for equal rights and access for PWD in Nigeria.

Chapter Three.

While every exercise of the apostolate should be motivated by charity, some works by their very nature can become specially vivid expressions of this charity. Christ the Lord wanted these works to be signs of His messianic mission (cf. Matt. 11:4-5). The greatest commandment in the law is to love God with one's whole heart and one's neighbor as oneself (cf. Matt. 22:37-40). Christ made this commandment of love of neighbor His own and enriched it with a new meaning. For He wanted to equate Himself with His brethren as the object of this love when He said, "As long as you did it for one of these, the least of My brethren, you did it for Me" (Matt. 25:40). Assuming human nature, He bound the whole human race to Himself as a family through a certain supernatural solidarity and established charity as the mark of His

⁸⁸ Ogundola Olusola, "Framing Disability: A content analysis of News Papers in Nigeria" (M.A. diss., Syracuse University New York, 2013), 20.

disciples, saying, "By this will all men know that you are My disciples, if you have love for one another" (John 13:35), Vatican Council II, Apostolicam Actuositatem (1965), n.8.

3.0 Theological Resources to Address Contemporary Challenges and Strategies.

In chapter one I looked at the history of Nigeria and the effects of bad governance on Nigerians. In chapter two, I discussed healthcare for all and general attitudes toward PWD. In this chapter, I consider full time advocacy for PWD beginning (1) with the meaning of the Catholic Social Teaching. I will give a brief explanation of the ten blocks of the Catholic social teaching (CST) and then expand on (2) Solidarity and (3) Preferential Option for the Poor. I leave consideration of a third principle of CST, namely, the principle of Participation for the concluding chapter.

3.1 Catholic Social Teaching.

Reflecting on the happenings in Nigeria, especially the treatment of PWD which I discussed a bit in the earlier chapters, I seek solace in the Social Teachings of the Catholic Church, which has preached and taught love through centuries for the emancipation and liberation of all those who find themselves in the margins of human existence.

The church, in response to the growing decadence in the world has made it a point of duty to call humanity back to the consciousness of authentic human existence rooted in the cultivation of good moral standards. Pope John Paul II of blessed memory, writing the encyclical *Centesimus Annus* to commemorate the hundredth anniversary of *Rerum Novarum* 1891, thanks Pope Leo XIII immensely as an instrument used by God to teach the world in a special way. He refers to

Rerum Novarum, on the condition of labour as an "Immortal document," 89 and no wonder most encyclicals written after have revered this first encyclical of the modern period of CST.

Rerum Novarum opened a new era in the social teachings of the Church. The nineteenth century was a period of rapid economic, political, and technological progress in Europe and North America, but the Church resisted it. 90 Pope Gregory XVI (1831-46) was skeptical of science and modernism and regarded them as a "wild boar" that could destroy "the vine yard of the Lord."91 As such, he was in opposition with freedom of the press and elected assemblies, describing representative government as "pernicious opinion." 92

Pope Pius IX (1846-78) in his Syllabus of Errors also saw modernism as evil. 93 During his papacy Pius lived through the challenges of the revolutions of the nineteenth century. His experiences were difficult especially after the killing of his secretary by revolutionaries because the Pope was anti-enlightenment. 94 Leo XIII, succeeding Pius IX in 1878, needed to set the Church on a new course. He was more open to fresh input in the areas of technology and knowledge at large. On becoming Pope, he could not keep quiet in the face of the injustice faced by workers in the hands of their employers, inspiring him to write Rerum Novarum. From the time of Rerum Novarum, which I consider "The Firstborn" of all the encyclicals, subsequent Popes make an effort, explicitly or implicitly, to contribute through the encyclical tradition and social teaching of the Church.

⁸⁹ David J Obrien and Thomas A. Shannon, eds., Catholic Social Thought: The Documentary Heritage, Expanded Edition (Maryknoll, New York: Orbis Books, 1992), 471.

⁹⁰ Robert Calderisi, Early Mission: The Catholic Church and World Development (New Haven and London: Yale University Press, 1988), 47.

⁹¹ Jacques Leclercq, *Christianity and Money* (London: Burns & Oates, 1959), 35.

⁹² Calderisi, Earthly Mission, 47.

⁹³ Charles E. Curran, Catholic Social Teaching 1891-present: A Historical Theological and Ethical Analysis (Washington D.C: Georgetown University Press, 2002), 5.
⁹⁴ Calderisi, *Early Mission*, 48.

Catholic social teaching stands up against exploitation, injustice, deception by the rich of the poor, and the denial of basic human rights. The church tackles these problems through papal encyclicals and synod documents, as well as episcopal statements through which local churches address particular issues proper to the localities. Since Leo XIII, other popes used encyclical tradition and other statements to foster the teachings of the church. The social teaching of the church is often called "Catholicism's best kept secret, it is the explicit and official grappling with contemporary social problems." In this effort, the church addresses not only Catholics but the whole of humanity. The social teaching today has become a pillar in global affairs as it is the key means through which the Catholic Church contributes passionately to the life of the world.

Following the footsteps of Professor William Byron, I will give short notes on the "Ten Building Blocks of Catholic Social Teaching." Reading through the various encyclicals and Papal statements, I summarize his outline and apply it to the concern of this thesis.

3.1.1 The Principle of Human Dignity: Since every human being is created in the image of God and redeemed by Jesus Christ, and everyone, including a person with disabilities is invaluable and worthy of respect as a member of the human family. What accords humans respect and dignity is simply *being* human. This principle is the heart and powerhouse of Catholic Social teaching.

3.1.2. The Principle of Respect for Human Life: Every person from the moment of conception to natural death, has inherent dignity and a right to life consistent with that dignity. No matter the situation, human life including the life of PWD, at every stage demands respect and protection. The sacredness of human life should be promoted at all times.

⁹⁵ Meghan J. Clark, *The Vision of Catholic Social Thought: The Virtue of Solidarity and the Praxis of Human Rights* (Mineapolis: Fortress Press, 2014), 4.

William Byron, "Ten Building Blocks of Catholic Social Teaching," *America: The National Catholic Review* (October 31, 1998). http://americamagazine.org/issue/100/ten-building-blocks-catholic-social-teaching.

- 3.1.3. The Principle of Association: Tradition proclaims that the person is not only sacred but also social. How we organize our society—in economics and politics, in law and policy—directly affects human dignity and the capacity of individuals to grow in community. The family should always be protected as the heart of the society and as the first instance of human association.
- 3.1.4. The Principle of Participation: We believe that people have a right and a duty to participate in society, seeking together the common good and well-being of all, especially the poor and vulnerable, even as PWD rank among them.
- 3.1.5. The Principle of the Preferential Protection for the Poor and Vulnerable: In a Society marred by deepening divisions between rich and poor, our tradition recalls the story of the last judgment (Mt 25:31-46) and instructs us to put the needs of the poor and vulnerable, as many PWD are, first.
- 3.1.6. The Principle of Solidarity: CST proclaims that we are our brothers' and sisters' keepers, wherever they live. We are one human family. Learning to practice the virtue of solidarity means learning that 'loving our neighbor' has global dimensions in an interdependent world.
- 3.1.7. The Principle of Stewardship: Catholic tradition insists that we show our respect for the Creator by our stewardship of creation.
- 3.1.8. The Principle of Subsidiarity: This principle deals chiefly with "the responsibilities and limits of government, and the essential roles of voluntary associations." On a local level, subsidiarity refers to those most immediate to the concern for decisions about what is to be done.
- 3.1.9. The Principle of Human Equality: Equality of all persons comes from their essential dignity. Differences in talents and abilities are a part of God's plan, social and cultural discrimination in fundamental rights are not compatible with God's design.

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⁹⁷ William Byron, "Ten Blocks of Catholic Social Teaching."

3.1.10. The Principle of the Common Good: The Common Good is understood as the social conditions that allow people to reach their full human potential and to realize their human dignity.

These are the ten blocks of the social teachings of the Church. In my advocacy for a revitalization of Nigeria that provides equal access, with PWD as a case study, I want to embrace the teachings of the Church on solidarity and the preferential option for the poor. Both of these principles are at the heart of the social teachings of the Church and vital in creating disability advocacy and awareness in Nigeria.

3.2 The Principle of Solidarity.

In delving into this principle as a prerequisite for my advocacy in seeking the empowerment and liberation of PWD from the margins, it is important to have a look at the dictionary meaning of solidarity. It is defined as "that community of being which binds humanity into one whole, so that each affects and is affected by all (from the French, *solidarite*)."⁹⁸

Secondly, the Oxford Dictionary traces the meaning of this word from the nineteenth century. Like Nuttall, it gives it a French root, *solidarite*, and defines it as "the fact or quality, on the part of communities, etc., of being perfectly united or at one in some respect, especially in interests, sympathies or aspirations, specifically with reference to the aspirations or actions of trade union members." The dictionary definitions of solidarity show that it has to do with unity, understanding and respect among individuals in a given community. In tracing this word, the Oxford Dictionary mentions further its use by H. Doherty in his work on *False Association and Its Remedy*, listing solidarity and solidary, defining it as "Collective responsibility, collectively

⁹⁸ Nuttall's *Standard Dictionary of the English Language*, sv. "Solidarity" (London: Frederick Warne and Co, 1914). at http://babel.hathitrust.org.

responsible." ⁹⁹ Thus, solidarity references to unity, hope, collective responsibility, mutuality, and collaboration between one another.

Solidarity invites the individual to identify the self in the life-situations of the other, to enter into the conditions of economic, social and political realities marking the existence of the other. Jesus is the incarnation of solidarity par excellence. And Jesus invites us to do the same. Solidarity appeals for the non-marginalization of any group in a given society. It calls for a peaceful coexistence in the society. Solidarity fosters a sense of equality in humans, and recognition of communal habitation that leads to the common good. John Paul II describes solidarity in *Sollicitudo Rei Socialis* as interdependence raised to a moral level. Interdependence is an empirical fact, as each of us depends upon the other for both public and private affairs.

Solidarity transforms the empirical fact into an ethical project. It makes the bounds of interdependence more equitable and fair. This line of thought is noticed in the different teachings of other popes: Leo XIII on Social friendships in *Rerum Novarum*, Pius X1 on Social Charity in *Quadragesimo Anno*, and Paul VI on a Civilization of love in *Populorum Progressio*. Solidarity for John Paul II is the path to peace and to development. In solidarity, interdependence is transformed, and the elements of distrust and imperialism are removed. Solidarity transforms relationships.

The teaching on solidarity pulls away all elements of inequality, bringing all citizens to a common understanding of equality and justice in a state. Solidarity is the key to interdependence which allows for a healthy growth of the human environment. In Solidarity, each of us take over the responsibility for the wellbeing of others. The chain goes thus: Solidarity is a path to justice, justice is a path to peace, and peace is a path to integral development. Development is a new

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⁹⁹ The Oxford English Dictionary, "The definitive record of the English language," sv. "Solidarity." http://www.oed.com.proxy.bc.edu

name for peace and solidarity as a path to integral development. Peace is the outgrowth of a kind of interdependence, characterized by solidarity. It is therefore a vision of how humans flourish when they genuinely commune with one another. Solidarity is not the language of sacrifice or self-denial primarily, but it is the language that all in the society are transformed so that benefits of the common good come to all. It is mutually understood interdependence.

Solidarity is being one's brother's brother and one's sister's sister. It is an attitude as described by Karol Wojtyla before he became Pope that helps us to accept and realize our role in the community with all its responsibilities. 100 Solidarity is an attitude that helps a person to fulfil obligations in the society as a process of building up the community for the common good of all. In Sollicitudo Rei Socialis, John Paul II refers to solidarity as a virtue needed in an interdependent world, as a moral and social attitude and the diametrically opposed attitude to such structures of sin as desire for profit and thirst for power. 101 These vices are conquered through the grace of God, which eventually leads one to the promotion of the good of the other.

In The Acting Person, Wojtyla sees solidarity as an attitude which fosters good life and responsibility in a given community. It helps a person to transcend barriers in order to fight for a good that benefits all, thereby leading to the realization of the common good. Accordingly: "The natural consequence of the fact that human beings live and act together, it is the attitude of a community, in which the common good properly conditions and initiates participation, and participation in turn properly serves the common good, fosters it, and furthers its realization." ¹⁰² The effort to realize solidarity is empowered by the fact that persons see themselves as bridge

¹⁰⁰ Cardinal Woityla Karol, Trans, Andrzej Potocki, *The Acting Person* (Holland/Boston: D. Reidel Publishing Company1979), 285.

¹⁰¹ John Paul II, Encyclical on the Twentieth Anniversary of *Populorum Progressio*, *Sollicitudo Rei Socialis*, (December 27, 1987), § 38, at The Holy See, <u>www.vatican.va</u> ¹⁰² Wojtyla, *Acting Person*, 285.

builders in a community by positing the common good as a yardstick for actions, making an effort to be responsible toward others. At the World Day of Peace in 1987, John Paul II writes:

We need to adopt a basic attitude towards humanity and the relationships we have with every person and every group in the world. Here we can begin to see how the commitment to the solidarity of the whole human family is a key to peace. Projects that foster the good of humanity or good will among peoples are one step in the realization of solidarity. The bond of sympathy and charity that compels us to help those who suffer brings our oneness to the fore in another day. But the underlying challenge to all of us is to adopt an attitude of social solidarity with the whole human family and to face all social and political situations with this attitude. ¹⁰³

In writing on solidarity therefore, John Paul II reminds us about the oneness of the human family. The emphasis is on the unity of the human family as a means of achieving the common good. He advocates for peaceful coexistence in the world and formation of right attitudes as the foundations of solidarity. As a family, humans need to promote equality in order that the dignity of every person is assured and restored at the same time.

This message on solidarity remains timely due to the situation of things in the world, where human dignity is not respected and so many are marginalized, and so many are not included in the life of the society. The recognition of the oneness of the human family is very important as is the effort by all to promote this oneness. It is a call to recognize the social solidarity between humans. To recognize the social solidarity of the human family brings with it the responsibility to build on what makes us one. This responsibility means promoting effectively and without exception the equal dignity of all. ¹⁰⁴ In promoting dignity, surely the fundamental human rights of all humans, groups and nations will be protected. When there are

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¹⁰³ John Paul II, "Message for the World Day of Peace on Solidarity and Development: Two Keys to Peace" (January 1 1987), § 3, at The Holy See, www.vatican.va.104 Ibid.

problems in society, true solidarity builds on peace, which dismantles all levels of acrimony in the society.

Pope John Paul II further asks: how often in recent years have we had occasion to reach out as brothers and sisters to help those struck by natural disaster or subjected to war and famine? What effort have we made to help the less fortunate of the human family? ¹⁰⁵ Answering these questions may yet prove the humanity of the human family: reach out to those who suffer exclusion in one way or the other, advocate for justice on behalf of those discriminated against consequent to different life conditions, and make the vulnerable a priority for all as we share in the same family. The pope admonishes nations to break with unhealthy destructive life styles and which promote inequalities in the society. Xenophobic activities should be eradicated, border closures, religious fundamentalism, and tribal/ethnic biases should all be avoided.

The solution proffered by John Paul II to eradicate the schism between humans is to adopt the attitude of solidarity. This attitude helps one to see things in a different way. This attitude is a conversion of the heart which opens up a new page in one's life by making that person an instrument of peace and development in the society. I see this attitude of solidarity as a force that we can embrace through the example of Jesus Christ. It is an attitude that we uphold by living the example of Christ who became a man and whom the Father raised from the dead for the emancipation and liberation of the human race. Solidarity is an attitude to be cultivated as a Christian value.

To be in solidarity with the poor, marginalized, oppressed and stereotyped in society entails generosity with one's gifts, and it portrays essentially, love of neighbor. It challenges one to full time advocacy for all those who seek justice in the society, especially those who are tagged as people with no potential with presumptions of nothing to contribute to the community.

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¹⁰⁵ Ibid.

Solidarity is an attitude to be cultivated and practiced. One of the key problems today, is that people find it difficult to cultivate a positive attitude. Is it still possible to cultivate this attitude of solidarity? For this attitude to be cultivated -- especially in a country like Nigeria where there is an encounter with decadence that has gotten into the marrow of the national life -a conversion of heart is necessary. As an attitude, solidarity has a cognitive and emotional component along with a thrust towards praxis. 106 This value should be taught in our homes as the family plays a great role in the formation of our children. The problem is that most parents are not ready to challenge themselves to a positive transformation as a result of their own or another's soiled hands. They do not have the moral probity to witness to their children anymore. As noted earlier in this thesis, corruption is rampant even at the level of the family. The Church teaches and the responses to these teachings in most cases are not as zealous as they ought to be because most adults are reluctant to turn to them. Educating youths, beginning from the family, to the school, and then in the Church has become difficult. Adults need to embrace solidarity in order to educate their children. Solidarity is an attitude that makes us conscious of our common heritage and spurs us to cooperate in order to preserve unity. It is a sure way to peace, freedom and responsibility in the society, which should be encouraged and fostered by world leaders.

Pius XII in one of his Christmas messages reminds us that there is no sure way to peace other than the re-education of humanity in the spirit of fraternal solidarity, and leaders of the world should witness to this solidarity by being flexible with regard to structures. He encourages all to listen to the cries of the anguished and impoverished children of God. ¹⁰⁷ Solidarity is an

¹⁰⁶ Marie Vianney Bilgrien, SSND, *Solidarity: A Principle, an Attitude, a Duty? Or the Virtue of an Independent World* (New York: Peter Lang, 1999), 53.

Pope Pius XII, "The Internal Order of States and People," Christmas Message 1942. http://catholictradition.org/Encyclicals/1942.htm

attitude that helps the flourishing of a state and could be taught and embraced at all levels in the society. And yet, solidarity is not just an attitude, but also a duty.

3.2.1. Solidarity as a Duty.

In his *Populorum Progressio*, Paul VI beckons world leaders to hearken to the needs of the poor especially in Latin America and the other developing countries of the world. He sees an integral development of all countries as a sure way to the emancipation and liberation of the poor and a sure way to harmonious living between states. The presupposition is that conditions of abject poverty and neglect easily fester the wounds of violence. In this encyclical, universal charity runs concurrently with mutual solidarity and social justice as a triple duty resulting from the "human and supernatural brotherhood of man." ¹⁰⁸ Universal charity is "the effort to build a more human world community, where all can give and receive, and where the progress of some is not bought at the expense of the others." ¹⁰⁹ Paul VI encourages mutual solidarity, especially from the rich to the poor. This mutuality disentangles all elements of segregation, marginalization and oppression, thereby fortifying ties irrespective of class.

In Sollicitudo Rei Socialis, John Paul II calls nations to fulfill the "duty of solidarity" 110 as urged by Paul VI. Through the fulfilment of the duty of solidarity, the development of all nations is assured and the life of the poor will surely be emancipated. Solidarity is a duty to be put into practice by all humans of goodwill. As Christians, it should be embraced as a virtue necessary for the development of humankind.

See, www.vatican.va.

¹¹⁰ John Paul II, Sollicitudo Rei Socialis, § 9.

¹⁰⁸ Pope Paul VI, Encyclical on the Development of People, *Populorum Progressio* March 26, 1967, at The Holy

What is a duty? In a dictionary of moral theology, duty and obligation are two sides of the same coin and are used interchangeably:

Duty is an obligation imposed upon a free person to use his freedom in a given manner. It is one of the basic elements of moral life. Every duty, if it be such, has ethical connotations. The sense of duty is one of the most marked traits characterizing man's intellectual nature and rendering him superior to brute nature. Moralists usually divide man's duties (in an objective sense) into three classes: toward God, toward oneself and towards one's neighbor. ¹¹¹

Duty is an obligation of responsibility which we owe to God, to ourselves and to our neighbor, an obligation which impacts on the life of the society in order to make life and the goods of life accessible to all. For John E. Smith, a duty is "what ought to be done, what we are bound to do, what we are 'under orders' to perform." Duty is performative, it is demands to be acted out, that is, to do the right thing.

Duty is an obligation that goes with freedom and responsibility. In many cases, people see morality based on duty as formal and does not allow the individual the required liberty to act out of one's freewill. It is simply an obligation which has reason as its driving force. Paul VI and John Paul II in portraying solidarity as a moral duty, implicitly teach that it is an obligation to be carried out with freedom and responsibility, which is paramount and most needed in an interdependent world. Solidarity as a duty is simply, a moral imperative, as such, it is a necessary moral standard for all. We cannot limit it to an attitude or value to be kept by Christians only. It is a duty to be respected by all and to be hearkened by all in the society. The duty of solidarity challenges us to accept the dignity of the human person in ever expanding relationships until the total unity of creation is reached. 113

¹¹¹ Francesco Roberti (ed.), *Dictionary of Moral Theology* (London: Burns and Oates, 1962), 438-439.

¹¹² John E. Smith, s.v. "Duty" in John Macquarrie and James Childress, (ed.), *A New Dictionary of Christian Ethics* (London: SCM Press Limited, 1986), sv. Duty. ¹¹³ Ibid.

In a world of interdependence, the growth and wellbeing of all in the society is restored by solidarity. Solidarity is now an ethical standard which stands as a response in the bid to make society habitable for all without class, tribal and ethnic biases. A good and clear understanding of the teaching on solidarity is imperative for a live and let live ethical standard in the society. It implies that the goods of creation are for all and not for a selected few. 114 All humans should take cognizance of solidarity and its implications, and proceed positively in its actualization. We are obliged to be in solidarity with the suffering, those impoverished and the underdeveloped millions of people scattered in the face of the earth. Personal decisions and decisions of the state must be made in a way that it benefits all, especially the poor and less privileged in the society. The duty of solidarity obliges us to recognize this universality and act accordingly. 115 Development, justice, equality, access, and peace, will be achieved through this duty of solidarity.

As a spiritual and moral leader, John Paul II called upon other leaders to achieve the goal of this duty of solidarity. In most of his encyclicals he urged the building up of human society in total solidarity in order not to stifle development and thereby impoverish so many people. The pope used his teaching authority "because of my office," to appeal for attention to solidarity. He called for governments to act in accord with solidarity, likewise he invited Bishops to take up the duty of solidarity as followers of Jesus Christ, through proclamation of the gospel and a life worthy of that calling. The duty of solidarity alerts our consciences to that urgency to work for the common good of all. We owe support for this good to our oneness in the human family.

Finally, within CST, solidarity, in addition to being an attitude and a duty, is also a virtue.

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¹¹⁴ John Paul II, Sollicitudo Rei Socialis, n. 39.

Bilgrien, SSND, Solidarity: A Principle, an Attitude, a Duty, 57.

John Paul II, Encyclical on the Redeemer of Man, *Redemptor Hominis*, (March 4 1979), § 17, at The Holy See, www.vatican.va.

3.2.2 The Virtue of Solidarity.

Solidarity as a virtue surpasses the duty and attitude of solidarity. Virtue goes with perfection, as such, solidarity points to the great commandment: love of God, self and neighbor. It is a doing word which involves positive actions from the moral agent. Virtue is from the Greek word *arete* which has the connotation of power and excellence. It is seen as that which causes an action in a particular thing. In the ethical arena, virtue showcases the right order and morality of a person.

According to Aquinas: "the virtue of each thing is what makes its possessor and his work good." Virtue for Aquinas is more than a duty. A duty implies decision and action but virtue implies a disposition, a power and a perfection. In the Dictionary of Christian Ethics, a description is made between a virtue and being virtuous.

The virtues are specific dispositions determined by the need to correct certain deficiencies, for the formation of the passions, as skills internal to activities or practices, or as necessary for the performance of certain roles or offices. Virtue, on the other hand, is the stance of the self that coordinates or embodies the virtues in a manner that makes them virtuous. ¹²⁰

It is simply not good enough to act virtuously, rather a virtuous person should act as such from an intrinsic dimension of the self. To act justly is not enough, we must be just, to develop a just character. It is an 'acquired' trait, not a pretense or trying to be something we are not. Our character or moral being is to be in union with our behavior. Virtuousness is part and parcel of the person's life. It is then, distinct from duty because duty searches for what to do, while virtue deals with the way I ought to be. As humans, we need to be virtuous in order that our actions remain good. I remember a popular saying when we were younger in school that "intelligence is

¹¹⁷ Paul Edwards, *Encyclopedia of Philosophy: Arete* (New York: Free Press, 1967), 147-148.

¹¹⁸ Thomas Aquinas, *Summa Contra Gentiles*, Book 1, translated by Anton G. Pegis (New York: Image Books, 1955). 151.

¹¹⁹ Bilgrien, Solidarity: A Principle, an Attitude, a Duty, 79.

¹²⁰ Macquarrie et al. New Dictionary of Christian Ethics, sv. Virtue

not enough, but intelligence plus good character, is the goal of education." Good behavior has to be innate in a person, because the virtue of persons is determined by their characters. You cannot give what you do not have as our actions determine who we are.

What is significant about us morally is not what we do or do not do, but how we do what we do. A person of virtue is often said to be a person of style or class in that he or she may well do what others do but in a distinctive manner...How persons of virtue or character act is not just distinctive: the manner of their action must contribute to or fulfill their moral character...The concern that our behavior contribute to our moral character is but a recognition that what we do should be done in a manner befitting our history as moral agents. ¹²¹

Virtue aids us in acting in ways that are genuinely different. In most cases, it deals with a choice of actions. You determine what to do and how best to carry out the action in a way that the act comes out good. In an effort to build up a responsible character, we become virtuous. Virtuous acts therefore are fundamental in the buildup of a just society.

In *Sollicitudo Rei Socialis*, John Paul II opines that the concern of the Church is the "authentic development of man and society which would respect and promote all the dimensions of the human person." For him, development is in being, not in having. He wants us to act good so that we can be good. John Paul II portrays himself as a teacher and leader whose function is to proffer solutions that would lead to equality, restoration of human dignity, joy and happiness in the world. The key to all these does not depend on laws but on the morality of human actions. Our actions ought to be good in order that we may be good too.

John Paul II goes further to describe the virtue of solidarity as a response to relationships in an interdependent world, and this response is a firm and persevering determination.¹²⁴ It

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¹²¹ Stanley Hauerwas, A Community of Character (Indiana: University of Notre Dame Press, 1981), 113-114.

¹²² John Paul II, Sollicitudo Rei Socialis § 1.

¹²³ Bilgrien, Solidarity: A Pinciple, an Attitude, a Duty, 92

¹²⁴ John Paul II, Sollicitudo Rei Socialis, § 38.

entails commitment to the common good. The virtue of solidarity trains a person to act positively toward the common good. In an interdependent world, collaboration among persons and groups is necessary as we need each other in order to have a sound society. Being virtuous helps the acting person to recognize the equality of human persons, including the poor, the rich, and middle class for the betterment of the human society. John Paul II teaches that each one of us is "the living image of God the Father, redeemed by the blood of Jesus Christ and placed under the permanent action of the Holy Spirit," As such we are equal in dignity before God. The virtue of solidarity transforms the acting person while as a duty and attitude solidarity can only change situations but not the acting person. A mélange of the three, solidarity as an attitude, as a duty and as a virtue is key in bringing out the best in the acting person, both at the level of an individual and as a group. Solidarity is not just a duty, an attitude or a virtue, it is also an advocacy for respect toward the human rights of all, rich and poor and disabled people alike.

3.2.3 Solidarity as a Human Right.

One of the key questions people ask me on hearing about my project is, whether solidarity is a human right or a consequence of pity? Solidarity is all about value. We care for our fellow human beings, placing ourselves in their situation, especially the vulnerable poor and disabled who are sidelined at the margins and treated as less than human. Living in an interdependent world, we need to recognize our dependence on one another in order to build up our society. A turn to solidarity, as such, is timely, for it entails advocacy for respecting the fundamental human rights of peoples. In an interdependent world, it is natural that affluent nations give aid to less affluent nations in order to build up the one human family and body of Christ. Likewise, in different countries, the leaders ought to provide for all, no segregation, exclusion,

¹²⁵ Ibid, § 40.

marginalization or stereotyping of any group no matter the situation of that person or group. Both human rights and solidarity are recognized as central to any comprehensive response to global problems, solidarity is a necessary companion of human rights. 126

From the writings of Leo XIII to the present papacy of Francis, one sees the turn to human rights as a key tenet in CST. David Hollenbach has argued that the idea of human rights "has roots all the way back to Thomas Aquinas, Augustine, the Bible and Aristotle. More proximately, it emerged from the social doctrine of the modern papacy." It was John XXIII who was the first pope to include the explicit language of human rights in his 1963 encyclical *Pacem in Terris*. In building upon his predecessors' earlier use of natural law, he incorporated human rights. The brief years that John was Pope (1958-1963) were watershed years for the Roman Catholic human rights tradition. With the promulgation of the United Nation's Universal Declaration of Human Rights, John XXIII appropriated human rights in order to address issues of justice, equality, and peace in a contemporary language.

Mater et Magistra (1961), John XXIII emphasized the dignity of the human person which is impeded by structures within the society. Human dignity in society is of paramount importance so that each should benefit from the resources of society instead of the society preying on humans. Human dignity should be given a preference and should be the foundation of all discussions within the society. The ethical feedback on the dignity of human persons will be more and more mediated through social structures, even "in the more intimate aspects of personal life." ¹³⁰

¹²⁶ Meghan J. Clark, *The Vision of Catholic Social Thought*, 10.

¹²⁷ David Hollenbach, S.J., *Claims in Conflict: Retrieving and Renewing the Catholic Human Rights Tradition* (New York: Paulist Press, 1979), 41.

¹²⁸ Meghan Clark, The Vision of Catholic Social Thought, 11.

¹²⁹ Hollenbach, *Claims in Conflict*, 62.

¹³⁰ Ibid, 64.

In *Pacem in Terris* (1963), John XXIII gives, in a fiat, the most organized encyclical in the history of the Church in dealing with the dignity of man in the social order. *Pacem in Terris* was celebrated all over the world as it considered the United Nations Universal Declaration on Human Rights to argue intensively for the dignity of the human person, which is suppressed in so many countries of the world until the present day. *Pacem in Terris* emphasizes interdependence all the more since it is the basis of human relationship in the society. The rights that protect human dignity, therefore, are the rights of persons in the community. ¹³¹ Both are not distinguishable, they are in harmony with one another.

John XXIII enumerates further the fundamental human rights that must be accorded every human person in order to promote human dignity. The rights to life and an adequate standard of living includes human integrity, food, basic shelter, clothing, healthcare and other necessary social services. Persons who have no jobs should be granted enough security, together with the aged, PWD, and widows. Rights regarding moral and cultural values were upheld, such as in respect for one's person, communication, healthcare, cultural heritage, and basic education. These are the fundamental human rights that solidarity seeks to guarantee for all human beings. A right to religious freedom that secures the right to believe and worship God according to one's conscience without interference was also noted in the papal letter. This is a right to practice religion both publicly and privately. A right to family life gives a person the right to choose a state of life in the family. It envisions a family built on equality and respect for men and women alike. The right to family life also entails the right to educate one's children and to the economic, moral, and social and cultural support to family life. Economic rights are very important for the nurturing of the human community. Good working conditions, a just wage, the

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¹³¹ Ibid, 65.

¹³² Ibid, 66.

right to possess property and collaboration of all citizens without discrimination in the building up of the human society is included in this claim. Rights of assembly and *association* necessitate the right to organize society in the interest of its members along with the right of groups to secure goods for the interest of all, including when individuals are incapacitated. The right of freedom of movement provides the right of people to move especially when conditions are not favorable. Finally, political rights include the rights to participate in public affairs and to juridical protection of the broad array of one's human rights.¹³³

Human rights are intimately linked to solidarity as the latter's function is to be in constant advocacy to see that the rights of persons in the community are not trampled upon but respected. The efforts of states and governments in seeking the wellbeing of all in the society, thereby promoting the dignity of the human person, is an expression of solidarity with citizens of the state. In solidarity with the disabled, the state should make sure that all the goods of life are not denied them, access to healthcare and healthcare facilities should be first among them as they have the right to such facilities.

Having looked at the Church's teaching on solidarity, I now look at option for the poor, another key in the social teaching of the Catholic Church. I see the option for the poor and solidarity as synonymous components in the sense that they have a common goal: the liberation and emancipation of those whose rights are threatened or extinguished. In discussing solidarity, I offered an analysis of the teachings of the Church and why we need to be in solidarity with one another. The option for the poor is not all about analysis or theory but a practical approach to solidarity. It is the option for the poor that focuses our advocacy for disabled people. This advocacy entails a call inviting the Nigerian government to move from complacency to make life better for the poor and disabled through genuine access to the general goods of life.

¹³³ Ibid, 67.

3.3 Option for the Poor.

All humans are created in the image of God. The Bible in a special way points to the fact that the poor are the privileged recipients of revelation. In the Old Testament we read about the experiences of the Israelites in the hands of the Egyptians. The oppression of the Israelites by Pharaoh replicates the oppression and suffering of PWD and other impoverished people who suffer marginalization, segregation and hostility of one kind or the other in the hands of the rich and powerful. God's liberation was offered in praxis through Moses who was sent to Pharaoh to announce the liberation of the children of God. Exodus records: "Then Yahweh said to Moses: Go to Pharaoh and say to him, this is the message of Yahweh, the God of the Hebrews: Let my people go to offer me worship..." (Exodus 9:1). We would have heard the encounter in the burning bush: "I am the God of your father, the God of Abraham, the God of Isaac and the God of Jacob. I have seen the miserable state of my people in Egypt. I have heard their appeal to be free of their slave drivers." (Ex. 3:6-7). God knows the suffering of the poor, and wills that humans collaborate together in fighting oppression. Because the Egyptians were bent on destroying the image of God in the Israelites, God decides to free them through Moses. Every leader is chosen for the emancipation of a people, a community, and not just for personal salvation.

Through the instrumentality of Moses, the Israelites were liberated from Egypt. The understanding of this liberating account helps us to find meaning in the liberation of the suffering poor from all sorts of paternalism. This encounter shows the meaning of liberation for the poor of Yahweh. ¹³⁴ The Israelites were redefined through this action. The presence of the Pharaoh

¹³⁴ Joseph Mulligan, *Liberation: For the Poor of Yahweh, Pharaohs, And Christians* (Portland Oregon: Sunburst Press, 1977), 5.

who refuses to acknowledge Joseph's descendants is a typical example of how the leadership of certain countries decides to marginalize a certain group because of their heritage.

For Pharaoh, the Israelite population became a threat to his kingdom. Pharaoh notes: "We must be prudent and take steps against their increasing any further, or if war should break out, they might take arms against us and so escape out of the country" (Ex 1:10). Population growth is a serious issue in the world of today. The developing countries are always at the mercy of the developed countries who try to mitigate child birth through various means. In the Exodus, an order was decreed for the killing of male infants because Pharaoh would not share the nation's wealth with the Israelites (v.16). This thinking continues today with the mentality of the modern oppressor who reject any sharing of the goods of their situation with the poor. Rather, like infanticide, modern states choose to impose "zero population growth" upon the oppressed in order to lessen the pressure on the rich. 135 Population control also calls attention to Paul VI's encyclical *Humanae Vitae* (1968) where he teaches and urges Christians to love and protect life. Moses's life was protected by his mother as an infant and through him God's people were liberated in Egypt. Likewise, in the New Testament, which is the fulfilment of the Old Testament, Mary and Joseph are portrayed as protecting Jesus from the oppressor Herod.

In the New Testament, Jesus devoted a great percentage of his ministry to the poor. In his mission statement after his baptism at the Jordan and subsequent temptation by the evil one in the desert (Luke 4), he enters the synagogue and proclaims his identity: "The spirit of the Lord has been given to me, for he has anointed me, He has sent me to bring the good news to the poor, to proclaim liberty to the captives and to the blind new sight, to set the downtrodden free, to proclaim the Lord's year of favor" (v.18). This declaration of the prophecy of Isaiah makes clear that the prophecies in the Old Testament are fulfilled in Jesus of Nazareth.

135 Ibid.

Jesus's ministry centered on the liberation of the poor. He began by reiterating the prophecy of Isaiah 61:1-2, that the spirit of the Lord had been given to him. Jesus has the power, the support, and the authority of God the Father in the mission he undertakes. He has the holy anointing from above through the power of the Holy Spirit. This alerts readers to the Trinitarian unity, which is to be demonstrated through his ministry, directed largely to the suffering poor. His is a mission that centers on the poor, setting captives free, and reaching out to all who suffer oppression and marginalization in different locations around the world. The liberation of Jesus centers on the downtrodden, especially the impoverished PWD whom he liberated at different times throughout his earthly ministry. In that synagogue proclamation Jesus makes it clear that he is the fulfilment of Isaiah's prophecy and thus, indicates the character of his Messiahship, one in genuine accord with the O.T. 136

Jesus's message was embraced by those people who heard it as good news, especially the poor who knew they were in need of liberation. It is clear that good news for the poor is also bad news for those who are determined to hold onto their status and comfort. Jesus warns in Luke, "But alas for you who are rich: you are having your consolation now" (6:24). The example of Lazarus and the rich man in the Luke 16 is also an eye opener for portraying what Jesus asks of us. The parable invites humans to care for the sick and homeless, and warns about the dangers of neglect, for the rich man regretted his acts but had no second chance. Though he warns the rich, Jesus' message is actually for all, both the rich and the poor and he never ceased to call the poor, and rich to undergo *metanoia*, change of heart. 137

Jesus's liberation is important because it enables us to hearken to the needy and join in complete solidarity with the poor. It is an invitation to embrace all humans as carrying the same

Mulligan, *Liberation*, 5.Muligan, *Liberation*, 5.

image of God and equal dignity. One of the liberating acts of Jesus in the Bible that is clear is his effort to dismantle the belief at the time that disability is a curse or a result of sin committed by one's ancestors. The healing of the man born blind in the gospel of John is a powerful example of an alternate response.

After the healing of the blind man, there were arguments and counter arguments on seeing the blind man. The Jews, according to John, asked if actually he was the blind man. In their interrogation of the man, he made it clear to them, "I am the man" (9:9). 138 In this pericope, what the Pharisees were unable to see is this man's inner spiritual vision had been restored. Rather they were totally concerned with the restoration of his physical sight. At this healing, Jesus defies a customary religious model of disability that assigns a religious or moral fault to explain disability. Those who wanted to know if the man was blind at his own expense or due to the sins of his ancestors of were answered: "Neither this man nor his parents sinned; he was born blind so that God's works might be revealed in him" (v.3). This counters the misconception of the Jews and others that disability is a consequence of sin. Through this answer, Jesus clarifies the references in the Torah which allude to children suffering because of the sins of their ancestors, (see Ex. 20:25; Num. 14:18). Jesus uses this moment to provide for us a contemporary way of rethinking disability at a theological level. 139 Jesus' mission was concentrated on the poor, liberating them from the margins where oppressors leaves them in complete abandonment. The Church continues today in following the example of the Lord by proclaiming the preferential option for the poor.

In Rerum Novarum (n.37), Pope Leo explained that it is better for two people to be together; if one falls the other will always be there to lift him up. The one who is alone is

¹³⁸ Amos Yong, The Bible, Disability, And the Church: A New Vision of the People of God (Michigan: WM. B. Eerdmans Publishing Co. 2011), 51 lbid, 51.

disadvantaged because there is none to lift him/her up. For Leo, "A brother that is helped by his brother is like a strong city." This help is a simple example of interdependence in society, a basic tenet for solidarity with the poor. If the state allows the poor and disabled to be marginalized and on their own, there is nobody to lift them up. Society is an inclusive term and its members ought to care for all and not be content to act as a private club interested in the partnership of a select few.

The option for the poor was popularized more in the church and society by the Latin American Bishops at Medellin in 1968.¹⁴¹ Gustavo Gutierrez, in his *Theology of Liberation*, emphasized the need to bridge the gap between the rich and the poor. This commitment of Latin American church leaders to the option for the poor was reflected in the Paul VI's *Populorum Progressio*, by who addressed the growing inequalities in Latin America and other developing countries of the world. And before this encyclical, John XXIII prior to the opening of Vatican II stated that the church is called to be a church of the poor. ¹⁴²

In *Populorum Progressio*, Paul VI urges people to share their bounties with one another, not out of pity but because nobody has an absolute right to any material good. Global poverty was a growing concern for the Church particularly in Latin America and Africa. At one point, Paul VI writes:

If someone who has the riches of this world sees his brother in need and closes his heart to him, how does the love of God abide in him? It is well-known how strong were the words used by the Fathers of the Church to describe the proper attitude of persons who possess anything toward persons in need. To quote Saint Ambrose: "You are not making a gift of your possessions to the poor. You are handing over to him what is his. For what has been given in common for the use of all, you arrogated to yourself." That is, private property does not

Daniel G. Groody ed., *The Option for the Poor in Christian Theology* (Indiana: University of Notre Dame Press, 2009), 77.

¹⁴⁰ O'Brien and Shannon, Catholic Social Thought, 34.

Gerald S. Twomey, *The "Preferential Option For The Poor": In Catholic Social Thought From John XXIII to John Paul II* (New York: The Edwin Mellen Press, 2005), 10.

constitute for anyone an absolute and unconditional right" *Populorum Progressio* (n. 23).

The goods and resources of a nation belong to all and they are not the right of a selected few. For the sake of the common good, one should possess only what is necessary and then share the rest with others who need it. The situation in most countries like Nigeria is that the economy, finances, power and commodities necessary for the building up of the society are appropriated by a few. Paul VI's mission was to throw the light of the gospel on the social questions of the age, as a duty for the church to scrutinize the signs of the times and interpret them in the light of the Gospel. ¹⁴³ In interpreting these signs of the time, the church makes it clear that the suffering of anyone is a concern for all humanity as a pilgrim people. ¹⁴⁴

The Church continues to proclaim in teaching and praxis, the preferential option for the poor and in *Solicitudo rei Socialis* John Paul II insisted that "the option or love of preference for the poor...is an option or a special form of primacy in the exercise of Christian charity to which the whole tradition of the Church bears witness" (no. 42). Following this important theme in CST, the liberation and empowerment of all PWD can be seen as a gospel mandate. This mandate is especially so for those PWD who are oppressed and have nobody to speak for them.

In Nigeria, there are thousands of PWD who are at the margins because the government has no plan of care for them. In the spirit of solidarity, as an option for the poor, we need to do our best to actualize this vision of the Church as one human family, the body of Christ. For John Sobrino SJ, a key proponent of Latin American liberation theology, the suffering poor are the "Crucified People as Yahweh's suffering servants." Following his insight, I see PWD in

¹⁴³ Twomey, *The "Preferential Option For The Poor*," 114.

¹⁴⁴ O' Brien, Catholic Social Thought, 258.

¹⁴⁵ Groody ed. The Option for the Poor in Christian Theology, 77.

¹⁴⁶ Jon Sobrino, *The Principle of Mercy: Taking the Crucified People from the Cross* (New York: Orbis Books 1994), 49.

Nigeria as Yahweh's suffering servants, crucified on the cross, who should be liberated from the crosses where they have been nailed.

3.4 The Crucified People: Disability and Suffering in Nigeria.

From the discussions so far, I have tried to establish the extent of the marginalization, stereotyping and segregation on PWD in Nigeria. I have advocated through the teachings of the Church that we know the necessity of solidarity and the option for the poor, in order to embrace the total fight for the liberation of PWD and others impoverished in Nigeria.

It is important for me to speak of PWD as the "Crucified People" in the historical analysis of the treatment given to them in Nigeria. They are a people that society has sidelined and the government is not doing enough to alter their situations. The government ignores those actions that would lead to the emancipation of PWD and others living in poverty. It is important to talk on behalf of these crucified people to bring their situation before those who hold the power in Nigeria to change things. The goal must be to bring PWD down from the cross. Our nation's treatment of these crucified people showcases who we really are as Nigerians and reveals the type of leadership we have suffered from in the past until the present time. The PWD suffer, not only because of their physical ills but from the neglect they experience in Nigerian society.

In the Plan of Action (POA) document produced at the Pan African conference on African Decade of Persons/People with Disabilities in Addis Ababa, Ethiopia (4-7 February, 2002), 147 that had representatives from all African countries, the focus was how to better the

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¹⁴⁷ Jonah Eleweke, "A review of the challenges of achieving the goals in the African Plan of Action for people with disabilities in Nigeria," *Disability & Society* 28, no.3. (2013): 313-322. http://www.tandfonline.com/doi/abs/10.1080/09687599.2012.710009

lives of PWD. This document outlined strategies that African countries could adopt in order to improve the lives of PWD and encouraged all the countries to adhere to it. The POA is aimed at:

Implementing priority activities to enhance the services provided to Africans with disabilities during the decade by formulating and implementing meaningful policies and programs, creating national disability service coordination committees, supporting community-based service delivery, developing poverty alleviation programs, enhancing preventive programs, and promoting positive attitudes and awareness of the needs of people with disabilities.¹⁴⁸

This Pan African conference and document was an outgrowth of the United Nations decade for PWD of 1983 through 1992. The decade's theme was meant as a challenge to the nations of the world to assimilate PWD into the mainstream of their societies. In developed countries, efforts were made and the facilitation of the human rights of PWD was enhanced, while in most developing countries, the story remained the same. This decade was celebrated by PWD everywhere. They hoped that this period would mean the transformation and end of the suffering and marginalization that they endure. In developing countries like Nigeria, PWD never experienced the advances known to their counterparts in developed countries. The promotion of the Decade for PWD was not followed up adequately by action in most developing countries. Nevertheless, many African people came together at Addis Ababa in the effort to realize the dream of making life better for PWD. The POA document "was to serve as guideline for African countries in the formulation of their national programs on disability issues as well as in establishing the mechanism for the implementation of the POA's objectives." 149

In the United States, the National Organization on Disability raised major issues on which to focus for the International Decade of PWD.

(1) Expanded Educational Opportunity (2) Improved Access to Housing, Buildings, and Transportation (3) Expanded Employment Opportunity (4)

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¹⁴⁸ Ibid, 315.

¹⁴⁹ Ibid, 314.

Expanded Participation in Recreational Social, Religious and Cultural Activities (5) Expanded and Strengthened Rehabilitation Programs and Facilities (6) Purposeful Application of Biomedical Research Aimed at Conquering Major Disabling Conditions (7) Reduction in the Incidence of Disability by Expanded Accident and Disease Prevention (8) Increased Application of Technology to Minimize the Effects of Disability (9) Expanded International Exchange of Information and Experience to Benefit All Disabled Persons.¹⁵⁰

These were the goals the United States set during Ronald Reagan's administration in order to liberate PWD from the shackles of marginalization and the dangers of exclusion. It is important to note that between 1983 and now, a lot has improved in the United States with regards to disability rights. Living in the United States at the moment of this research, I have observed first hand that the crosses of PWD have been eliminated to a commendable level compared to what PWD suffer in Nigeria and other developing countries. I go to public places and I see reservations on parking spaces for PWD, there are elevators in hospitals, auditoriums, churches, campus buildings, sign language interpreters, braille signage, and other measures that provide access. It is inspiring to see how the lives of PWD have improved tremendously, even as human rights advocacy on behalf of PWD continues.

For example, I was fascinated to enter a bus and noticed it had retractable steps for PWD which allows easy entering and alighting from buses. I wondered when Nigeria would be able to develop automobiles or import such facilities for the sake of PWD who find it difficult to climb in and out of public transports. In U.S hospitals, there are wheel chairs, stretchers, ambulances, used to facilitate access and cure, especially for PWD. The insurance system is better in the U.S. since in Nigeria, there is no standard insurance system or healthcare delivery that is accessible to

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National Organization on Disability, "America's Goals for the International Decade of Disabled Persons, 1983-1992." U.S. Congress Resolution 39. https://dolearchives.ku.edu/sites/dolearchive.drupal.ku.edu

all. In short, it means that as the program for inclusion of PWD in the West is progressing, the situation in Nigeria and other developing countries, is regressing.

In the POA document, important points that make programs to improve disability rights unrealizable in Nigeria were mentioned. The realization of the POA document's aims would have been a thing of great joy to the marginalized population of PWD and to most citizens of good will in Nigeria. Services to improve better health and wellbeing for the poor and disabled in Nigeria remains unsatisfactory and insufficient to compare with the resources available in Nigeria that are mismanaged by the Nigerian leadership. Most of the public buildings like schools, libraries, health and recreational centers, are still not disability friendly. Inaccessibility is due to an absence of legislative support, a lack of funding mechanisms, and a failure of programs that promote inclusion as a goal. 151 These obstacles are not beyond the ability of the Nigerian government to tackle, however, the extent of corruption is overwhelming, and that fact makes it difficult to overcome the obstacles.

A look into the POA and the inability to realize these dreams in 2016, makes it clear that Sobrino's description of "the crucified people" is a reality for PWD in Nigeria. The Bishops of Latin America weep for the situation of things in that part of the world that they describe as "the misery that marginalizes large human groups," which "as a collective fact is an injustice crying to heaven." So, too, the misery that characterizes the suffering of PWD in Nigeria is an injustice that cries out to God every day. The crucified people are aware that their plight leads to death, that the cross means death. 153 Hanging on the cross of misery, they are dying and need revitalization in order to come back to life. When people are denied basic access to lifesustaining resources they are incapacitated and, as a result of injustice, violence against them and

Jonah Eleweke, "A review of the challenges," 318.
 John Sobrino, *The Principle of Mercy*, 50.

¹⁵³ Ibid.

insensitivity by the state ensues. As Sobrino noted, the language of the crucified people may mean little to some, nevertheless, I see it as a reality when I reflect on the day to day life experiences of PWD. This crucified people is an historical continuation of Yahweh's suffering servant whom the sin of the world has continued to rob of a decent life, and whom the powerful have robbed of the right to life with dignity. To reflect in this way is to see the suffering of Christ and to see the suffering of the poor and disabled as a continuation of His suffering.

The theology of the crucified people, as Sobrino puts it, "refers to the majorities who live affected by the drama of death that is brought about as a consequence of injustice, cruelty, inequality, and disdain." Furthermore, he stresses that they are those individuals who have no voice and are denied their very existence. To facilitate the hearing of the voice of this people, we should remember that all humans carry the image of God and should be treated with equal dignity. These victims who are impoverished and conspired against by leadership and superior powers, are nailed to the cross and are waiting to be brought down.

These victims are the bearers of the soteriological dimension of Christian faith for they bring salvation to humankind as a light that unmasks the lies and the dehumanization that exists in the world. The poor are a key means to evangelization of the rich and powerful for their situation plays a crucial role in calling for the humanization of the world. In solidarity with the poor and by making an option for the poor, Nigerians can wake up to the challenges of exclusion and marginalization that has eaten into the marrow of our nation. It is important to look into all the obstacles to inclusion and be sure to eradicate them. In solidarity with the crucified people, Nigeria's leadership should make every effort to see that there is equal access for all. All public

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¹⁵⁴ Ibid, 51.

¹⁵⁵ Rafael Luciani, *Hermeneutics and Theology in Sobrino's Christology* in Stephen Pope ed., *Christian Hope and Solidarity: Jon Sobrino's Challenge to Theology* (New York: Orbis Books, 2008), 109.

¹⁵⁶ Ibid.

¹⁵⁷ Ibid, 109

places should be equipped for disability access and there should be equal opportunities for all. There should be funding for disability related issues and efforts should be made to eradicate disabling conditions, like the maintenance of roads to mitigate accidents and other road hazards as well as maternal healthcare, and neonatal pediatrics, education and employment. Such action what it means to bring PWD down from the cross, liberating them from the injustice of the world and treating them as people who possess equal rights and dignity.

In the next chapter, I look at the Church in Nigeria in order to challenge the leaders of the church to embrace advocacy for PWD. In so doing, I will look at the CST principle of Participation and then, a theological anthropology of all-inclusive ministry to explain the role of the Church in promoting equality among the abled and disabled in the society. In this final chapter, I proffer my own suggestions in order to make Nigeria and the Church in Nigeria a beautiful place for God and God's people.

Chapter Four.

God knows me and calls me by my name....God has created me to do Him some definite service; He has committed some work to me which He has not committed to another. I have my mission—I never may know it in this life, but I shall be told it in the next. Somehow I am necessary for His purpose...I have a part in this great work, I am a link in a chain, a bond of connection between persons. He has not created me for naught. I shall do good, I shall do His work, I shall be an angel of peace, a preacher of truth in my own place, while not intending it, if I do but keep His commandments and serve Him in my calling.

Therefore I will trust Him. Whatever, wherever I am, I can never be thrown away. If I am in sickness, my sickness may serve Him, In perplexity, my perplexity may serve Him, If I am in sorrow, my sorrow may serve Him. My sickness, or perplexity, or sorrow may be necessary causes of some great end, which is quite beyond us. He does nothing in vain; He may prolong my life, He may shorten it; He knows what He is about. He may take away my friends, He may throw me among strangers, He may make me feel desolate, make my spirits sink, hide the future from me—still He knows what He is about. I ask not to know—I ask simply to be used. ¹⁵⁸ (John Henry Cardinal Newman)

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¹⁵⁸ John Henry Cardinal Newman, "Meditations on Christian Doctrine: Hope in God—Creator," 7 March, 1848. http://www.appleseeds.org/Newman_My-Mission.htm

In this last chapter, I look at the role of the Church in advocating for people with disabilities in Nigeria. (1) I engage the principle of participation in the Catholic Social Teaching, (2) I look at the book of Acts of the Apostle, (3) especially the Pentecost experience and (4) the Healing of the man at the Beautiful Gate as points of reference for a theological anthropology of inclusion for PWD. (5) I look at the healing of the lame man as restoration for all (a symbolic dimension of inclusion), (6) offer a solution, and (7) recommend ways to foster inclusion, and the role of the Church in advocating for PWD.

4.0 What can the Church do? / What Role can the Church Play? Toward a Solution.

The branding and labelling of certain groups of people, as a result of disability and the consequent discrimination against them is a challenge not just to the government, but most importantly, to the Church. The prejudices in our cultures and societies exclude PWD from opportunities to develop their capacities. In most cases, opportunities for good education, employment, travelling, and inclusion into the mainstream life of the society is not possible because of the stigma assigned to them. This lack of opportunity restricts the choices of PWD, no matter the brilliance and skills individual has already acquired.

When Jon Sobrino talks about bringing the crucified peoples down from the cross, he addresses Church leaders all over the world. His message, which I have adopted, is not limited to the governments of states. This message is directed to the entire Church as well. Disability does not entail incapacitation, as so many cultures in Nigeria and elsewhere portray. PWD are just as often capable as the able-bodied if given the chance. The Church is supposed to be a home for

all, but the biases against PWD are so entrenched in our Churches that one begins to wonder if we really share in the one body of Christ. I have encountered many young people with disabilities who were refused access to Catholic schools in Nigeria, because of their impairments. Schools do not have the necessary facilities to care for them. One must ask, what do I think of those who cannot walk half a mile or of people who need means of transportation in order to make a move, is that not a disability? What of those who cannot read without their eye lenses, is that not a disability? What of those who cannot sing a line of a song, but they are priests today, is that not a disability? Societies problem is that what is seen as a disability are those impairments that are blatant and affects the physique of a person or makes them more in need of particular care. We may not easily label the above examples as disabilities, but we associate people who use wheelchairs as disabled, and those who are dependent on Braille for reading as disabled. This association is simply a normalized degradation of PWD and should be avoided, especially in the Church. 159 It is privileging a group in the human circle and marginalizing the other who are disenfranchised from being part of the community.

The Church needs to operate inclusively and without biases. A majority of PWD are impoverished and need the support of the Christian community. The attitude of looking at PWD as 'other' discards their worth among the Christian community. Most groups in the Church do not regard PWD as part of the system but rather, they look at them as 'others' who are not part of the community. PWD are the world's largest minority, because it is a group to which everyone is a potential member. ¹⁶⁰ Access for PWD should be a priority for the Church. If the government is not ready to be in solidarity with PWD, then full advocacy for their inclusion ought to be one of

¹⁵⁹ Miroslaw Tataryn & Maria Truchan-Tataryn, *Discovering Trinity in Disability: A Theology for Embracing Difference* (Maryknoll, New York: Orbis Books, 2013), 13.

¹⁶⁰ Disabled World, "Home Page" (2009-2015), http://www.disabled-world.com.

the goals of the Church as the 'One body of Christ.' At this point, I look at the principle of participation in CST in order to advocate for the inclusion of PWD in Nigeria.

4.1 Principle of Participation: Key to Inclusion for People with Disabilities.

Here, I propose the principle of participation, which is an important tenet the Church needs to embrace in order to advocate and include for PWD. Participation comes from the Latin *partem capere*, which means to take part. PWD are encouraged to take part in the life of the Church and the community. Being part of God's children, the church should encourage participation of PWD in liturgical and social activities. Exclusion, segregation and discrimination keeps them away from the life of the Church, thereby, stifling the growth and development of PWD and the community in general.

Participation of PWD is a human rights issue, and the UN Convention on Disability Rights makes it clear that PWD have the right to participate fully in the political and social life of the community without biases. It is important that PWD become part and parcel of the decision making in society. Participation has its roots in becoming a part of, joining in, and engaging fully in the life of one's society. It is built on total acceptance of the gifts of all and stands against to discrimination of others. Participation requires access for PWD at all levels, schools, healthcare, recreational houses, churches, auditoriums, public restrooms, and so on.

Any state or church that negates the principle of participation, needs to go back to the drawing board. I have looked at solidarity and preferential option for the poor in chapter three.

These two principles cannot be realized, especially in a country like Nigeria, without the

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¹⁶¹ Pia Mathews, "Participation and the Profoundly Disabled: "Being" Engaged—A Theological Approach." *Journal of Religion, Disability & Health* 17 no. 4 (2013): 426-438.

United Nations, Convention on the Rights of Persons with Disabilities (2006), www.ohchr.org/EN/HRBodies/HRC/

principle of participation. PWD belong to the 'One' nation Nigeria and their rights and privileges as citizens has to be accorded them. Through participation, a citizen, either as an individual or group, whether directly or through representation, contributes to the cultural, economic, political and social life of the civil community to which he/she belongs. Participation allows one to become fully integrated in the society. Moreover, participation is a duty to be fulfilled consciously by all, with responsibility and with a view to the common good. 164

The Catechism of the Catholic Church dedicates paragraphs 1913-1917 to participation, which ought to be adopted by every government and the local churches that make up a country. It is a call for the respect of human dignity. Participation encourages the responsibility to work for all individuals, at all levels of the state, economic activities, social, information and culture. In Nigeria, there are very few PWD who are successful, mainly because the government has not allowed them full participation into the mainstream of the state. A strong moral pressure is advocated for Nigeria, so that leadership and the administration of public life will be a responsibility for all in the society and not for a few. It is the onus of the leaders of the Church in Nigeria to mount this pressure on the government for an opening for PWD.

Pope Paul VI in *Octogesima Adveniens* points out two basic aspirations of humans in society, which are imperative for the peaceful and interdependent life of the society. These two fundamental desires are; equality and participation. These two aspirations, Paul calls "two forms of man's dignity and freedom." Pope Paul, by bringing participation and equality together, reminds humanity of the absolute equality of all and encourages all to lay claim to this fundamental truth. Before Pope Paul VI, "no other teaching had so strongly insisted that every

¹⁶³ PCJP, Compendium of the Social Doctrine of the Church (Washington DC: USCCB Publishing, 2005), 83.

¹⁶⁵ Marvin L. Krier Mich, Catholic Social Teaching and Movements (Mystic, Connecticut: Twenty-Third Publications, 1998), 181, quoting Octagesima Adveniens § 22.

person has a right to be actively involved in all decision making process that affect their lives—economic, cultural, educational, political."¹⁶⁶ The key reason for this longing for participation and equality is that people will "seek to promote a democratic type of society."¹⁶⁷ A society where people are allowed to choose their leaders and become attentive and responsible to the growth of the community.

The yearning for equality and participation is an age-old desire felt by so many who find themselves at the margins. All thanks to Pope Leo XIII who started advocacy for just wages for workers by in *Rerum Novarum*. Though the encyclical's argument was not based on equality it remains the most profound setting for the social teaching of the Church. The emphasis on participation and equality in *Octogesima Adveniens* is a just effort to incorporate those who were sidelined. It is not just incorporating them, but being in solidarity with them so they may regain their rights.

In Nigeria, PWD are at the margins because of stigma, as I mentioned above. The Cultural barriers that entrench PWD and push them to the margins in Nigeria must call forth the church and the government to revisit these attitudes. Attention should be given to those elements in history and the social obstacles which stand as mitigating forces against the full participation of PWD and other citizens in the destiny of their communities, especially in the areas of information and education. Achieving authentic participation in Nigeria might seem difficult because the country is like a 'sinking ship,' but it is not impossible, because Nigeria has the expertise and resources able to incorporate all of her children into the life of the nation.

If all families in Nigeria began to respect PWD, and see them as equals in dignity, things would surely change for PWD. In most cases, discrimination begins at the family level, where

¹⁶⁶¹⁶⁶ Ibid

167 Ibid.

¹⁶⁸ Compendium of the Social Doctrine of the Church, 84.

children born with disabling conditions are not accepted, and some are even killed. Families should engage more in accepting PWD, knowing fully that all are equal before God and before the Law. When families uphold advocacy, the community surely would follow, since families form communities. PWD in Nigeria should not be denied their rights to public life, and the society should accord them the same level of rightful respect, just like those who are able bodied.

In participating in the community, the civic role of every human person is important. For a solid democratic system in every given society, the participation of the citizens in their civic responsibilities should be promoted. The disenfranchisement of a particular group, while allowing another to perform the same duty, is not the best for any state. Democracy must be participative. All citizens whether disabled or abled must have equal rights to vote as well as to be voted for.

Employment opportunities should be open to PWD just as to the able bodied. In Nigeria, to be a person with a disability is to be 'disadvantaged,' but this view is wrong. In most firms and ministries, PWD are relegated to the margins during job hunts, while the able bodied are considered first. Even if a person with disability shows the best results and presents the best résumé, most employers prefer the able bodied people than their disabled counterparts. Employment in Nigeria is sinking as a result of bad governance, making job creation very minimal. The United States Conference of Catholic Bishops reminds the Church and society that, "the most urgent priority for domestic economic policy is the creation of new jobs with adequate pay and decent working conditions." To create jobs remains pertinent, and good jobs with good pay for all, is the most imperative.

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¹⁶⁹ Ibid.

¹⁷⁰ USCCB, "Economic Justice for all: Pastoral Letter on Catholic Social Teaching and the U.S. Economy," 1986.

I invite the leadership of Nigeria, both in the church and state to promote participation for all her citizens, removing elements of favoritism, which accepts some while discriminating against others. Access to healthcare delivery and healthcare facilities is in itself participating in the society for a healthy life of both the rich and the poor. When facilities are accessible to the rich, and not to the poor, access in participation limits the poor and favors the rich. Nigeria is economically sound enough, if managed well, to care for its citizens. I call on the Church to lead as we advocate for participation for PWD in Nigeria.

Participation encompasses all spheres of life in society. I call upon the Bishops as prophetic leaders-- in a country where ethnicity, religious intolerance and violence, bribery and corruption and other vices have swept away all good things that the people of Nigeria would ever enjoy-- to raise their voices in advocacy and full inclusion for all people, including PWD in Nigeria.

In furthering this project for access and inclusion of PWD into the mainstream of the Church and society, I look at the biblical account of the Pentecost in order to elucidate a theological anthropology of that account in Acts of the Apostles Chapter Two, and a look at the healing of the man at the Beautiful gate. This biblical reflection is to encourage the Church in Nigeria to do more in praxis, so that PWD may be part and parcel of the society through the improvement of facilities that enable them to have a better life. This inclusion begins with each person including PWD from the womb, at birth and to adulthood.

4.2 A Theological Anthropology using Acts of the Apostles: Pentecost experience and Healing at the Beautiful Gate.

It is important to note that the writer of Acts is the same as the gospel of Luke, and Acts of the Apostles is a continuation of the gospel of Luke. This continuity is implicit in the selected passages I am using. Both healings of paralytics (Luke 5:17-26; Acts 3:1-10) occur at the beginning of the ministries of Jesus and the Apostles. These similarities highlight the simple fact that the author of Acts wants to project the Apostles as prophetic successors of Jesus. ¹⁷¹ The similarities in both texts are uniquely interwoven.

At the point of ascension into heaven, the Apostles ask Jesus whether it is time for the kingdom to be restored to Israel. He answers them, that it is not for them to know the time and season that the Father has established by his authority. Jesus adds to this answer, "But you will receive power when the Holy Spirit comes upon you, and you will be my witnesses in Jerusalem, throughout Judea and Samaria, and to the ends of the earth" (Acts 1:8). 172 Jesus at this point makes it clear to the Apostles that, there is still much to be done. Amos Yong, a theologian whose life was drawn to disability advocacy because of his brother with Down syndrome writes, "In Acts, the disciples accomplished the healing miracles that Jesus did by the power of the same spirit,"173 and in Acts 2, the Holy Spirit empowered the disciples to proclaime the good news to all nations as Jesus promised in Acts 1:8.

4.3 The Pentecost Experience: An All Inclusive Church.

Reading through the Pentecost narrative of Acts 2, it becomes clear that it is in the plan of Christ that we promote an all-inclusive Church. The Pentecost experience fosters a welcome home attitude for all, the able bodied and PWD. In Yong's view, the miracle of Pentecost, is a means to

¹⁷¹ Thomas Malipurathu, SVD. "Mission as Mediating God's Healing Touch: The Polyvalent Symbolism of a Cure Miracle,"

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http://www.sedosmission.org/sedosarticles/documents/malipurathu-missionasmediating.pdf. Posted 11/12/2013.

New American Bible: St Joseph Medium Size Edition (New York: Catholic Book, 1991)

¹⁷³ Yong, The Bible, Disability, and the Church, 59

an end that is the manifestation of "God's deeds of power" (Acts 2:11).¹⁷⁴ It is a means to accomplish God's will. What is this power that God intends to accomplish? God is capable of inspiring speech and has created the bodily members through which speech is produced. Then God adds that an incapacity to speak is no hindrance to what God can do, since God is just as capable of accomplishing communicative intentions using other means. This adaptability is the power that God intends to accomplish, this is to say, God has all powers. Yong notes that "from a disability perspective, then, the God who creates the mute or enables the speech of the stutterer (Ex.4:10-12) is the one who empowers all communication about God's wondrous works." God decides on how to manage and handle power and can do all things.

In the inspired hearing of the alien foreign languages, or the ability to hear the native language of each other, Yong describes it as not just *xenolalia*, speaking of unlearned languages, but *akolalia*, the hearing and understanding of unlearned languages. This inspiration can only come from God who has all powers and is subordinate to the intended ends that manifest God's wondrous deeds. This subordination is indicative of the fact that the incapacity to walk, hear or to talk is not a limitation to being part of God's family. If God opened the mouths of the disciples gathered at the Upper Room and they spoke in different languages, and at the same time, they hear and understand each other, then, incapacitation means nothing to God, because God has the power to inspire alternate ways of being understood. From a disability perspective then, one who is impaired does not exclude the person from God's family since God can make a way through disability. A key example is the Ethiopian Eunuch who received his baptism from Philip, without being healed of his impairment. The gift of God's love extended to him notwithstanding his situation (Acts 8: 26-40). Another example is Jesus's response to the dwarfed Zacchaeus who

174 Ibid.

¹⁷⁵ Ibid.

shows faith by climbing a tree to behold Jesus: "today salvation has come to this man because this man too is a descendant of Abraham" (Luke 19: 1-10). These examples reveal that there is no segregation in Jesus Christ. All are called to become one family in him.

Luke recorded many miracles in the Acts of the Apostles that I am unable to elucidate, but to mention a few, Philip and his miraculous powers in Acts 8:7, 13, Stephen in Acts 6:8, and Paul's healing powers as manifested in 14: 8-10, 19:12 and 28: 8-9.

4.4 The Healing of the Man at the Beautiful Gate. Acts 3:1-10.

Earlier in this chapter, I explained that the earliest Christian community saw herself as in a *continuum*, putting finishing touches to Jesus' works. The narrative at the beautiful gate is very important in the work to dismantle elements of disability from biblical pericopes and giving PWD, especially in Nigeria, a better life. There is still an ongoing debate regarding the location of this beautiful gate among scholars. Some argue that it is part of the gate in Jerusalem that the Muslims have conquered, and others insist that Luke may have used it as a description to portray the beautiful nature of this healing at the temple gate, which shows God's healing power. Peter and John in this narrative see themselves as continuing the work of their master through their faith in him

In this healing, Peter recognizes the fact that he has nothing and sees himself in the same predicament of this lame man who sits at this gate from morning to night. "Silver or gold, we do not have," in this both apostles tell the man, we are like you. Peter tells this man to look at him, the man focused his gaze on Peter, and then Peter evoked the power in the name of Jesus. Evoking the name of Jesus is important here. It is calling the power of Jesus who healed the lame

and fed the poor before his death, God's work is still in progress, with the name of Jesus the man stretched out his feet and ankles.

The whole community received the healing of this man with joy. A man in their midst, who for many years, had being carried to the gate where he begs for alms. The healing inspired two great speeches by Peter (Acts 3:12-26): First, at the portico of Solomon outside the temple, addressing the community who had gathered in awe for what God had done and the second speech (in Acts 4:8-12,19-20), addressing the Sanhedrin, in defense of the miracle. Why were people amazed? Lameness is a cultic impediment, and as such a lame person cannot offer the oblation of the Lord (Lev.21:16-18). A lame person is completely barred from entering the temple and cannot become a priest. Therefore, as Jesus started this great work of giving meaning and life to the marginalized, the apostles followed too. This lame man was restored to full dignity and full participation in the life of the community. This cure is not only physical, but also spiritually enriching since the spiritual life of the lame man has been ignited through physical symbolic signs.

The fundamental message here is that Peter and John tended to this man, they gave him attention that no one else had ever given to him. This gift of attention challenges us and church leaders to attend and be caregivers to the marginalized in society. Peter holds this man and pulls him up. In doing so, Peter brings love in action. Offering not only kind words but also kind deeds. The man leaps for joy and went into the temple praising God. Peter and John moving together promote the communal witness in the Christian community. Further, this early ministry demonstrates a collaborative ministry among the disciples. Finally, the Christian community welcomes this man in her midst and this welcome is surely in God's plan. No one would be excluded from the community of the children of God. It is important to note that "what is at stake

¹⁷⁶ Malipurathu, "Mission as Mediating God's Healing Touch"

is not the biological healing of disabilities or the removal of blemished bodies from the sanctuary, but the purifying of the unholy stigmatization that socially excludes, divides, and pollutes the people of God."¹⁷⁷ Primarily, the problem is how to deal with the social stereotypes that burden PWD and exclude them from society. Furthermore, a look at the restorative import for all God's children is paramount as this healing at the beautiful gate portrays the inclusion of all God's children.

4.5 A symbolic dimension for inclusion

This miracle is spiritually informative, as it does not tell us primarily about the physical healing of infirmities alone, but calls for a consciousness of the last things. As Mikeal Parsons, he traced the ancient use of physiognomy to counteract its use in the exclusion of PWD, he found Physiognomy was the study of the relationship between the physical and the moral sphere. ¹⁷⁸ It is an understanding that a person's ability or strength is evaluated synonymously with the person's physical appearance. Thus, PWD are considered weak because of their physical make up. In quoting the author of the Pseudo-Aristotelian tractate Parsons writes, "The physiognomist takes information from movements, shapes, colors, and traits as they appear in the face, from the limbs, and from the entire structure of the body (806a.28-34)."¹⁷⁹ This information is based on the assumption that "soul and body react on each other; when the character of the soul changes, it changes also the form of the body, and conversely, when the form of the body changes, it changes the character of the soul (808b.12-15). ¹⁸⁰ Whatever affects the soul, affects the body and

¹⁷⁷ Yong, The Bible, Disability, and the Church, 45.

¹⁷⁸ Mikeal Parsons, "The Character of the Lame in Acts3-4." *Journal of Biblical Literature* 124 no. 2 (2005): 295-312.

¹⁷⁹ Ibid, 296.

¹⁸⁰ ibid

vice versa. As such, any form of disability in a person affects their inner morality and their capabilities.

Parsons suggest, that Luke's narratives portray his interest in physiognomic conventions. In his texts, Luke uses the zoological method of physiognomy that determines human characteristics by observing similarities in animals figuratively and negatively to refer to human beings. Those who wanted to be baptized by John the Baptist were referred to as "You brood of vipers," (Luke 3) and, in Luke 10:3, Jesus sends out the seventy two, telling them "Go your way; behold I send you out as lambs in the midst of wolves." It is important to note, therefore, that Luke uses zoological physiognomy but not to hinder acceptance or inclusion. In the healing of the Lame man at the beautiful gate, Luke counteracts the teaching of physiognomists. He does this by refusing the exclusion of any person in the community as a result of bodily appearance. For Parsons, "Luke drew on physiognomic language and the ancient cultural biases against the lame to lure the audience into the story only to argue that membership in the eschatological community of the Way requires rejection of the assumption that physical appearance is directly connected to moral character." ¹⁸¹ The community in the writing of Luke is presented as an eschatological community where all share in the one body of Christ. The pericope intimates that Zacchaeus in Luke 19, the bent woman of Luke 13, and the Ethiopian Eunuch of Acts 8 teach about non-exclusion of PWD against the physiognomist teaching on disability.

Following a physiognomist understanding, the lame man at the beautiful gate is "disadvantaged," having weak ankles and feet determine that the lame man has inner weak morality. The sign of a strong personality, in the physiognomic teaching, in this case would be a man with a strong and healthy ankles and feet, symbolic of a robust character.

¹⁸¹ Parsons, "The Character of the Lame in Acts 3-4," 300.

The weakness of the lame man is portrayed by the discrimination he suffered by sitting outside the temple gate, contributing nothing to the growth of the community. Sitting at the gate of the temple, without entering is symbolic, as it points to the social exclusion suffered by PWD. At the speech in chapter 4, Peter refers to this man as weak, which confirms this man's inability to be meaningful to the society. Those who are lame rely solely on the help of others. In the cultural biases that discriminate against PWD, he was a liability. Parsons makes it clear, "Peter's description of the man as "weak" may refer to his former physical and moral state," but that weakness is not limited to those with physical challenges. 182

Lame and other disabled people were objects of ridicule in antiquity. There were depictions of lame people used as objects of amusement at the symposia to the ridicule of the crowd. Crippled dancers were used to entertain the crowd, prominent among them is on "Corinthian pots, as, for instance, on an alabastron which depicts a padded dancer-to the side splitting laughter no doubt of the drinkers witnessing this prank." This is part of the reason why PWD were segregated and stereotyped in ancient times. Parsons buttresses this humorous denigration of PWD in antiquity with the jokes made by insensitive hosts in testing the abilities of the visitors to hold their drinks, for example, "ordering a stammerer to sing, a bald man to comb his head, or a lame man to dance on a greased wineskin," even at some points, the lame are asked to serve the wine in order to allow the abled persons to laugh at them. Luke's goal was to use the healing of the man at the beautiful gate to dismantle all these elements of physiognomy that discriminated against the PWD.

In this healing, at that moment when the lame man stood up at the command of the Apostles, Parsons describes it as moving from inactivity to walking, from paralysis to praise. A

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¹⁸² Ibid, 304

¹⁸³ Ibid.

¹⁸⁴ Ibid.

movement from sitting to clinging and then to standing unassisted. ¹⁸⁵ It is the moment of truth, which is noted in the amazement of the crowd. The actions following the healing as the lame man became more present at both speeches by Peter shows that the lame man was actually courageous. This healing, testifies to the eschatological prophesy of Isaiah in chapter 35:6, "the eyes of the blind shall be opened, and the ears of the deaf unstopped; the lame shall leap like a deer" and the restoration of Israel as part of the vision of God as cosmic king. ¹⁸⁶ The lame man's healing in symbolizes the potential restoration of Israel as part and parcel of God's reign in the universe, inaugurated by Jesus Christ and continued by the Apostles. This reign of God is still on a *continuum* from the Apostles, to the Apostolic Fathers, to the Fathers of the Church and runs until today. The lame man's praises to God and joining the Christian community is symbolic for Luke, as it portrays the lame man as partaking fully in God's eschatological family and then to the saving work of God for the beloved Israel. The healing of the man at the beautiful gate is explicitly a symbolic theology of inclusion for all God's children as the 'One Body of Christ.'

The Pentecost account and the healing of the man at the beautiful gate invites us to accept as part of us, those who have one form of disability or another. Discrimination remains the key factor common with all PWD. 187 No matter how learned, rich or poor a person with disability is, such a person suffers discrimination, especially in most developing countries. For this reason the Church in Nigeria needs to create advocacy networks in order to improve inclusion of PWD throughout Nigeria. The paramount question is how I make my recommendations of an inclusive ministry for PWD. In doing so, I have to advice PWD. This advice is an encouragement to PWD,

¹⁸⁵ Ibid

¹⁸⁶ Parsons notes on the messianic role of the Israelite community in God's cosmic kingship, see Edgar W. Conrad, Reading Isaiah (OBT; Mineapolis: Fortress, 1991).

Tataryn & Truchan-Tataryn, Discovering Trinity in Disability, 14.

especially for those who have developed low self-esteem because of the discrimination they suffer

4.6 Toward a Solution.

Concluding my analysis, the first solution I offer is to challenge PWD to build up their self-esteem. Growing up in Nigeria gives me the authority to hold that most people with disabilities in Nigeria have very low self-esteem. It is true that the government and, to some extent, the Church are not doing enough to incorporate PWD into the system. Nevertheless, it is not enough of a reason for most PWD to take the "I can't help myself attitude" and to languish. The Church must lead in advocacy and support of PWD starting with a reach out to PWD and to many Non-Governmental Organizations in Nigeria sponsored by groups in the Western world who have agencies to help and liberate disabled people. Once PWD are informed and taught, then they too can reach out to these groups to empower themselves. They should identify themselves with governmental and religious groups made of able and disabled people aimed at fighting discrimination, like the National Handicap Carers Association of Nigeria (NAHCAN), which began in 1998. In my diocese at Enugu, we have Catholic Institutes for Justice and Peace (CIDJAP), which organize programs for PWD through their vocational center 'Oru aka di mma' (Handiwork is good).

There is already a culture of disrespect as Pia Mathews, a bioethics professor at St. John's Catholic seminary, Wornersh, United Kingdom, notes on Self Advocacy:

At the root of the barriers we face is an idea that we are less good and less worthwhile than other people. Doctors try to stop us from being born in the first place, when we are born our parents are given negative views about our chances in life. They are encouraged to mourn the fact that they have abnormal children, and their disappointment stays with us throughout our lives, the extent to which society looks down on us

contributes to the fact that throughout our lives people with learning difficulties do not get human rights, and yet there is no public outcry, no one up in arms about how little choice or control we have over our everyday lives. 188

Mathews warns against the abortion of the unborn with disabilities, addresses people with learning difficulties and then all PWD at large. Its tonality is very challenging, reminding readers of what people think of them. It is an awakening, not only for PWD, but also for every human being to see how dehumanized PWD have been. This dehumanization is why I insist that PWD receive what is done to them as members of their communities and to rise up and recant the negative definitions and assumptions labeling them as nobodies in the Nigerian society.

Another important point I have found to be pertinent in this discussion that will open more doors to inclusion than exclusion of PWD in Nigeria is the reporting of the Mass Media on PWD. Most times, unfortunately, the mass media in Nigeria updates people wrongly on the activities of the government and the Church in their efforts toward PWD. Perpetual corruption has eaten into the marrows of most government ministries, the mass media included. The mass media often contributes to the labeling of PWD. How attributes of news stories on disabilities are played in the news media can and does potentially sway public opinion about disability issues and toward the negative cultural representations of PWD in general. The reports given in most cases concerning care giving, schools and other infrastructures necessary for PWD are always twisted to favor the point of action at a given time. Most media houses are bribed and the correspondence is fine tuned in favor of the government.

It is important for the mass media to be balanced and accurate about what they publish for public consumption regarding people with PWD. I believe if the media would be as

¹⁸⁸ Pia Mathews, *Pope JohnPaul II and the Apparently 'Non-acting' Person* (Leominster, UK: Gracewing, 2013), 27.

^{27. &}lt;sup>189</sup> Haller, "Representing disability in an ableist World." Quoted by Ogundola, "Framing Disability: A content analysis of News Papers in Nigeria," 4.

aggressive toward the government and to the Church as they are supposed to be, most of the negative beliefs about PWD, which oppress and suppress them, in Nigeria would have been corrected by now.

4.7 Fostering Inclusion.

The lame man at the beautiful gate may not have witnessed before a love as compelling and profound as the one shown by Peter and John. All his life, he may have been a beggar and passersby may have give their coins without even noticing him. It's a routine for so many to toss their coins into his basket and go their way. The apostles' approach calls Nigerians to wake up. In waking up, it is important that we realize that all humans are created in the image and likeness of God. Attention should be given to people with disabilities in all spheres of life. They are part and parcel of the human community and not lesser human beings because of their disabilities.

Life created and preserved by God possesses an inherent right, completely independent of its social utility....There is no worthless life before God, because God holds life itself to be valuable. Because God is the Creator, Preserver, and Redeemer of life, even the poorest life before God becomes a valuable life. ¹⁹⁰

Every life is important before God and every human person should be respected. Disabled/abled is not a yardstick to determine how life and its fruits should be shared. The example of the apostles and the action of the Holy Spirit on the Pentecost day invites the Church in Nigeria, especially the Catholic Bishops, to work harder for the empowerment of PWD in our Churches and in our communities. Allowing them participation in liturgical activities will ensure for them a sense of belonging. Most times because of segregation, PWD don't participate in readings,

¹⁹⁰ Bernd Wannenwetsch, "My Strength Is Made Perfect in Weakness": *Bonhoeffer and the War over Disabled Life*, in Brian Brock and John Swinton, *Disability in the Christian Tradition: A Reader* (Grand Rapids, Michigan: William B. Eerdmans, 2012), 353.

serving at masses and other services in our churches in Nigeria. The apostles' example asks for these openings for them.

The fifty dioceses of the Catholic Church in Nigeria will have to organize volunteer trainings, aimed at teaching PWD how to integrate into the life of the church. Successful diocesan programs require the assistance of qualified, interested volunteers. All parishes are expected to do this as it will enhance participation of PWD in all church activities. It will be important to include volunteers who are themselves disabled in pursuing this goal, especially in organizing workshops. The essence is that it is an avenue for all people to learn and communicate directly with those who are disabled. It helps to build bridges between the abled and PWD who struggle for inclusion in the Christian community. The mobility aid and appliances research and development center (MAARDEC) formed by Cosmas Okoli, disabled at the age of four by polio, is one example. MAARDE C, is a well-known group in Nigeria that has given birth to other advocacy networks in Nigeria for PWD.

More so, in the construction of schools and churches, it is important to ensure the facility is disability friendly. This is so that people with mobile disabilities would not be excluded from these facilities on account of no access to climb to another level of the building. Rehabilitation homes are also very important at the state and Church level.

The Church, in her advocacy, should make sure that the government puts into place the consensus reached at the WHO convention in 2005 for the betterment of the lives of PWD and promote equality between all citizens. Seeing PWD as cross bearers, as such belittling them, is a defect and loss to the society. The government should build schools that would accommodate abled and disabled children. Inclusive schools, for example, would have students with the

¹⁹¹ Janice Lalonde Benton and Mary Jane Owen, *Opening Doors to People With Disabilities* (Washington, DC: National Catholic Office for Persons With Disabilities Publication, 1995), 36.

visually disabled, people with learning and hearing disabilities, people with mobility disabilities learning alongside the nondisabled. This accommodation would make sure that everyone's rights are respected. Following the example of the apostles, all are to find equality to ensure all are included into the one family of God

John Paul II in his farewell address during 1986 Human Life Convention in Australia encourages countries, states, and humanity at large to work for the liberation of PWD. He confirmed once more the uniqueness and sacredness of every human life.

> It is a sacredness rooted in the mystery of our creation by God as well as in the mystery of Redemption of which I have already spoken. In a world where the gift of human life is often despised, manipulated, abused, and even deliberately aborted or terminated, the Church proclaims without hesitation the sacredness of every human life. No matter what our weaknesses or limitations -- whether physical, emotional, or spiritual -the life of each one of us is unique; it has its beginning and its end in God's own good time. It is the responsibility of the whole community -from the level of national, state, and local government down to the level of the individual citizen -- to protect this sacred gift. 192

John Paul II encourages humanity to work harder to see that PWD are well integrated into the society. Each person should be ready to assist another, without segregation, marginalization or allowing a particular group to suffer unjustly. He also pleaded that healthcare should be provided for all, especially the aged and other PWD. Those being served must also truly participate in the community, and this calls for mutual respect and a willingness to listen. PWD, in particular, rightly seek to be more fully integrated into the community since they too have an important contribution to make to others. 193 Such integration include participating in the church and society, equality in employment as they have various gifts to offer, and equal access to education, to make sure that gifts of all citizens are utilized in the state.

¹⁹² JohnPaul II, "Pastoral visit in Australia: Address to the Sick and the Handicapped," (November 25 1986), § 4. www.vatican.va.
¹⁹³ Ibid.

The example of the Apostles challenges leaders in Nigeria, both in the Church and in the government. The healing of the man at the beautiful gate calls for an all-inclusive life in all spheres in Nigeria. The Pentecost experience teaches us that God has all power and knows how best to manipulate it as exemplified in the healing of the man at the Beautiful Gate. The healing was a signal then and now to the community to welcome him, that welcome is surely in God's divine plan. There should be no exclusion in the society, as we all share in the one family of God. The government, Church leaders, and humanity at large are called to support people with disabilities. In the words of the Council Fathers of Vatican II, "In the Church not everyone marches along the same path, yet all are called to sanctify and have obtained an equal privilege of faith through the justice of God (cf. 2Pet. I: 1)" (LG § 9). Though we all have different faces and different names, we are all called for a purpose. No handiwork of God is an accident.

4.8 Conclusion

So many productive lives have been wasted in Nigeria and many other developing countries because of violence, marginalization, discrimination, rejection, and exclusion of PWD. It is time to be "our brothers' brother and our sisters' sister," in order to make the world a better place. I came across this quotation from Helen Keller, a woman born blind which challenges me more to advocate for PWD: "A person who is severely impaired never knows his hidden sources of strength until he is treated like a normal human being and encouraged to shape his own life." Typical of Nigeria and Africa at large where most people who are severely impaired are treated with lack of respect and dignity, most family members prefer them dead than giving them care or

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¹⁹⁴ Vatican Council II, Dogmatic Constitution on the Church, *Lumen Gentium*, (November 21 1964), § 9, at The Holy See, www.vatican.va.

¹⁹⁵ Elizabeth Brown, *Creating an Inclusive Worship Community: Accommodating All People at God's Table* (Missouri: Liguori Publications, 1978), 91.

involving them in the life of the community. It is important that we look at the causes of discrimination and deal with them once and for all. The cultural beliefs in Nigeria and Africa must be addressed in order to achieve the access for PWD which I advocate in this thesis.

This thesis began by looking into the history of Nigeria, which led to the equalities and inequalities which are entrenched in the general life of Nigeria and Nigerians today. This history reveals the negative effects of colonization, leading to bribery, corruption and instability in present day Nigeria. These effects are prevalent in the healthcare system as a result of inequalities and PWD suffer most as a result of these shortcomings. I went on to describe the situation of the healthcare system and delivery in Nigeria, which needs attention especially in providing good insurance programs for both the rich and the poor. PWD remain the poorest of the poor in Nigeria, I therefore discussed that attitudes and cultural biases which push PWD to the margins be addressed.

In order to advocate for PWD in Nigeria, I used the Catholic social teaching of solidarity and preferential option for the poor in order to remind the Church in Nigeria and Nigerians that the onus to promote advocacy for PWD is in our hands. I continued this advocacy by using Jon Sobrino's metaphor of the crucified peoples as Yahweh's suffering servants to ask for love, care and empowerment of PWD. Oppression, discrimination and exclusion are the greatest ills to PWD in Nigeria, in order to foster access, I proposed the principle of participation as a means of incorporating PWD into the mainstream of the church and society.

Finally, I recommend that the Church in Nigeria, beginning with my own local ordinary at Enugu, and the other Bishops should renegotiate the place for PWD in order to come out with programs that would give preference to them. Seminars and trainings at parish levels centering on inclusive ministry for PWD should be initiated and where started enhanced. Education to

counter attitudinal barriers is very important for PWD. Every diocese should have a plan for educating PWD, and doing so with the able bodied is most welcomed.

Programs focusing on awareness, human rights, promotion of access to the goods of life, just like the able bodied enjoy, are very important in every Christian community and pastors of parishes should work diligently to make this happen for all.

A rights based approach remains the key in advocating for the inclusion of PWD, remembering that we are all created in the one image of God. This truth should provide enough zeal to motivate us to improve the architecture of our Churches so that, as a start, every Church would be accessible to all PWD. Staircases should be wheelchair friendly, doors should be wide, and our resources in Nigeria can provide lifts for most churches in the urban areas. For those in the remote parishes, we begin with building ramps along with staircases until the time it is possible to have lifts all over. The Church should spearhead advocacy in rights to healthcare related issues as there is no affordable healthcare for all in Nigeria.

There are NGOs, international organizations, interfaith groups, donors, and private agencies in the west who are ready to partner with the Church in Nigeria to provide adequate resources for PWD. Such groups will be ready to support PWD in praxis by extending their charity in order to empower them. These groups are ready to provide wheelchairs and funding for vocational institutes for PWD. The church in Nigeria needs to engage in this collaboration with the west. In doing that, the Church in Nigeria needs to manage its resources already available and then make a progression to the West. I am advocating collaboration with the West but not negating the man power and resources which are abundant in Nigeria.

Bibliography.

- Agujiobi, Josephine, "A comparison of equal rights, beliefs, and attitudes of Nigerian parents Living in the United States and Nigerian Parents living in Nigeria to people with Disability"
 - Ph.D. diss., Columbia University, 2007.
- Aquinas, Thomas. *Summa Contra Gentiles*. Book 1, translated by Anton G. Pegis. New York: Image Books, 1955.
- Azetsop, Jacquineau. Structural Violence, Population Health And Health Equity: Preferential option for the poor and the bioethics health equity in sub-saharan Africa (Saarbrucken: VDM Verlag Dr Muller, 2010). Chapter 8: "Social Justice, Human Rights, and Health Equity," 188-231.
- Bilgrien, Marie Vianney, SSND. Solidarity: A Principle, an Attitude, a Duty? Or the Virtue of an Independent World. New York: Peter Lang, 1999.
- Bello, Denise A, "Issues facing Catholic High Schools as they develop and implement inclusive practices for students with disabilities" ProQuest Dissertations, George Washington University, 2004.
- Benton, Janice Lalonde and Owen, Mary Jane Owen. *Opening Doors to People With Disabilities*. Washington, DC: National Catholic Office for Persons With Disabilities Publication, 1995.
- Block, Jeannie Weiss. *Copious Hosting: A Theological access for people with Disability*. New York: Continuum International, 2002.
- Browne, Elizabeth. *Inclusive Worship Community: Accommodating all People at God's table*. Missouri: Liguori Publication, 2004.
- Byron, William. "Ten Blocks of Catholic Social Teaching," *America: The National Catholic Review* (October 31, 1998). http://americamagazine.org/issue/100/ten-building-blocks-catholic-social-teaching.
- Cahill, Lisa Sowle, "Global Health and Catholic Social Commitment," *Health Progress* 88, no. 3 (2007): 55-57.
- Calderisi, Robert. Early Mission: *The Catholic Church and World Development*. New Haven and London: Yale University Press, 1988.
- Cardinal Wojtyla Karol, Trans, Andrzej Potocki, *The Acting Person*. Holland/Boston: D. Reidel Publishing Company, 1979.

- Clark, Meghan. The Vision of Catholic Social Thought: The Virtue of Solidarity and the Praxis of Human Rights. Minneapolis Minnesota: Fortress Press, 2014.
- Cronje, Suzanne. The World and Nigeria: The Diplomatic History of the Biafran War 1967-1970. London: Sidgwick and Jackson Ltd, 1972
- Crowther, Michael. *The Story of Nigeria*. London: Faber & Faber, 1978.
- Curan, Charles E. *Catholic Social Teaching 1891-present: A Historical Theological and Ethical Analysis*. Washington D.C: Georgetown University Press, 2002.
- Gould, Michael. *The Struggle For Modern Nigeria: The Biafran War* 1967-1970. New York: I.B. Tauris 2012.
- Groenhout, Ruth. "The brain drain problem: Migrating medical professionals and global health care." International Journal of Feminist Approaches to Bioethics, 5, no 1 (2012): 1-24.
- Groody, G. Daniel, ed. *The Option for the Poor In Christian Theology*. Indiana: University of Notre Dame Press, 2009.
- Edwards Paul. Encyclopedia of Philosophy: Arete. New York: Free Press, 1967.
- Eiesland, Nancy. *The Disabled God: Toward Liberatory Theology of Disability*. Nashville: Abingdon Press, 1994.
- Eiesland, L. Nancy. *Human Disability and the Service of God: Reassessing Religious Practice*. Nashville: Abingdon Press, 1998.
- Eleweke, Jonah, "A review of the challenges of achieving the goals in the African Plan of Action for people with disabilities in Nigeria," *Disability & Society* 28, no.3. (2013): 313-322. http://www.tandfonline.com/doi/abs/10.1080/09687599.2012.710009
- Falola, Toyin and Mathew M. Heaton, *A History of Nigeria*. New York: Cambridge University Press, 2008.
- Francesco Roberti, Pietro Pallazzini (ed.) *Dictionary of Moral Theology*. London: Burns and Oates, 1962.
- Hauerwas, Stanley. A Community of Character. Indiana: University of Notre Dame Press, 1981.
- Herskovits, J., *Nigeria: Power and Democracy in Africa*. New York: Foreign Policy Association, 1982).
- Hessel T. Dieter, "Church involvement in Social Concerns." *Review of Religious Research*, 20, no 3 (1979), 251-263.

- Hogan, Griff, ed. The Church and Disabled Persons. Illinois: Templegate Publication, 1983.
- Hollenbach, David. S.J., *Claims in Conflict: Retrieving and Renewing the Catholic Human Rights Tradition*. New York: Paulist Press, 1979.
- Ibrahim, Joseph, "How Nigeria is improving its health facilities." <u>www.nigeriamuse.com</u>, posted October 13, 2013.
- Ichoku H. E., and W. M., Fonta, "The Distribution Impact of Healthcare Financing in Nigeria: A Case Study of Enugu State." *PMMA Working Paper* 2006-17, October 2006. http://www.researchgate.net
- John Henry Cardinal Newman, "Meditations on Christian Doctrine: Hope in God—Creator," 7 March, 1848. http://www.appleseeds.org/Newman_My-Mission.htm.
- John Paul II. Message for the celebration of World day of peace, (1 January 1999), at the Holy See www.vatican.va.
- John Paul II. Pastoral visit in Australia: Address to the Sick and the Handicapped, (November 25 1986), at the Holy See. www.vatican.va.
- John Paul II. Encyclical on the Redeemer of Man, *Redemptor Hominis*, (March 4 1979), § 17, at The Holy See, www.vatican.va.
- John Paul II, Encyclical on the Twentieth Anniversary of *Populorum Progressio*, *Sollicitudo Rei Socialis*, (December 27, 1987), at The Holy See, www.vatican.va
- John Paul II, Encyclical on the Redeemer of Man, *Redemptor Hominis*, (March 4 1979), at The Holy See, www.vatican.va.
- John Paul II, "Message for the World Day of Peace on Solidarity and Development: Two Keys to Peace," (January 1 1987), at The Holy See, www.vatican.va.
- Johnston, Atholl and David W. Holt. "Substandard drugs: a Potential crisis for Public health," (October 18, 2015). In http://onlinelibrary.wiley.com
- Kane, Nancy M., and Nancy C. Turnbull. *Managing Health: An International Perspective*. San Francisco: Jossy Bass, 2003.
- Kraft, Jane, M.S.B.T. *The Ministry To Persons with Disabilities*. Collegeville Minnesota: 1978.
- Lalonde, Janice. *Opening Doors: To People with Disability*. Washington DC: Doubleday and Company, 1995.

- Leatherman, Sheila, Timothy G. Ferris, Donald Berwick, Francis Omaswa and Nigel Crisp. "The role of quality improvement in strengthening health systems in developing countries." *International Journal for quality health care*, 22, no 4 (2010): 237-243.
- Leornard, Michael, Allan Frankel, Terri Simmonds, with Kathleen Vega, eds. *Achieving Safe and Reliable Healthcare: Strategies and Solutions*. Chicago: Health Administration Press, 2004
- Leclercq, Jacques. Christianity and Money. London: Burns & Oates, 1959.
- Lewis, Maureen. "Better Health Systems: The Urgency of a Hospital Agenda," (October 17, 2015). At http://www.cgdev.org
- Macquarrie, John and James Childress, ed., *A New Dictionary of Christian Ethics*. London: SCM Press Limited, 1986.
- Malipurathu, Thomas SVD. "Mission as Mediating God's Healing Touch: The Polyvalent Symbolism of a Cure Miracle," http://www.sedosmission.org/sedosarticles/documents/malipurathu-missionasmediating.pdf.
- Mathews, Pia. *John Paul 11 and the apparently Non-acting Person*. United Kingdom: Gracewig Publishers, 2013.
- Mathews, Pia. "Participation and the Profoundly Disabled: Being Engaged-A Theological Approach." *Journal of Religion, Disability and Health*, 17, no 4 (2013): 426-438.
- Meier, Benjamin Mason and Ashley M. Fox. "Development as Health: Employing the Collective Right to Development to Achieve the Goals of the individual Right to Health." *Human Rights Quarterly*, 30, no 2 (2008): 259-355.
- Mich, Marvin L. Krier, *Catholic Social Teaching and Movements*. Mystic, Connecticut: Twenty-Third Publications, 1998.
- Mulligan, Joseph. *Liberation: For the Poor of Yahweh, Pharaohs, And Christians*. Portland Oregon: Sunburst Press, 1977.
- Nowicki, Micheal. *The Financial Management of Hospitals and Healthcare Organizations*. Chicago: Health Administration Press, 2004.
- Nuttall's *Standard Dictionary of the English Language*. London: Frederick Warne and Co, 1914, at http://babel.hathitrust.org.
- Obrien, David J., and Thomas A. Shannon, eds. *Catholic Social Thought: The Documentary Heritage, Expanded Edition* Maryknoll New York: Orbis Books, 1992.
- Ogundola, Olusola. "Framing Disability: A Content analysis of Newspapers in Nigeria."

- ProQuest Dissertations and Theses, New York: Syracuse University, 2013.
- Okafor I., A. Sekoni, S. Ezeiru, J. O. Ugboaja and V. Inem, "Orthodox versus unorthodox care: A qualitative study on where rural women seek healthcare during pregnancy and childbirth in Southwest, Nigeria," (17 October, 2015). In http://www.ncbi.nlm.nih.gov/pmc
- Ola, Balogun. *The Tragic Years: Nigeria in Crisis*. Benin City: Ethiope Publishing Corporation, 1973
- Osaghae, Eghosa. *Crippled Giant: Nigeria since Independence*. Indiana: Indiana University Press, 1998.
- Osoba, S.O, "Corruption in Nigeria: Historical Perspectives," *Review of African Political Economy*. 23, no. 69, (1996)
- Osubor, K. M., Adesegun O. Fatusi, and J.C. Chiwuzie, "Maternal Health Seeking Behavior and Associated Factors in a Rural Nigerian Community" *Maternal and Child Journal*, 10, no. 2, (2006)
- Owen, Mary Jane, Serving as Christ's welcoming arms: There can be no separate Church for those with Disabilities. (2003), Momentum, 34, 4, 30-32.
- Parsons, Mikeal, "The Character of the Lame in Acts3-4." *Journal of Biblical Literature* 124 no. 2 (2005): 295-312.
- Pope Paul VI, Encyclical on the Development of People, *Populorum Progressio*, (March 26, 1967), at The Holy See, www.vatican.va.
- Pope Pius XII, "The Internal Order of States and People," Christmas Message 1942. http://catholictradition.org/Encyclicals/1942.htm
- Pope, Stephen ed., *Christian Hope and Solidarity: Jon Sobrino's Challenge to Theology.* New York: Orbis Books, 2008.
- Sango, Precious. "Visible but Invisible: People Living with disability in Nigeria," (November 13 2014); https://books2africa.org/visible-but-invisible-people-living-with-disability-innigeria/
- Sobrino Jon. *The Principle of Mercy: Taking the Crucified People from the Cross.* New York: Orbis Books 1994
- Spath, Patrice L., *Leading Your Healthcare Organisation to Excellence: a guide to using the Baldrige Criteria.* Chicago: Health Administration Press, 2004.
- Swinton, John and Brian Brock, eds. *Theology, Disability and The New Genetics: Why Science needs The Church.* Tower Building, NY: 2007.

- Smith, Kristen. "The Problematization of Medical Tourism: A Critique of Neoliberalism." *Developing World Bioethics* 12, no. 1 (2012): 1-8.
- Tataryn, Miroslaw and Maria Truchan-Tataryn. *Discovering Trinity in Disability: A Theology for Embracing Difference*. Maryknoll, New York: Orbis Books, 2013.
- Twomey, Gerald S. *The "Preferential Option For The Poor": In Catholic Social Thought From John XXIII to John Paul II.* New York: The Edwin Mellen Press, 2005.
- Ubleble B. A, "The Imperative of Testing the Might of Unity in Diversity and Peaceful Coexistence Through Symbols of National Unity in Nigeria," *Research Journali's Journal of Sociology* 2 No 10 (2014): 1-12; ISSN 2347-8241.
- Ukwu, Jerrywright "Buhari's Speech After 1983 Coup". Posted February 5, 2015, accessed October, 10 2015. http://www.naij.com/348472-buharis-speech-after-1983-coup.html.
- Vinck de, Christopher. *Power of the Powerless*, New York: Doubleday, 1988.
- Wannenwetch, Bernd. "My Strength Is Made Perfect in Weakness": *Bonhoeffer and the War over Disabled Life*, in Brian Brock and John Swinston, *Disability in the Christian Tradition: A Reader*. Grand Rapids, Michigan: William B. Eerdmans, 2012.
- Webb-Mitchell, Brett. *Unexpected Guests at God's Banquet: Welcoming People with* Disabilities *Into the Church.* New York: Crossroad Publishing Company, 1994.
- Welcoming Parishioners with Disabilities: National Catholic Partnership on Disability, Washington DC.
- Yong, Amos. *The Bible, Disability and the Church: A new Vision of the people of God.* Michigan: Williams Eerdmans publication, 2011.
- Young, Francis, ed. *Encounter With Mystery: Reflections on L'Arche and living with disability.* London: Darton, Longman and Todd, Limited, 1997.
- World Health Report Health Systems Financing: The Path to Universal Coverage," WHO (2010a) http://www.who.int/whr/2010/10 summary en.pdf.
- World Health Organization. "Counterfeit medicines: frequently asked questions," 2009. www.who.int/medicines/servicescounterfeit/faqs/QACounterfeit-October2009.pdf.
- Second Vatican Council, Constitution on the Church in the Modern World, *Gaudium et spes*, (December 1965), at the Holy See, www.vatican.va.
- Congregation for the Doctrine of the Faith, Instruction on Certain Aspects of the Theology of Liberation. (6 August 1984) At the Holy See, http://www.vatican.va.

- PBS News Hour, "Economy: Corruption Case Exposes Scope of Bribery in Nigeria." Posted April 24, 2009. www.pbs.org.
- National Population Commission (NPC) and ICF International 2014. "Nigeria Demographic and Health Survey 2013. Abuja, Nigeria and Rockville Maryland, USA: NPC and ICF International. (FR293)
- New American Bible: St Joseph Medium Size Edition New York: Catholic Book, 1991.
- "Statement of the Honorable Minister of State and Supervising Minister of Health on the Commemoration of the World Health Coverage." In www.health.gov.ng
- "National Bureau of Statistics: Poverty Profile for Nigeria 2010," http://www.nigerdeltabudget.org
- Statement of the Honourable Minister of State, Dr. Khahiru Alhassan on the National Health Act Abuja, Nigeria. In www.health.gov.ng
- USCCB, "Economic Justice for all: Pastoral Letter on Catholic Social Teaching and the U.S. Economy," 1986.
- United Nations Convention on the Rights of Persons with Disabilities 2006. www.ohchr.org/EN/HRBodies/HRC/
- Compendium of the Social Doctrine of the Church: Pontifical Council for Justice and Peace Washington DC: USCCB Publishing, 2005.
- Disabled World, "Home Page" (2009-2015), http://www.disabled-world.com.
- National Organization on Disability, "America's Goals for the International Decade of Disabled Persons, 1983-1992." *U.S. Congress Resolution 39*. https://dolearchives.ku.edu/sites/dolearchive.drupal.ku.edu
- "Arise O Compatriots," https://en.wikipedia.org/wiki/Arise, O Compatriots
- Nigeria News Desk, "Nigeria Ranks 136th Most Corrupt Country in the World" https://nigeriannewsdesk.wordpress.com
- Fox News, "Nigeria orders arrest of official accused of stealing \$2B meant to buy Weapons to fight Boko Haram" http://www.foxnews.com.
- The Oxford English Dictionary, "The definitive record of the English language," SV. "Solidarity." http://www.oed.com.proxy.bc.edu