THE GIRL-CHILD AND ABUSE

An Opening Remark by the Chairperson, Professor Mopelola Olusakin

At the 2nd Symposium of the Organisation for Women In Science for the Development World (Lagos Chapter)

Date: Thursday, 21st November, 2019

Venue: Julius Berger Hall,

University of Lagos
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Protocols:

Introduction

In many African settings, the girl-child is discriminated against right from birth. This is because of the perception of many people that while a boy-child would foster the continuity of his family name, the girl-child would marry and go out to populate her husband’s family. From the early age, the girl child is allocated responsibilities within the family. Potential areas of abuse of the girl-child, include female circumcision, housemaids, rape, child prostitution, teenage pregnancy, and arranged marriages.

 Reasons children are abused sexually, emotionally, physically, exploited or neglect

- Poverty-which could lead to child labour like hawking and other vices.
- Parents’ separation or even divorce-giving way to stepfathers, stepmothers and uncles.
- Lack of proper sexuality and sex education.
- Child-labelling- never-do-well, oloshi, blockhead etc.
- Giving out children as domestic servants to work in peoples’ homes.
- Mental illness.
- Death of a mother or both parents.
- Lack of assertiveness training-saying no or yes when it is needful.
- Lack of autonomy to children-opportunity to air their views, not shutting them up all the time.
- Lack of parental supervision-permissive or uninvolved style of parenting.
Violation of the child’s basic right of adequate food, shelter, clothing from parents.

Leaving the child behind in school, church or mosque long after the close of events.

Sending children on errands at night without any adult accompanying them.

When a child is not shown love, attention, acceptance, belongingness etc.

Inability to spend time to stay with a child-To a child, LOVE is spelt in TIME.

Overexposure to the internet, T.V commercials, videos, African Magic, DSTV, MYTV, MITV etc.

Lack of self-esteem-having no good concept of his/her self-image.

Over-pampered child- a very lazy child that has servants that wait 24 hours on him/her.

Early maturity and inadequate information about the developmental changes taking place in the body of the child.

When a parent or parents are alcoholics or drug users.

High risk environments such as bars, restaurants and hotels expose children to all forms of abuse.

Lack of sensitization of the parents, teachers, caregivers, general public on the things that constitute child abuse.

Lack of teaching the child basic things to know about himself, her surroundings and how to safeguard him/herself from all forms of child abuse.

Children that are never contented with what their parents provided for them could be lured into any form of abuse with gifts.

Lack of professional guidance counsellors at all levels of our educational system.
Effects of child sexual abuse

Effects of child abuse include:

Self-blame:

An overwhelming amount of people routinely experience mild or complex trauma symptoms from the environment they had in their formative years. One of such symptoms is toxic self-blame.

Self-blame is not necessarily a bad thing. Indeed, feeling responsibility, guilt, or shame keeps us from hurting others and lets us learn from our mistakes. It helps us be more empathetic to each other. It keeps us human.

However, it can be, and often is, a problem when we blame ourselves for things we didn’t do or objectively shouldn’t feel responsible for or ashamed about. In this article we will talk about toxic, unhealthy, unjust self-blame and its effects.

When children experience trauma, whether extreme like sexual and physical abuse or “mild” like lack of attention, they often are not allowed to feel how they feel, which is hurt, angry, enraged, betrayed, abandoned, rejected, and so on. Or if they are allowed to feel some of those emotions, they usually don’t receive proper soothing and mental resolution to be able to heal and move on.

It is especially prohibited to feel angry at the people who hurt you if they are your family members. And yet the child is dependent on their caregivers, even if they are the very people who are supposed to protect them and meet their needs yet are failing at it in some form.

Moreover, human beings want to understand, and here, too, a child wants to understand what happened and why. Since a child’s psyche is still developing, they tend to see the world revolving around them. This means that if there’s something wrong, they tend to think it’s somehow related to them, that perhaps it’s their fault (Pinel, 2009).

The child is often blamed for feeling hurt directly or indirectly. Not only all of that is the opposite of what a hurt child needs, it makes the child blame themselves for what happened and repress their true feelings. Then, since they’re unresolved and often not even identified, all of these issues are carried into a person’s later life.
If properly unaddressed, they can follow them into their adolescence, adulthood, and even older years, and manifest in numerous emotional, behavioral, and interpersonal problems. Here are six ways how self-blame manifests itself in a person (Hall & Berntsen, 2008).

**Guilt:** an emotion that occurs when a person feels that they have violated a moral standard. Many people suffer all their lives from this oppressive feeling of guilt. The feeling of guilt is unique from feeling sad or upset – guilt often combines feelings of shame, anxiety, frustration, and humiliation. These emotions can well up inside and build over time, most especially if we never admit to ourselves that we were at fault. Guilt can majorly affect our sense of self-worth and self-esteem.

Guilt can be an elusive and hard-to-predict beast. Some feel it much stronger than others. Feelings of guilt are quite common among those with mental disorders – particularly anxiety, depression, and OCD. The origin of one’s guilty feelings could be anything, but the cause is typically much more minor than would merit such an extreme emotional reaction. For example – let’s say someone with severe anxiety finds themselves feeling guilty about gossiping about a friend. The anxiety fuels the feelings of guilt, and this person could end up feeling guilty for days, weeks, months and even years for just one incident. The guilt takes on a life of its own long after the incident has lost its relevance. They might want to find a way to somehow repent for their mistake – or they might stay in hiding until the feeling subsides. Some people are even manipulated into feeling guilty by particularly abusive friends, significant others, bosses, or family members. The stress of the guilt itself can have a serious effect on some people. While mostly psychological, some physical effects can include insomnia, a loss of appetite, and an overall dreary feeling. Guilt happens to share a lot of symptoms with depression; and depression can develop within someone with severe guilt issues.

**Flashbacks:**

According to Baddeley, Eysneck & Anderson (2009), flashbacks are the personal experiences that jump into people’s awareness, without any conscious, premeditated attempt to search and retrieve this memory. These experiences occasionally have little or no relation to the situation at hand. Having flashbacks can significantly disrupt the everyday life of someone with Post Traumatic Stress Disorder (PSTD) (Ball & Little; 2006 Mace, 2007).
A **nightmare** is an unpleasant dream that can cause a strong emotional response from the mind, typically fear but also despair, anxiety or great sadness. However, psychological nomenclature differentiates between nightmares and bad dreams, specifically; people remain asleep during bad dreams whereas nightmares can awaken individuals. The dream may contain situations of discomfort, psychological or physical terror or panic. After a nightmare, a person will often awaken in a state of distress and may be unable to return to sleep for a short period of time.

**Insomnia** is a form of disorder in which people have trouble getting to sleep. They may have difficulty falling asleep, or staying asleep as long as desired. Insomnia is typically followed by daytime sleepiness, irritability, depressive mood and low energy, It may result in problems focusing and learning. Insomnia can be short term, lasting for days or weeks, or long term, lasting more than a month.

**Self-injury** is defined as the intentional, direct personal injury, done without suicidal intention. Other forms include: cutting of the body and self-mutilation have been used for any self-injury behaviour regardless of suicidal intent. The most common form of self-harm is using a sharp object to cut one's skin. Other forms include behaviour such as burning, scratching, or hitting body parts. While older definitions included behaviour such as interfering with wound healing, excessive skin picking, hair pulling and the ingestion of substances usually toxic.

**CONCLUSION**

Child abuse prevention is everybody's responsibility because by their nature, they are defend less and most vulnerable. Child abuse prevention is crime prevention-the way we report to police about criminal activities in our society is the way child abuse should be reported to the appropriate authorities.
PROGRAMME OF EVENT
November 21st 2019
Julius Berger Auditorium, University of Lagos, Akoka, Lagos, Nigeria.

8:00 am Registration commences
9:30 am - 10:00 am Arrival of Guests/Call to order
10:00 am - 10:15 am Invitation to the high table
10:15 am - 10:45 am Opening prayer
10:45 am - 11:00 am National Anthem
11:00 am - 11:30 am Welcome Address by President, OWSD Unilag
11:30 am - 11:40 am Vice Chancellor’s remark
11:40 am - 11:55 am Opening Remark by the Chairperson: Professor Mopeola Olusakin
11:55 am - 12:00 pm Keynote Address – Dr Taiwo Oduguwa
12:00 pm - 12:05 pm Questions & Answers
12:05 pm - 12:40 pm Citation - Dr. Fidelia Osuala
12:40 pm - 12:45 pm Speaker II – Mrs Opeyemi Makanjuola
12:45 pm - 12:50 pm Questions & Answers
12:50 pm - 1:05 pm Interlude (short play)
1:05 pm - 1:30 pm Speaker III – Mrs Florence Karl-Ogwu
1:30 pm - 1:35 pm Questions & Answers
1:35 pm - 1:45 pm Speaker IV – Mrs Juliet Olumuyiwa-Rufai
1:45 pm - 1:50 pm Questions & Answers
1:50 pm - 1:55 pm Speaker V – Dr. Rosemary Ogedengbe
1:55 pm - 2:00 pm Presentation of Awards/Gifts to Speakers
2:00 pm - 2:05 pm Chairperson’s Closing remarks
2:05 pm - 2:20 pm Vote of thanks/Closing prayer
2:20 pm - 2:25 pm Group pictures
2:25 pm - 2:30 pm Refreshments

M.C. - Dr. Ronke Samuel

PLANNING COMMITTEE

CHAIRPERSON OF THE COMMITTEE
Prof. Mopelola Olusakin

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Dr. Margaret Ilomuanya
2nd SYMPOSIUM

THEME:
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