HUMAN RIGHTS WATCH

NIGERIA: PEOPLE WITH MENTAL HEALTH CONDITIONS CHAINED, ABUSED
Ban Chaining; Provide Mental Health Services

November 2019
Nigeria: People With Mental Health Conditions Chained, Abused
Ban Chaining; Provide Mental Health Services
Nigeria: People With Mental Health Conditions Chained, Abused
Ban Chaining; Provide Mental Health Services

Summary .............................................................................................................................................. 1

Mental Health in Nigeria .................................................................................................................... 8

Unlawful Detention ............................................................................................................................ 9

Chaining .......................................................................................................................................... 10

Unsanitary and Degrading Conditions ............................................................................................. 13

Violence .......................................................................................................................................... 16

Forced Treatment ............................................................................................................................. 18

Recent Government Action ............................................................................................................. 19

Recommendations ........................................................................................................................... 20

Acknowledgements ........................................................................................................................ 21
Summary

Thousands of people with mental health conditions across Nigeria are chained and locked up in various facilities where they face terrible abuse.

Detention, chaining, and violent treatment are pervasive in many settings, including state hospitals, rehabilitation centers, traditional healing centers, and both Christian and Islamic faith-based facilities.

Quranic lesson in an Islamic rehabilitation center in Kano City, Kano State, September 2019. Men and boys, as young as 10 years old, are shackled for perceived or actual mental health conditions, drug use, or what is considered ‘deviant’ behavior. © 2019 Robin Hammond for Human Rights Watch.

President Muhammadu Buhari said in October 2019 of the Islamic rehabilitation centers that he would not “tolerate the existence of the torture chambers and physical abuses of inmates in the name of rehabilitation.” But the government has yet to acknowledge that this abuse is rife in government-run facilities too.
Between August 2018 and September 2019, Human Rights Watch visited 29 facilities ostensibly providing mental health care in eight states and the Federal Capital Territory, including federal psychiatric hospitals, general state hospitals, government-owned rehabilitation centers, Islamic rehabilitation centers, traditional healing centers, and Christian churches. Human Rights Watch interviewed 124 people, including 49 chaining victims and their families, staff in various facilities, mental health professionals, and government officials. The names of the victims have been changed to protect their safety.

Deep-rooted problems in Nigeria’s healthcare and welfare systems leave most Nigerians unable to get adequate mental health care or support in their communities. Stigma and misunderstanding about mental health conditions, including the misperception that they are caused by evil spirits or supernatural forces, often prompt relatives to take their loved ones to religious or traditional healing places.

Human Rights Watch found that people with actual or perceived mental health conditions, including children, are placed in facilities without their consent, usually by relatives. In some cases, police arrest people with actual or perceived mental health conditions and send them to government-run rehabilitation centers. Once there, many are shackled with iron chains around one or both ankles, to heavy objects or to other detainees, in some cases for months or years. They cannot leave, are often confined in overcrowded, unhygienic conditions, and are sometimes forced to sleep, eat, and defecate within the same confined place. Many are physically and emotionally abused as well as forced to take treatments.

A nun in charge during a Human Rights Watch visit to a government-owned rehabilitation center in southeastern Nigeria said they chain people to their beds “so they do not run away.” The nun defended chaining a woman who had HIV “to stop her from going around the men.” Human Rights Watch found another woman at the same institution chained naked to her bed.
A woman’s leg tied tightly together in a Christian rehabilitation center for in Ibadan City, Oyo State, Nigeria, September 2019. Women and men are chained and tied for perceived or actual mental health condition or intellectual disability. © 2019 Robin Hammond for Human Rights Watch.
A woman who is HIV positive chained to her bed in a state-owned rehabilitation center in Anambra State in southeastern Nigeria, October 2018. © 2018 Anietie Ewang with Human Rights Watch.

The staff, except one older guard, would leave at 6:30 p.m. each day, leaving residents, including children as young as 13, with no one to help them. The facility has no electricity, so people are chained to their beds in total darkness. The nun said that, “The patients are given flashlights to use at night.”

In a traditional healing center close to Abuja, Nigeria’s capital, Human Rights Watch met a woman who was pinned to a tree trunk with an iron ring. She had been restrained like this for three weeks with her upper body naked. She was unable to move and so she was forced to eat, urinate, and defecate where she sat.
A woman in a shed near the house of a traditional healer in Abuja, Nigeria, March 2019. Her right leg is pinned to a tree trunk with an iron ring. © 2019 Human Rights Watch.
Chaining can cause serious injuries and psychological distress. A 35-year-old woman chained for ten months in an Islamic rehabilitation center in Kano, in northern Nigeria said: “Everything about this (chaining) is difficult. You feel like you want to commit suicide ... regardless of how you felt before coming here, you will get worse.”

Adults and children in some Islamic rehabilitation centers reported being whipped, causing deep wounds. People in Christian healing centers and churches described being denied food for up to three days at a time, which staff characterized as “fasting” for “treatment” purposes.

In many traditional and religious rehabilitation centers visited, staff forced people with mental health conditions, including children, to eat or drink herbs, in some cases with staff pinning people down to make them swallow.

In psychiatric hospitals and government-run rehabilitation centers, staff forcibly administered medication, while some staff admitted to administering electroconvulsive therapy to patients without their consent.

In some cases, families took their children – including young adults – to religious and traditional rehabilitation centers for actual or perceived drug use or “deviant” behavior, including skipping school, smoking tobacco or marijuana, or stealing from their parents. Some children in the facilities, as young as ten, have been abandoned by their families.

Nigeria ratified the Convention on the Rights of Persons with Disabilities (CRPD) in 2007. It has the obligation to ensure equal rights for people with disabilities, including to liberty and freedom from torture, ill-treatment, and forced treatment. While the Nigerian Constitution prohibits torture and other inhuman or degrading treatment, the government has not outlawed chaining. In a 2015 report, the United Nations special rapporteur on torture said that chaining “unequivocally amount[s] to torture.”

The Nigerian government should ban chaining and urgently investigate chaining in government-owned rehabilitation centers, psychiatric hospitals, and faith-based and traditional healing centers in all 36 states and the Federal Capital Territory. The
government should also prioritize the development of quality, accessible, affordable community-based mental health services.

People rescued from these desperate conditions and other Nigerians experiencing psychological distress should have access to proper psychosocial support and mental health services.
Mental Health in Nigeria

A mental health condition refers to a range of experiences that affect a person’s mood, thinking, and behavior. This includes depression, anxiety, schizophrenia, and bipolar condition. It can affect anyone regardless of age, gender, race, ethnicity, religion, spirituality, sexual orientation, or any other background. The World Health Organization (WHO) says a mental health condition will affect one in four people globally at some point in their lives.¹

Nigeria has fewer than 300 psychiatrists for an estimated population of over 200 million.² Several mental health professionals told Human Rights Watch that quality mental health services are available only to wealthier citizens who can afford it.³ The lack of quality mental health care and its prohibitive cost often drives people to consult traditional or faith-based healers.

Nigeria’s 1958 Lunacy Act allows detaining people with mental health conditions in mental health institutions even without providing medical or therapeutic treatment.⁴ People spend years in institutions – sometimes decades – because Nigeria lacks adequate services to support them in the community. In all but one of the facilities Human Rights Watch visited, people were not allowed to leave or to challenge their detention.

---

³ Human Rights Watch interview with [name withheld], Ibadan, September 24, 2019; Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019; Human Rights Watch interview with [name withheld], April 2, 2019; Human Rights Watch interview with [name withheld], Enugu, October 3, 2018.
Unlawful Detention

In 28 of 29 facilities Human Rights Watch visited, all residents had been unlawfully detained. They did not enter the facilities voluntarily and could not leave if they wished to do so.

Victor, a 29-year-old Christian man held in an Islamic rehabilitation center in Kano since June 2018, said:

I heard that I would be here only for two weeks at first when I was brought here, then later that changed to one month, then two months. Now I am going on my third month here. Other people here say they were told the same thing, and they ended up staying here for years.⁵

Akanni, a 22-year-old woman who had a mental health crisis following the death of her mother, and who had been detained in a church in Abeokuta for five months at the time of a March 2019 interview, said:

When my father brought me, I didn’t know that he would leave me here. I was not happy, but I don’t have a choice.⁶

Sometimes families pay healers to detain their relative at home and take them to a center. Shums, a 27-year-old man who said he had depression, was taken as he worked on his farm in early 2019:

Two men approached me and asked if they could talk with me. I complied and started walking with them. They jumped on me, handcuffed me, and put shackles on my feet. Then they brought me here [an Islamic rehabilitation center in Kano].⁷

---

⁵ Human Rights Watch interview with Victor [pseudonym], Kano, October 30, 2018.
⁶ Human Rights Watch interview with Akanni [pseudonym], Abeokuta, March 27, 2019.
⁷ Human Rights Watch interview with Shums [pseudonym], Kano, June 30, 2019.
Chaining

In 28 out of 29 facilities visited, staff chained, shackled, or locked up adults and children. The youngest child chained was a ten-year-old boy and the oldest person was a 86 year-old-man who also had a visual disability. Typically, staff fasten a chain to a person’s both ankles or to one ankle and connect it to a heavy or immovable object, such as a bed, a tree, or a car engine. In some cases, shackles consisted of an iron bracelet around both ankles, making it difficult for the person to move around. Some people are chained for a few days at a time as punishment, or for weeks or months to prevent them from moving or leaving.

Two men chained together with an iron shackle, in an Islamic rehabilitation center in Kano State, northern Nigeria, June 2019. They are bound together at all times, including when they sleep, urinate, defecate, and eat. © 2019 Emina Cerimovic with Human Rights Watch.
Shums, a 27-year old man with depression, was shackled by his leg to another man's leg in an Islamic rehabilitation center in northern Nigeria. “We are like this all the time. Even when we have to use the toilet or sleep,” Shums said. Two other men there were also shackled together. The center’s healer said one man had suicidal thoughts, “So I chained him to another person who is responsible, to prevent him from killing himself.”

In a government-owned rehabilitation center in northern Nigeria, Human Rights Watch saw dozens of men and women chained. Many were chained by one ankle to a piece of iron welded to the concrete floor. Most had lived there for years, some for up to 15 years.

Staff at a psychiatric hospital in northern Nigeria insisted that chaining did not occur on the premises, but a researcher discovered a ward where people had iron shackles around their ankles.

Despite repeated requests, Human Rights Watch was not allowed to meet or speak to people held in federal psychiatric hospitals in Kaduna, Lagos, and Abeokuta. Two psychiatrists, one psychiatric nurse, and one mental health activist said that shackling occurs in federal psychiatric hospitals across Nigeria. A doctor who works in a psychiatric hospital in southern Nigeria said, “We have to use chains in some cases.” A psychiatrist in a hospital in Lagos said that the staff there use handcuffs.

Tightly bound chains cause painful wounds as well as emotional suffering. Zain, who was chained in a traditional healing center in Abeokuta, said, “I was chained for three months until yesterday, with lots of injuries from the chains which are just starting to heal.” Adedamola, a woman in her 40’s held in a church in Ibadan, southwestern Nigeria, for two years, said the chains would often injure her ankles.

---

8 Human Rights Watch interview with [name withheld], Kano, June 30, 2019.
9 Human Rights Watch interview with [name withheld], Kano, July 1, 2019.
10 Human Rights Watch interview with [name withheld], Kano, September 20, 2019.
11 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019; Human Rights Watch interview with [name withheld], Enugu, October 3, 2018; Human Rights Watch interview with [name withheld], Kano, DATE; Human Rights Watch interview with [name withheld], Lagos, September 25, 2018.
12 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
13 Human Rights Watch interview with [name withheld], Lagos, September 26, 2018.
14 Human Rights Watch interview with Zain [pseudonym], Abeokuta, March 27, 2019.

A man’s legs chained in a Christian rehabilitation center in Ibadan City, Oyo State, Nigeria, Ibadan City, Oyo State, Nigeria, September 2019. Women and men are chained and tied for perceived or actual mental health condition or intellectual disability. © 2019 Robin Hammond for Human Rights Watch.
Unsanitary and Degrading Conditions

People who are chained are forced to live in unsanitary conditions. Many must eat, urinate, defecate, and sleep in the same place, usually within the same place where they are confined.

Staff often provide a bucket or plastic bag to urinate and defecate in, usually in full view of others. Akanni, who was chained in a shed in a Christian church with an unrelated man for up to three days at a time, said, “They left me a bowl to urinate and defecate. I had to do it in front of the man.”

A woman with a mental health condition chained to the floor in a bare room in a state-owned rehabilitation center in Kano State, northern Nigeria, July 2019. Breadcrumbs are around her. © 2019 Emina Cerimovic with Human Rights Watch.

16 Human Rights Watch interview with Akanni [pseudonym], Abeokuta, March 27, 2019.
People detained in some Islamic rehabilitation centers Human Rights Watch visited usually had access to toilets during the day, but not at night. Khalil, a young man chained in a center in northern Nigeria after his family accused him of stealing and drug use, said:

If you feel you are in need to use toilet, you wake up someone you are close to and ask them if they have any plastic bag. If you want to urinate, you use the bottle we use for [drinking] water.17

Victor, the man chained in Kano, said:

Hygiene is a big issue here. When one person gets sick, it spreads quickly to other people. They refuse to give medicines when necessary because they say we will get hooked on it or they say the police will arrest them for getting it.18

Another man said more than 60 people slept in his room:

More than 100 people use one toilet, the hygiene is very bad. When we are sick, and we request for drugs, it doesn’t come until we are almost dead.19

A woman in her 30s who was chained to a car engine in a shed together with two men by a traditional healer’s home in Abeokuta, southwestern Nigeria, said: “I go to toilet in this place [where I am shackled] in plastic bags until they take it away at night.”20

People also had to urinate and defecate on themselves in two other traditional healing facilities Human Rights Watch visited. A 20-year-old woman said: “They tied me and kept me inside the room at the back for three days. I defecated and urinated on myself while I was in the room.”21

---

17 Human Rights Watch interview with Khalil [pseudonym], Kano, September 30, 2018.
18 Human Rights Watch interview with Victor [pseudonym], Kano, October 30, 2018.
19 Human Rights Watch interview with [name withheld], Kano, October 30, 2018.
20 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
21 Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
The government-run rehabilitation center southeastern Nigeria had functioning toilets. Yet staff denied those chained there access to the toilets and instead left them a bucket next to their beds.

In three facilities staff did not allow people to bathe regularly. A traditional healer in Abuja said:

When people are locked up ... they don't bathe sometimes for months until they feel better ... We just pour water with herbs on them without going very close to them ... \(^{22}\)

Human Rights Watch also found that people with psychosocial and intellectual disabilities were denied food in some Christian healing centers. Akanni, the 22-year-old woman who had been detained in a church in Abeokuta for five months, said:

When I first arrived here, I was tied with chains for three days straight so I could fast. For the three days I had no food or water. It wasn't my choice, but the pastor said it was good for me. Sometimes if they say I should fast and I drink water or take food, they (staff in the church) put me on a chain. The chaining is punishment. I have been put on chain so many times I can't count.\(^ {23}\)

Another 27-year-old woman held in the same church said:

When I came here, I started screaming. They took me to the prayer room, where I was chained and forced to fast for seven days. After the first seven days they released me for a little bit and then again chained me for seven days.\(^ {24}\)

Staff in the church and two other churches in the south confirmed the practice.

---

\(^{22}\) Human Rights Watch with [name withheld], Abuja, April 2, 2019
\(^{23}\) Human Rights Watch interview with Akanni [pseudonym], Abeokuta, March 27, 2019
\(^{24}\) Human Rights Watch interview with [name withheld], Abeokuta, March 27, 2019.
Violence

People in Islamic “rehabilitation” centers said that staff whipped them. Khalil, who was shackled for six months in such a center in northern Nigeria, showed researchers scars on his left arm that he said were from whipping.

An Islamic faith healer in northern Nigeria said:

If you are treating someone who is mentally unwell and he acts in a way that is causing disturbance, you will have to treat him. Some of them might be talking to themselves or suffer from lack of sleep ... For some of them, getting enough sleep will help. For others, we need to whip them – once, twice ... up to seven times.25

A dozen people in that center showed researchers scars on their arms, chests, and backs that they said were from floggings by staff.

Amina, who had a breakdown after her mother died and was taken to various Islamic healers and a psychiatric hospital, said she was tied with ropes, beaten, and spat on in one rehabilitation center in Kaduna, and then molested by a traditional healer in Abuja who came to her home.26

“He told me to undress, that it is the part of the healing process, and then he started touching my body,” Amina said. “Explain to me, how is that part of a healing process? How is that Islamic?” Staff in a psychiatric hospital in Abuja also tied Amina to a bed and forcibly injected her with medication. “I peed on myself. I was on my period and they just kept sedating me.”

Akanni said that staff had slapped her.27

25 Human Rights Watch interview with [name withheld], Kano, September 21, 2019
26 Human Rights Watch interview with Amina [pseudonym], Abuja, July 4, 2019.
27 Human Rights Watch interview with Akanni [pseudonym], March 27, 2019.
Faith-based and traditional healing centers might have the aim of caring for people who had nowhere else to go for support and help because of a mental health crisis or because they had been abandoned. Many traditional and faith-based healers interviewed seemed to genuinely care about the people in their centers. However, chaining strips people with mental health conditions of their most fundamental rights to dignity and humane treatment. Physical violence and sexual abuse further damages the physical, sexual, emotional, mental, and social well-being of an individual and can amount to torture and other cruel, inhuman, or degrading treatment or punishment.
Forced Treatment

In psychiatric hospitals and government-run rehabilitation centers, staff said that people are given oral and injectable medication without their consent.28 In two psychiatric hospitals visited, patients were given electroconvulsive therapy (ECT) without their consent.29

In many traditional and religious centers visited, healers forced herbal and other non-medical treatment on people with mental health conditions. One traditional healer in Ibadan said that four people would hold a person down so that he could administer herbs.30 Another traditional healer in Ibadan said:

We have to force them to take the herbs that will heal them. Sometimes we get strong people, strong boys, to hold them down so we can put the chains on them and give them herbs.31

A Christian pastor in Ibadan described using chains as a threat to make people take herbs.32 In front of a traditional healer’s home in Abuja, researchers saw several women holding down a 12-year-old girl and making cuts on her back with a blade. They then smeared ground herbs into the cuts. The healer justified it by saying the girl has been stealing from her mother, and they have to let the evil blood come out of her.33

---

29 Human Rights Watch interview with [name withheld], Ibadan, September 24, 2018; Human Rights Watch interview with [name withheld], Kano, September 20, 2019.
30 Human Rights Watch interview with [name withheld], Ibadan, March 30, 2019.
31 Human Rights Watch interview with [name withheld], Ibadan, March 30, 2019.
32 Human Rights Watch interview with [name withheld], Ibadan, March 30, 2019.
33 Human Rights Watch interview with [name withheld], Abuja, April 1, 2019.
Recent Government Action

On June 17 and September 12, 2019, respectively, Human Rights Watch sent letters to the federal government in Abuja requesting to meet with officials of the Federal Ministry of Health and the Federal Ministry of Women’s Affairs and Social Development to discuss our findings but received no response. The two federal ministries have also not responded to an October 24 letter setting out concerns about chaining and abuse.

Since Human Rights Watch began investigating chaining in Nigeria in August 2018, several facilities have been closed. In September 2019, police closed an Islamic rehabilitation center in Kaduna that Human Rights Watch had visited in March. Another Islamic rehabilitation center in Kano was closed preventively in October.

While closing abusive facilities is a positive step, the government should ensure that it provides adequate psychosocial and mental health support in the community to people who have been freed. Otherwise, closing down these centers does nothing to address the desperate moves by families to look to traditional and faith-based centers for loved ones with mental health conditions for lack of rights-respecting alternatives.


35 “Ba tsoro ne ya sa na rufa gidan mari a Kano ba,” BBC, October 21, 2019, accessed via: https://www.bbc.com/hausa/labaran-50123563?fbclid=IwARoxTeEVNYEY_u9MRL4NHBAmN2uRcS58fiswHtCqcfb1GLaQfYyMf3J5NR8.
Recommendations

The Nigerian government should:

- Completely ban chaining.
- Urgently investigate all government and private institutions where people with mental health conditions live in all 36 states and the Federal Capital Territory with the goal to stop chaining and end abuses.
- Ensure that people rescued have access to psychosocial support and social services, including child psychologists and specialist support services for children.
- Train and sensitize government health workers, mental health professionals, and staff in faith-based and traditional healing centers to the rights and needs of people with mental health conditions.
- Conduct a public information campaign to raise awareness about mental health conditions and the rights of people with disabilities, especially among alternative mental health service providers and the broader community, in partnership with people with lived experiences of mental health conditions, faith leaders, and media.
- Progressively develop voluntary and accessible community-based mental health and support services, in consultation with people with lived experiences of mental health conditions, and including with the support of international donors and partners. This should include development of psychosocial support services and integration of mental health services in the primary healthcare system.
Acknowledgements

This report was researched and written by Emina Ćerimović, senior researcher with the Disability Rights Division at Human Rights Watch. Anietie Ewang, the Nigeria researcher at Human Rights Watch, participated in the field research.

The report was edited by Jane Buchanan, deputy director of the Disability Rights Division, Stephanie Hancock, media manager in the Communication Division, and Kathleen Rose, senior editor in the Communication Division.

Jinseul Jun, a Disability Rights intern; Sadisu Salisu and Mohammed Bayero Yayandi, independent research assistants in Nigeria, provided significant research support.

Shantha Rau Barriga, director of the Disability Rights Division; Kriti Sharma, senior disability rights researcher; Anietie Ewang, Nigeria researcher; and Juliane Kippenberg, associate director in the Children’s Rights Division; provided expert reviews. Senior legal adviser Clive Baldwin and Babatunde Olugboji, deputy program director, provided program review. Cara Schulte, disability rights associate, provided editorial assistance. Human Rights Watch Documentary Team directed and produced the multimedia component of this project.

Human Rights Watch appreciates the valuable support and partnership of the Samuel Family Foundation that made this research and report possible.

A special thank you to the players of the Swedish Postcode Lottery for their support for this three-year campaign toward ending shackling and other abuses against people with mental health conditions.

Most importantly, Human Rights Watch thanks all of the children, men, and women with mental health conditions who shared their experiences with us, all of whom spoke with courage and dignity about their personal histories and concerns.
The use of chains to restrain people with mental health conditions is common in Nigeria. The traditional healer who runs this center uses herbal medicine and prayer to treat people living with mental health conditions, Ibadan City, Oyo State, Nigeria, September 2019.

© 2019 Robin Hammond for Human Rights Watch