

ENVIRONMENTAL DETERMINISM AND POSITION OF SOCIAL MODEL THEORY IN THE VULNERABILITY OF PEOPLE WITH DISABILITIES: PLATEAU STATE OF NIGERIA IN PERSPECTIVE.

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MAIN ARGUMENTS:

Basically, Social Model perceives disability as a consequence of and the resultant damage (effect) of the influence of environment, attitudes and society on the maximum participation of people with impairments in social activities. This view, thus, exposes and marks the foundation of the vulnerability of People with Disability (PWDs) who suffer during the period of relative peace, violent and post violent conflicts. Essentially therefore, if these deprived group are allowed to actively participate in decision making and discussions on issues of security management and peace building in any community; if they are recognized, valued and respected in and by community members; if government policies can be inclusive of and accessible to them; if institutions (formal and informal) are strengthened to prevent and prosecute (violent) conflict instigators and insurgents, then PWDs will be less vulnerable in relative peace, violent conflict and post-conflict period. Hence, vulnerability of people with disabilities is both a cause and effect of the marginalisation and discrimination faced by the group in daily life which is consequent upon the community perception and attitude.

DATA AND METHODOLOGY:

As a study which focuses on human beings and their interactions, the choice of qualitative research technique becomes imperative. Therefore, the research instrument employed and method of data collections adopted are: Focal Group Discussions (FGD) and Key Informant Interview (KII) as the primary source and existing literatures published by reputable scholars on human security, violent conflicts and people with disabilities, utilised as the secondary source of information. Moreover, relevant journal publications were examined including newspapers, magazines and internet materials, all of which, were found useful.

BACKGROUND

In the traditional African settings, a lot of factors determine and influence people's way of life. In spite many years of religious practices of Christianity and Islam, for example, interests and acknowledgements are still vested on some traditional and cultural values and belief system, most of which have shaped and guided human character and interaction in the course of time. From time immemorial, cultural and traditional beliefs are respected by the people who fear the undetermined negative consequences of going against the most revered *tradition and culture*.

Unfortunately, with the arrival and infiltration of civilization and westernisation, it is still common to find some traditional and cultural practices in the society which have been regarded as harmful, retrogressive, oppressive, discriminating, appalling and sometimes, violent. Even though some of the practices, such as the killing of twins, might have been abolished, a few number have remained enduring due to the general human reaction and untoward perception of the belief system. Therefore, it is not surprising to find some people who still consider people with disabilities as either evil or as the manifestation of punishment by the *gods* visitation and wrath on the family.

It is worthy to note that disabilities are of various forms and can result from various means. People become disabled due to injuries sustained from some external factors and human disaster such as vehicle accident, violent conflicts, drugs usage or wrong medication, among many others. Some disabilities are however acquired from birth. These could be caused by fetus malformation or influence of negative exposure of some pregnant women. Poverty, illiteracy, lack of access to health facility for pre and post-natal services are also some of the factors that enhance avoidable disabilities in some infants.

Regardless of the source, form, sex, religion and their status or potential, people with disabilities face similar degree of challenges in daily living in Africa. The challenges are more pronounced in violent conflict prone areas. Despite being signatory to many treaties, conventions and passage of laws on disability rights, tangible impact or success cannot be measured in respond to the well-being of people with disabilities in Nigeria. This is partly due to lack of political will on the part of government to implement desirable policies, and largely on the society-rooted negative perception and reactions to people with disabilities.

DEFINITION OF TERMS

Environment/Environmental Determinism

Environment describes interactions and activities that are carried out daily for survival in human society. The government, formal and informal structures, such as traditional and religious bodies, family, community and people living in defined territory are classified under environment. The culture, norms, values, religion and the belief system of people have implications on relationship,

(inter-)dependency and interactions and these are usually examined in the light of perception, response and reaction to people with disabilities. Therefore, Environmental determinism in this context, presupposes interaction between a human being and his environment. It explains how culture, values, religion, belief system, policies, structures, governance and other external factors including occurrences impact on, determines and control human behaviour.

Vulnerability

Vulnerability is generally understood in respect of the degree of human safety and her susceptibility to dangers, environmentally induced. According to Sastry (2012:11) “people who are easily susceptible to physical or emotional injury, or subject to unnecessary criticism, or in a less advantageous position in any society may be defined as vulnerable”. Thus, women, children, the aged and people with disabilities are considered as vulnerable. Focusing on people with disabilities, the paper looks at factors that makes them vulnerable in relative peace time, during violent conflicts and post violent conflict period.

People with disabilities (PWDs)

There were and are still various contentions about the concept of disabilities, impairment and disabled. In 1980 the WHO introduced a framework for working with disability, publishing the *International Classification of Impairments, Disabilities and Handicaps*. The framework they proposed, approached disability using the terms ‘Impairment’, ‘Handicap’ and ‘Disability’. (<http://www.who.int/disabilities/violence/en/>). Disability is caused by a variety of factors ranging from human and natural disaster, through to diseases, violent conflicts, among others. It could be visible or non-visible, implying that disability is not limited to human physicality. There are also sensory, intellectual, mental health and developmental disabilities. Other forms of disabilities that could be classified under non-visible disabilities are seen in people who look healthy, with no physical body defects but with illnesses such as asthma, epilepsy and narcolepsy.

In Africa, disabilities is usually ascribed to diabolic or spiritual attacks hence; it is common knowledge to hear that some people with disabilities seek spiritual or traditional cure. The common type of disability that is often described in the sense of the word in Africa are physical disabilities as against non-visible disabilities. It spells out people using crutches and wheelchairs; those who are physically crippled, blind, deaf or dumb. This contention is supported by the *Social Model theory of Disability*.

Literarily, when one requires aids or support to do what ordinarily would have been done or achieved without aids or support, one is considered impaired, handicapped or disabled. Disability is a combination of certain impairment as found in human. Contextually, it is associated with society in which one finds him or herself. This is as a result of certain beliefs, provisions and

policies, disabilities and societal interaction which may differ from place to place and country to country. Consequently, while a limbless man could become a great athlete in a developed nation, such limbless man could, pitifully, become a *beggar* in a developing nation.

Human security

According to Commission on Human Security, (CHS: 2003: 4), “human security means protecting fundamental freedoms – freedoms that are the essence of life. It means protecting people from critical (severe) and pervasive (widespread) threats and situations. It also involves using processes that build on people’s strengths and aspirations and creating political, social, environmental, economic, military and cultural systems that give people, altogether, the building blocks of survival, livelihood and dignity”.

The attention of personal and community security focuses on the safety net and protection of humans from physical and ethnic violence/conflicts within the society. Vulnerabilities of humans, especially, those with disabilities have been made pronounced due to poor response and inability of government to protect lives and guarantee human safety from violence conflicts and attacks. This become compounded by the systemic societal barriers that make people with disabilities vulnerable at all times.

Social Model of Disability

Disability models are tools engaged in defining the concept of impairment as they provide a framework for discussion, strategic planning, policy formulations and interventions for meeting the needs of the people with disabilities in the society. (www.akmhcweb.org/ncarticles/models).

Before considering the social model of disability, it should be ascertained that there are a number of theories or models in the discussion of disability. Depending on the point of view, conceptualisation and contextualisation, these theories are relevant and adaptable. These models can be employed as a concept to empower people with disabilities, thus providing an enabling environment to meet their needs, satisfy their wants and protect their right in equipping them with full and equal rights like other able-bodied citizens. The models are, however, peculiar and applicable from society to society. The Medical Model, for instance, results from an individual's physical or mental limitations. It is generic and could be found in any society of the world. Such medical challenges could be as a result of fetus development or complications at or after birth, therefore, the model suggests medical treatment for the disabled. The model further places emphasis on what is wrong with the disabled and not what the disabled needs. Similarly, Tragedy/Charity Model depicts people with disabilities as victims of circumstances that deserve pity. While people could become disabled due to circumstances at a time, the act of pity however is limited to certain environment. As an example, there is a clear difference from the way

disabled people are treated in the developed world in comparison with developing countries, mostly in Africa. This and Medical Model are probably the ones mostly used by non-disabled people to define and explain disability. (www.akmhcweb.org/ncarticles/models).

Social Adaptive Model is another model which recognises that the inability of people with disabilities to adapt to the demands of society may accelerate the pronouncement of their conditions and the Economic Model underpins disability as the person's inability to participate in work, assessing the degree to which impairment affects an individual's productivity. While the Customer/Empowering Model, the model suitable for the developed society, enables client to decide and select what services he or she believes are appropriate, the Religious Model views disability as a punishment inflicted upon an individual or family by an external force such as gods and the model is, of course, most suitable for developing countries like Nigeria where traditional beliefs and cultural practices equate disability with curse from gods and consequent of some bad deeds especially by the families of the disabled or by the person who had suddenly become disabled. (www.akmhcweb.org/ncarticles/models).

On a distinct level, the Social Model pictures disability as a consequence of environmental, social and attitudinal barriers that prevent people with impairments from maximum participation in societal activities. Developed in 1983 by a disabled academic called Mike Oliver who phrased Social Model of Disability (Michael Oliver et al 2006), the model fostered as a result of Oliver's reaction to ideological development of building. This was placed over the position of the medical theory from his study of the distinction made by the Union of the Physically Impaired Against Segregation (UPIAS) between impairment and disability. Expectedly, the model is mostly appropriate in the context of Africa where facilities, structures, perceptions and institutions basically enhanced disability of the disabled. In addition, the Social Model of Disability further identifies systemic barriers, negative attitudes and exclusion by society (purposely or inadvertently); all pointing to the fact that society is the main contributory factor in disabling people.

According to Paley, J (2002) "the Social Model of Disability is a reaction to the dominant Medical Model of Disability which in itself is a functional analysis of the body as machine to be fixed in order to conform to normative values". In essence, unlike Medical theory which places much emphasis on the physical condition of human that classifies such persons with disability and reliance on medical attention, the social model theory places emphasis on the society-individuals in the society, the government and its policies. It, then, believes that disability is a condition where one becomes incapacitated and/or unable to function very well due to barriers caused by the society. A perfect illustration of this scenario happens when a man on a wheelchair is unable to access a building as a result of barriers caused by the architectural design and construction of the building.

Besides, a fundamental aspect of the Social model, according to Charlton (2000), concerns equality. The struggle for equality is often compared to the struggles of other socially marginalised groups. Equal rights are said to give empowerment as well as *ability* to make decisions and the opportunity to live life to the fullest. The Social model of Disability focuses on changes required in society such as attitudes. This is because a positive attitude toward certain mental traits or behaviours will not underestimate the potential quality of life of those with impairments. In this wise, the social support is needed as it helps in dealing with barriers; resources, aids or positive discrimination to overcome them. Provision of physical structures, for example, buildings with sloped access and elevators, or adequate flexible work hours... (www.equalityhumanrights.com).

In all, this paper identifies the roles of human society in measurement of degree of disability of an individual with emphasis on the fact that in-accessibility, harassment, abuse, discrimination and violence against people with disabilities are societal determined and instigated. Thus, the position of the social model theory.

Plateau State, Nigeria: Creation and Violent Conflicts Dynamics

Plateau State was created out of the then Benue-Plateau State in February 3, 1976 by the Murtala Mohammed Regime with the State capital as Jos, shared among the three LGAs of Jos North, Jos South and Jos East. The State which is divided into seventeen LGAs, with three senatorial district has the following LGAs: Central Senatorial District- Mangu, Pankshin, Bokkos, Kanam and Kanke; Southern Senatorial District- Wase, Langtang North, Langtang South, Mikang, Qua'an Pan and Shendam; Northern Senatorial District- Barikin Ladi, Bassa, Jos East, Jos North, Jos South, and Riyom. According to the 2006 National census figure, Plateau State, mainly dominated by Christians, has the population of about 3.5 million. It further has an internal ethnic-group division of chiefdoms and emirates, people who share common affinities. Leaders of the chiefdoms are elected by the people from amongst several contestants who may not be related to any past chiefdom leaders.

Generally, the topography of Plateau State is rich and filled with hills, rocks and valleys where the residents settle. There is hardly no community or LGA without some measure of massive rock formation. Thus, while lands in the urban areas with large population are scarce and expensive, the rural areas with less population density have access to a large expanse of land, mostly cultivated for farming by the indigenous groups and grazing by the nomadic Fulanis. Within Jos North, South and East, people subsequently build houses on the hills and rocks to maximize the available land. Plateau also, interestingly, has varying degree of climatic conditions; For instance, while Jos North, South and East, Mangu, etc are often cold; an area like Pankshin is extremely cold and weather in places like Shendam, Wase, Langtang North are

humid and hot. The weather, however, suites many crops and assorted vegetable-plants found in the State.

Kwaja (2014:8) noted that Plateau State “is a host to over 60 different ethnic groups. Some of the indigenous tribes in the State are: Afizere, Amo, Anaguta, Angas, Aten, Berom, Bogghom, Buji, Challa, Chip, Fier, Gashish, Goemai, Irigwe, Jarawa, Jukun, Kwagalak, Kwalla, Meryang, Miango, Miship, Montol, Mushere, Mupum, Mwaghavul, Ngas, Piapung, Pyem, Ron-Kulere, Rukuba, Taletc, Taroh and Youm. Each ethnic group has its own distinct language with Berom, Langtang, Mwaghavul and Goemai as the 4 major dominant ethnic groups in Plateau State”. In Alubo (2006:36)’s opinion, “because of the sheer number of ethnic groups in the central region, identity conflicts and contestations over citizenship, land and shared natural resources are regular and fierce”. He further maintained that “since independence, the middle belt has been a scene of frequent flare ups. The Nigerian and international media describe the frequent clashes as religious, but in fact they stem from minority ethnic groups” attempt to wrench themselves free from what they see as the domination by the Hausa-Fulani establishment. (pg. 38)

Resulting from this, Plateau State has continued to witness several violent conflicts emanating from identity struggle, ethnic dominance and political control. These violent conflicts are driven by ethnicity and religious sentiments and affiliation. In essence, Ethnicity, identity, economic and religion have propelled and sustained pattern and emergence of violent conflicts in Plateau State. Corroborating the claim, Kaigama (2012:12) declared that “the combined factors of wrong government policies, fear of domination, power tussles, poor response to security reports, politicization of religion and ethnicity, poverty and religious hate have played roles in the crises”.

Crises in most part of Plateau State have become intractable, affecting people differently. Unfortunately, effects of violent conflict on people are not properly documented even when it is feasible and evident in the polarisation of communities in the State, settlement pattern, loss of livelihood, public mistrusts, poor human co-habitation and many more. The conflicts have rendered a lot of people physically incapacitated, and increases the sufferings of the physically challenged with more disabilities. Although, other factors that contributed to large number of people with disabilities in Plateau State have been identified, the enormous impact and effect of violent conflicts on the rapid growth of the disabled persons cannot be overestimated. Essentially, conflicts can be both a cause of disability and a devastating complication for those already living with disabilities. Other causes of disabilities includes but not limited to diseases, poor medication or drug intake, poor/lack of access to medical facilities, among others. According to Aderimi (2015) “with population of 4.7 million, there are over 525,000 PWD in Plateau State”. Nana (2010:49) had also stated that “in Nigeria, there are over 19 million people with disabilities, but no systemic institutional arrangements to address their needs”.

Response of successive administration to managing and mitigating violent conflicts has been heavily criticised as inadequate, nontransparent and ineffective. See (Madunagu: 2011:89); (Kwaja: 2014; 13); (Shedrack: 2007; 81-90). Government has failed to address critical factors that triggered violent conflicts such as control of Jos North LGA political seat, farmers-herders conflict over land and water, etc. It has additionally failed to implement epochs of recommendations by successive constituted commission of inquiries to the causes of violent conflicts. Consequently, there have been a large breakdown of trust between the populace and security agencies/government which have been perceived as incapable and bias. Today, there are as many community security outfits as there are communities across Plateau State. People have, resolvably, come to trust and believe in these communal security arrangements over government and formal security agencies notwithstanding inherent negative consequences.

Relative Peace, Violent Conflict and Post-Conflict periods: Living as PWDs in Plateau State

From the above narrative, it is undoubtedly clear that people with disabilities in Plateau State are faced with critical living challenges at all times and seasons- violent conflict period, post violent conflict period or in relative peace time. Their vulnerability at all times is not unconnected with the societal perception of who they are which has, regrettably, contributed to various forms of human degradation, low-esteem and harassment they have been negatively subjected. Men, women and children with disabilities are matters of daily ridicule and abuse; the degree of which differs from location to location and among families.

Findings have revealed, however, that women with disabilities are faced with more challenges than their male counterpart due to the gender disparity. Chitra Nagarajan and Grace Jerry (2015) submitted with regards to the effect of violence on people with disabilities in Plateau State that “all disabled people are affected, women face intersecting discrimination because of their gender and disability”.

They elaborated further that:

Daily life for those with disabilities in Plateau, and elsewhere in Nigeria, is bleak. Families rarely send disabled children to school and many keep them indoors to protect them or to hide them. Women said healthcare is often inaccessible – physically, financially and because staff have little knowledge of how to manage care for patients with disabilities. Workplaces are also inaccessible: many employers presume that disabled women have poor intellectual skills, and customers may be reluctant to buy goods from them. Violent conflict exacerbates this reality. Women with disabilities find it difficult to flee violence and are often left behind.

In relative peace time, people with disabilities are, inauspiciously, faced daily with harassment, abuse, battery, assault, stigmatisation, isolation and others- the female with disabilities, for example, are sexually assaulted as many are raped. Surprisingly, these inhumane treatments are carried out either by close family members or by other members of the community who are supposed to protect them. In spite of the availability of special classes for children with special needs in some schools, children with disabilities are denied access to education by their parents despite the zero-level fee payable. Research shows that in some schools such as Pilot science primary school, Riyom and Transfer Roman Catholic Mission primary school, Shendam, there are very few number of children attending the special classes despite an appreciable number of children with disabilities in these two communities. Family members are known to hide their members with disabilities from the public glare due to what they considered ‘embarrassment to family dignity and status’.

Furthermore, people with disabilities have their movement restricted during peace period as a result of the fear impacted by past violent conflicts which have led to community polarisation; this, to them, is considered a safety measure. Many adults with disabilities, despite having educational and requisite qualifications, are discriminated against in their quest for employment. They are either outrightly denied the job opportunities due to their disabilities or lack access to information on government empowerment initiatives; which hardly cover them at any rate. In addition, Public structures, infrastructures, services and facilities are inaccessible and non-inclusive of people with disabilities in Plateau State as they do not have opportunity to access and enjoy government and corporate facilities. Lack of access to education and vocational skills have made most people with disabilities heavily dependent on the family and community. At the community level, people with disabilities are not encouraged to be part of the decision making bodies. They lack access to information and overall decisions are mostly not inclusive of them. These, in total, have continued to expose them to risks and made them vulnerable. In his submission, Hosea Bitrus (2017) said “people with disabilities are regarded as burden by family and community members, they are the second class citizen whose death is hardly missed but somewhat a relief to family, caregivers and community. Their death is often considered as natural cause taking its tolls”. He stated further that he was “always worried about too much dependency on people, this make people look less on people with disabilities and dis-valued them. Self-reliance is a way out from dependency although the means to that realisation is slim because we live in a society where people have grossly underrated us”.

With history of protracted violent conflicts in Plateau State, people with disabilities are mostly affected during conflict attacks and killed. There are reported cases of abandonment, battery and killing of these group during violent conflict. Findings revealed that most women were raped either by the assailants or security personnel drafted to restore law and order at the outbreak of

violent conflicts. Some of the sexually abused have produced children without known fathers, thus compounding their vulnerabilities. Similarly, due to low access to information and early warnings, many people with disabilities have been caught at the wrong side of violent conflict losing their small means of livelihood to violent attack. The study conducted by Inclusive Friends Association (IFA), (a Non-Governmental Organisation which seek to influence government policies to cater for people with disabilities in Plateau State and beyond) on '*what violence mean to us: women with disability speak*' in 2014-2015^{site} found that "in one village in Riyom, members of the community locked all those who were elderly or had disabilities in a room before an attack; but the room was set on fire when the attackers came. People with hearing impairments might not hear warnings, gunshots and sounds of others running away, and so remain behind, in danger. People with visual impairments might not know what is happening, exactly where they are, or how to escape. We heard of visually impaired women who were deliberately left in unsafe areas. We also heard of women who mistakenly ran towards the attackers and were raped and killed". During violent conflicts, people with disabilities are abandoned even by family members due to their mobility restriction and the urge for survival. They are exposed to many risks and many have therefore fallen victims of violent conflicts.

Death is, however, not the worst consequence of violent conflict; some people with disabilities are known to have escaped and moved to the Internally Displaced peoples' camps. Ironically, in the IDP camps, some people with non-visible disabilities often die quickly due to lack of attention and supportive care. Those with visible disabilities are discriminated at and most times abused. In some instances, some people have become permanently disabled due to injuries they further sustained in the camps.

Naturally, healing processes for people with disabilities is often longer due to impairment challenges and in most cases, medical facilities and drugs which are either inadequate or not meeting their needs. In his submission, Salis Abdulsalam (2017) said people with disabilities face difficult period in the displaced peoples' camps- they are the dirtiest due to the flooring of the camps. He further posited that these group lack access to sanitation facilities and hygiene condition is a dismissal and they are isolated even by other people in the camp and clearly neglected by camp officials. Therefore, they often contract many diseases that render them more vulnerable. In its submission, the Inclusive Friends Association stated that "camps for internally displaced people (IDP) are often difficult to navigate for those with mobility problems or other disabilities. We have heard of men forcing disabled women and girls to have sex with them in exchange for 'help' getting food and water. In the Jos North district, 15 out of 35 women with disabilities spoke of violations in IDP camps."

Sad to say, there is no specific policy of government currently targeting people with disabilities. Relief materials at the IDPc and for those affected by violent conflicts in the communities are

often limited and not meeting immediate needs of people with disabilities. It was also discovered that some of the community leaders often share these materials among community members with nothing left for affected people with disabilities. Thus government's effort at rehabilitation, reconstruction and reintegration is often generic and non-inclusive. Many people with disabilities who have lost their means of livelihoods are therefore, forced to take up alms-begging to survive amidst movement restriction due to community polarisation. Sadly too, polarisation of communities along ethnic and religious affiliation in the cities has limited and restricted the movement of the people thereby hampering their probable full-scale alms begging or businesses beyond certain areas where religion or ethnicity permit. Nonetheless, alms begging is entertained mostly in the urban areas where some people with disabilities have become more or less professionals in the act. However, act of alms-begging is not allowed in most rural communities for the dual purposes of families restraining their disabled members from such venture and lack of people to give such alms.

Vulnerability of PWDs: The Environmental Factors

As earlier reflected in this study, the social model of disability identifies systemic barriers, negative attitudes and exclusion by society (purposely or inadvertently) as the reasons why people with disabilities are made vulnerable. In other words, society constitutes the main contributory factor in disabling people. It should be noted that disability does not out rightly mean inability to achieve or carry out a responsibility, but absence of the enabling environment which hinders achieving or carrying it out successfully. It is when the environment poses as hurdle or constraint to achieving human achievable goals. Most people with disabilities, given the necessary support from the family, community, society and government, have been able to achieve much more than people with abilities. This, like it has been said before, is the difference between living with disabilities in the advanced world and developing nations like Nigeria. The situation is however worse in conflict prone areas.

It, then, implies that dearth of good and productive interaction and healthy environment have immeasurable negative consequences in human environment, especially, if allowed to degenerate into violence. Violent conflicts in Jos North have therefore created major imbalances in the now polarised society with identity, ethnicity and religion affiliation determining pattern of human settlement and habitation. This polarization, thus, increases human vulnerability, suspicious and potentials for violence. Sadly, as violent conflicts affect people differently, people with disabilities are not only more affected but have remained susceptible to dangers as they live in fear and wants.

Unfortunately, there are no provision of trauma counselling services for surviving victims of violent conflicts. Many of these victims are not only physically affected but psychologically

wounded and died from treatable and avoidable but environmentally induced and acquired injuries or illnesses. This negative effect is not restricted to post violent conflicts but even at relative peace period when most people with disabilities cannot access health facilities due to poverty, neglect and negative reactions from health services personnel. This has formed the basis for series of accusations from the populace to government and security personnel of misconducts during the period of violent conflicts with no reported case of justice served as people with disabilities (male and female) are often afraid to speak out due to fear and lack of self-esteem. When they sometimes eventually do, they are hardly listened to or believed.

Cases of violation of human rights on the PWD have, often, gone unattended to. They face and live with perpetrators of abuse at all levels of the society and at all times. Lack of inclusive social justice to prosecute or sanction perpetrators of these violence and abuses have, unrepentantly heightened the menace as it increased the acts with gross impunity. Similarly, lack of care from family members necessitated isolation, abandonment, stigmatisation, abuses and battery which has hitherto facilitated and compounded problems faced by the incapacitated group.

Besides the aforementioned effects, Environmental determinism equally varies from one location to the other and could be ascertained by other factors like religion, wealth, etc. This is because in the most urban areas like Jos North, Jos South and Jos East, people with disabilities contend with sophisticated living conditions and struggle for scarce resources with their able bodied counterparts. Unlike persons with disabilities born into wealthy homes, who though may be discriminated against but are assured of steady meals. While some people with disabilities may not be fortunate as they have lost their little means of livelihoods as a result of violent conflicts experienced in the area, others residing in Muslim dominated areas enthused that they are often recognised and supported by Muslim faithful during the *Ramadan* period and other celebrations of Islamic faiths. Free food, clothes and money are specially packaged and donated during the period. The story is different in Christian dominated areas as there are no significant differences during the Easter and Christmas celebrations.

Additionally, in the semi-urban, rural and mostly farming LGAs/communities, most people with disabilities could not engage in farming due to their disabilities and when attempts are made, full potentials are challenged by infirmities. In some Plateau communities, people with disabilities are denied access to land just as some culture denied women land and inheritance rights. This also contribute to their vulnerability.

Essentially, poverty play its roles in the vulnerability of children with disabilities but ignorance and religion sentiments by parents are contending factors which have denied access to education. Many communities which is filled with children with disabilities are sometimes mostly very close to the local schools but these children are left in their world, wandering around in the

communities rather than taken to schools basically because some parents believe that kind of education will add no value or gain to such children.

Obviously, violent conflict has devastating effects across a range of areas, many of which have lasting impacts; just as intensive conflicts lead to much longer recovery times. Typically, effect of conflict on vulnerable groups could be extensive. That is, it could mean death, permanent injury, multiple disability, lack of or reduction in employment and income opportunities; destruction of productive opportunities and idleness. Similarly, accessibility to good health care, social and educational services could be reduced or completely eroded. Needless to say that the economic condition in such areas could drastically worsened if not destroyed thereby creating a tensed atmosphere of fierce competition and agitations, hence, the need for the theory of change.

Succinctly put, the theory of change is captioned in the following: *if families, communities and government make up the environment; the environment enhances vulnerabilities and disabilities. Such could however be mitigated, reduced and eradicated if the environment respects, values and accords people with disabilities their rights as human being; with equal access to infrastructure, education, health, economic, justice and social services.*

Table 1: The table above shows series of abuse, consequences and outcomes faced by people with disabilities as influenced by the environment.

Peace time	Perpetrators	Conflict time	Perpetrators	Post Conflict	Perpetrators
ACTIONS		ACTIONS			ACTIONS
Stigmatised	Community	Stigmatised	Community	Stigmatised	Community
Isolated	Community/ Families	Abandoned	Community/Caregivers/Families	Isolated and abandoned	Community/ Families
Lack of job	Community/ Government				
Abandoned	Community	Battered/Beating/Rape	Assailants/ Security agents	Battered	Community
Restricted	Community/ Families				
CONSEQUENCES OF ACTIONS					
Jobless		Jobless		Jobless	
Ashamed		Helpless		Ashamed	
Insecure		Loss of livelihood		Insecure	
Alms begging		Poverty		Hunger	
Helpless				Alms begging	
Drug peddling/Prostitution				Low Esteem	
Movement restriction				Drug peddling/Prostitution	
				Movement restriction	

		Helpless
OVERALL OUTCOME		
Vulnerability	Vulnerability	Vulnerability

CONCLUSION AND RECOMMENDATIONS

Environment has undoubtedly contributed largely to the vulnerability of people with disabilities. Their inabilitys and disabilities have been strongly marked, not only because of their impairments but by the manner they are perceived, treated and responded to by the people; thus, the Social Model theory submission. This in a way has undertaken vulnerability assessment in reference to Plateau State. Many communities in the State have been exposed to innumerable conflicts with its resultant (negative) effects on the people and government. It was therefore justified that while emergence of violent conflicts is often clear due to early warning signs, ability of governments and other stakeholders to respond effectively and efficiently could be defective thereby leading to loss of lives and properties, including displacement of people. Government's inability before, during and after conflict results from lack of honesty and transparency mainly because support services and materials necessary for the victims of violent conflict are diverted into superfluous security management rather than integrated peace building and rehabilitation. The response situation is worse in a multi-ethnic and polarised State like Plateau.

It is therefore imperative for government to ensure that its humanitarian interventions and responses become inclusive and gender sensitive to care for the plight of vulnerable groups, before, during and after conflicts. There should also be proper classification of the vulnerable groups- excluding certain group or individual is by itself, violation of their rights and denial. Proper and effective planning before, during and after interventions should be encouraged to minimise long-term effects of conflicts on people with disabilities.

Also, poverty has become endemic and requires holistic and systemic engagements in addressing its root causes. Hence, government economic empowerment initiatives should target people with disabilities similar to having deliberate policies for inclusive infrastructures and services. In Marco's (2001:54) submission, "the magnitude of poverty in our societies demand a new conceptualisation, stressing its human dimension, enabling a vision of the poor not as ciphers or statistical data but rather as human beings with a story to tell and a dignity that must be respected".

Moreover, the Commission, set up on the 21st December, 2005 in Plateau State which passed the disability law with a legal framework that protects citizens with disabilities from exclusion and discrimination on the ground of disabilities, should be made functional and effective. It should

bring to fore the unknown gains of the Plateau State Handicapped Law of 1981 which stipulates inter alia, that education of children with handicaps is compulsory and provides for the rehabilitation needs of adults with handicaps.

Finally, policies should target community members, associations, leaders and structures. Formal and informal groups should target the deprived group, with vigorous sensitisation and re-orientation required, and ensure that their dignity is upheld at all times. Perpetrators of abuse and violence against people with disabilities should be punished accordingly while people with disabilities are encouraged to come out of hiding, make themselves visible and heard in their communities. Their involvement in decision making processes at the community level will definitely encourage inclusive decisions. Once self-esteem of people with disabilities is attained, there will certainly be gradual withdrawal from their self-enclosure and solitary confinement as they will be able to contribute to and participate in community projects/development. They will further become self-reliance and be able to accomplish set goals like their counterparts in the advanced world where environment has enabled equity-values for general human development.

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