'The BLASTS that changed OUR LIVES'

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The fragrance of rain whiffs through the tent Muhammadu Idrissu shares with his family. As the cold draft seizes the shelter, the nine-year-old's face breaks into a wince.

"He feels ache in his legs whenever it rains. The cold breeze causes him great pains," says his mother, Fatouma.

Rubbing her hand on the stump where her son's left knee used to be, the 33-yearold recounts how Muhammadu lost his leg to a blast from a landmine while fetching firewood with his older brother, Musa, in Biu.

It happened in the twilight of 2015 thus casting the family in unexpected gloom. On the day he lost his leg, Muhammadu had wandered far from home with Musa and friends in their neighbourhood, because they intended to hunt for game (bush meat), at the end of their task.

The boys worked at feverish pace so that they could have enough time to hunt for grass-cutters and squirrels.

They would skin, roast and eat their kill before heading back home for a late supper. It was part of the thrill of running errands in a group.

Although their mothers warned them against wandering too far from home, most parents knew of the kids' escapades in the bush. It's all part of the thrill of growing up.



While they gathered firewood, Idris, then five at the period, saw his brother poke at something that looked like a steel plate. Instantly, there was a blast and that was the last thing the child remembered. When he came to, Idris had lost his left leg and his brother. The latter was violently torn apart by the bomb.

The incident claimed Musa and two of their friends and rendered two others crippled including Muhammadu.

In a voice laden with grief, Fatouma said: "Musa was a wonderful child. Always in high spirits. He wanted to become a doctor. Although he is gone, I am lucky I still have Muhammadu." Fatouma has every reason to be thankful. Unlike Sekinatu Jayya, tragedy sauntered into Jayya's life in common hours.

News of doom intruded her home in Baga, while she made millet soup for supper and awaited her children's return from a play date. Nuru, five, and Ayisatu, seven, had been gone since noon. But Jayya was assured of their safety. She knew they were secure playing with their friends in the neighbourhood. Then a loud noise intruded through her windows at a quarter past 4 pm. The shutters rattled at the hinges and Jayya's heart sank with her spirit.

The 28-year-old was suddenly assailed by a foreboding of evil. But she shook off the feeling and set out to look for her children.

"People stared at me as I hurried towards their play zone, near a dry well two streets away. But I thought it was because of my appearance. I had rushed out of the house without my hijab and with one slipper on my left foot," she said.

Then she got to her destination. And her heart sunk lower as she sighted a large crowd. Jayya rifled through the mob, haphazardly, like bullets from a Dane gun, stopping for breath at the edge of an opening where puddles of flesh and bone fragments seethed in the sun.

Some mothers bathed in the carnage. Others rolled and wailed in the bloodsoaked sand, amid the spatter of decapitated minors. In their grief, they fought off the firm grasps of their husbands and sympathetic neighbours.

The loud blast that caused Jayya's shutters to rattle had claimed the lives of her children and seven others.





The minors had discovered an unexploded canister under a pile of dried bush. The bomb went off while they fiddled with its metal ring. Amid the heap of decapitated minors, Nuru's head jutted dolefully with what's left of his torso. Few metres away, Ayisatu's innards spilled from her belly, even as her forelock streamed with blood. Such was the imagery at her children's playground, and venue of their dismemberment. It's all part of her grisly memory now but Jayya lives in dread of remembering.

"Everytime I remember what my children looked like, torn apart, I shed tears uncontrollably. Most nights, I cry myself to sleep. My husband has been very strong and supportive. He consoles me. But he cries too. I have heard him cry during Salat (prayer). He cries in his sleep too. Together, we try not to remember. That is why we relocated from Baga to Maiduguri," said Jayya. 'They came to change our lives with bombs' "BOKO Haram came and changed everything. They made this place unsafe.

They came to change our lives with bombs. Our kids can't go out to play in the sand. They can't hunt for sport. We, their fathers have to be careful too, except we intend to die before our time and watch another man father our child, be a husband to our wives. There is bomb everywhere. The bomb ruins everything," said, Ibrahim Koni, a crippled trader. Before his disability, Koni used to be a farmer. He worked through wet and dry spells to cater for his family and rebuild his ancestral home. But on a hot afternoon, the 41-year-old suffered a decapitation of both legs when he hit on an unexploded ordnance on his farm, with his hoe.

It was like a scene from a horror movie. Koni admitted that he had heard of farmers dying from bomb blasts as they tilled their farms but he never imagined that he could be on the receiving end of such gruesomeness. "The blast flung me backwards belly down. I had no clothes on save a worn knicker and my face was buried in the sands. Two of my neighbours who farmed beside me could not come immediately to my rescue.

They fled for safety as soon as they heard the explosion, thinking our village was been attacked by Boko Haram. It took them two good hours to get to me. I could have died. But Alhamdulillah, Allah spared my life. "When there is life, there is hope. Though I cannot farm anymore, I am trying to gather some money to start a small trade. Something I can manage on my own...Since my accident, I have been on my own.

My wife fled with our only son. She couldn't stand the fact that I had become useless to her and my son," said Koni. The grim picture HUNDREDS of people have been killed or maimed by landmines in north-east Nigeria, according to research findings. Mines laid by Boko Haram terrorist group over the course of its deadly insurgency in the Lake Chad region, killed 162 people in two years and wounded 277 more, according to the Mines Advisory Group (MAG), a landmine clearance charity.

Casualties rose from 12 per month in 2016 to 19 per month between 2017 and 2018, making Nigeria's casualty rate from mines the eighth highest in the world. After a decade of the insurgency, locally produced landmines, unexploded bombs and improvised explosive devices are scattered across the north-east. MAG's Avishek Banskota, who is based in Maiduguri, said: "Everyone I have met in Borno State has been affected in one way or the other, whether losing a family member, a friend or a house. People can't move around freely in most of the region and much of the land can't be used to farm or collect firewood, so the impact on communities is huge." According to the police, insurgents use pipes, pots and other items to make their own munitions and harvest explosives from undetonated ordnance.

ICRC to the rescue

Most victims of Boko Haram assaults make it to a health facility. Many die in the heat of the attack. Some die few weeks after due to inappropriate medical care. Others live with disabilities for life. They are forced to move on with their lives without the necessary facilities, like physiotherapy and prosthetic limbs, that could make their lives easier. Some very few amputees, however, enjoy the rare boon of support, courtesy a healthcare programme devised by the International Committee of the Red Cross (ICRC) in partnership with the Borno's State Specialist Hospital.

The ICRC runs a medical, rehabilitation programme courtesy a Mobile Surgical Team (MST) at the State Specialist Hospital in Maiduguri. Over the duration of the protracted insurgency in the northeast, the surgical team has treated hundreds of people wounded in bomb blasts in Borno. For instance, in 2016, the team together with surgeons from Michika Hospital, treated 76 victims of the blast in Madagali market, while another ICRC surgical team treated 15 people injured in Maiduguri. Recently, the health organisation introduced of a rehabilitation programme, whereby it facilitates the acquisition of prosthetic limbs to victims of bomb blasts with amputated limbs. The primary focus of the project is to cater for amputees from the conflict, women and children, according to Claudia Soares, Head Nurse of the ICRC's Mobile Surgical Team (MST). Soares shuttles through wards and the operation theatre, daily, at the State Specialist Hospital in Maiduguri.

"The majority of our patients are weapon-wounded patients and internally displaced people (IDPs) fleeing the conflict. We receive patients from across Borno State. Some of them are referred to us by other humanitarian organisations and some of them come to us by their own volition.

They are all treated for free. We treat them all free of charge," she said. The Boko Haram conflict has destroyed the livelihoods of millions of people in the highly impoverished region, where many live on less than \$2 a day thus making prosthetic limbs – which cost on average nearly \$700 – prohibitively expensive to them.

Amputees are first assessed in Maiduguri, where the ICRC runs a medical clinic that caters specifically for victims of Boko Haram attacks. The clinic complements services provided by a handful of state-run hospitals in the city which have been overstretched by the sharp rise in emergency cases from occasional violence. Once potential beneficiaries of artificial limbs are screened, they are then sent for a fitting in Kano, nearly 600 kilometres away. Medical personnel work on an average of five amputees per week, which is just a fraction of the number of those seeking his services. One of the many beneficiaries of the initiative is Musa, a soccer-lover, who lost his left limb in a bomb attack.



The incident happened when a boy walked into his school with a bag despite the fact that bags were banned in his school, Government Science Secondary School, Potiskum, with a bag. "We kept asking him why he was carrying a bag," Musa recalled. "Then we heard a beeping sound, but we thought it was his phone." Unknown to Musa, his teachers and mates at the school assembly, the intruder concealed a bomb in his bag. The ensuing blast was huge, killing two dozen students and injuring more than 40.

When Alhaji Musa, Musa's father, who lived in the staff quarters near the school, heard the bomb go off, he ran into the school. "I saw dead bodies everywhere and everyone running around confused. I started looking for my son," he said, recalling the November 2014 attack. "I eventually found Musa in the emergency ward of Potiskum General Hospital." Musa's left leg had been blown off by the blast.

The football-loving teen faced a gruelling recovery. However, three days after the blast, Musa's family learned about ICRC's programme to fit victims of violence with a prosthesis free of charge. Musa was fitted with a prosthetic limb three months afterwards at the National Orthopedic Hospital, Dala-Kano in Kano. The youngest person in the programme at the time, Musa was trained by the orthopaedic staff on how to use his new limb. Like Musa, Njidda Maidugu, a fuel station attendant, never thought he would walk again on two legs after he lost his right limb in a Boko Haram suicide bomb attack at a checkpoint in Maiduguri, northeast Nigeria, in 2016. Maidugu has been fitted with a free artificial limb in the project run by the ICRC. Modu Yaganami, a native of Dikwa, Borno State, is another beneficiary of the initiative. He said:

"I used to be a trader going to several markets. I was very strong and energetic, until this happened to me.

I was brought to the hospital and my limbs were fixed and treated for free by ICRC. "I was also given an artificial limb. Now, I can move around and do my normal business...I have peace of mind. I thought I was never going to walk again. It was after I was fitted with artificial limb that I felt normal." Ali Suleiman, 35, said he had been on admission for a month as a patient at the mobile surgical ward of the health facility. "I am a victim of a bomb attack in Bama. Thank God, out of 13 of us that got injured, only three of us survived. I am recuperating gradually and receiving the best care from this people," he said.

Tending the maimed is, however, no walk in the park. It requires a great degree of commitment and cooperative efforts Nikolai Dmitriev, an ICRC Surgeon with the MST, stated that he has to frequently operate weapon-wounded people from the very old to the young. "Our patients are really broken. And it is not enough to heal their bodies, there is also need to heal their minds," said Dmitriev. Daniel Madembo, Chief Physiotherapist with the MST, stated that it is the job of his unit to help amputees get accustomed to the use of the new artificial limbs provided for them by the ICRC.

"We help them learn to fit the limbs and walk properly on it. We help them reintegrate into their new lives and their communities," said Madembo. Living under the bomb ABOUT 565 people might have been killed by the explosive remnants of the militant group Boko Haram in Nigeria's restive northeast region in 2018, according to a recent report by the United Nations anti-mine agency. Lionel Pechera, a programme coordinator of the United Nations Mines Action Service (UNMAS), disclosed this at a campaign to mark the International Day for Mine Awareness and Assistance in Mine Action in the northeastern city of Maiduguri, the birthplace of Boko Haram. Pechera said the presence of explosive hazards was a barrier to accessing the majority of land for agricultural activities, which in turn increased food insecurity in the northeast area.

A November 2015 assessment in Adamawa and Borno states by international de-mining organisation Danish De-mining Group (DDG) had noted local community reports of a number of local government areas in Borno state they thought needed clearance, including Bama, Dikwa, Gwoza, Kala-Balge, Kukawa, Marte, and Ngala. In 2015, the Nigerian army warned civilians of the threat of improvised devices using adapted submunitions. Caches of French-made airdelivered BLG-66 "Beluga" cluster munitions were reportedly found in Adamawa state. Also identified were anti-personnel and anti-vehicle mines resembling Chinese No. 4 anti-personnel mines and Type 72 anti-vehicle mines; a variety of body-borne, vehicle-borne, and remotely controlled devices; as well as cluster munition remnants, mortars, rockets and rocket-propelled grenades, hand grenades, and Man-Portable Air Defense Systems (MANPADS).

Going forward...

Boko Haram's insurgency has killed more than 20,000 people since 2009 and left over 2.6 million people homeless. Contamination from mines and other explosive devices has had a serious humanitarian impact, impeding the return of internally displaced persons (IDPs) and exacerbating the crisis in the region. In October 2016, the governor of Adamawa State confirmed that many IDPs were unable to return to their farms due to a fear of landmines. Roads were closed to civilian traffic by the military due to the presence of mines or other explosive devices and there were numerous reports of civilian casualties and farmers who feared returning to work their fields, contributing to sharply worsening food shortages. At the moment, there is no structured mine action programme in Nigeria.

Both Nigeria's armed forces and its police carry out explosive ordinance disposal (EOD) activities and explosive remnants of war (ERW) clearance. The army's ERW clearances are primarily focused on facilitating military operations and clearing roads and areas to facilitate access for troops to carry out attacks on Boko Haram and keep military supply routes open.

The 2016 Buhari Plan for Rebuilding the North East from the Presidential Committee on the North East Initiative (PCNI) includes a plan for de-mining as part of clean-up operations in reclaimed communities before resettlement of IDPs. It assigns responsibility for clearance to the National Emergency Management Agency (NEMA), the Nigerian military and paramilitary agencies. In early 2018, it was reported that some de-mining was taking place to facilitate the safe return of internally displaced persons (IDPs). In September 2018, it was announced that the federal government was planning to spend \$6.7 billion to deliver the PCNI. Yet, hidden explosives constitute a major challenge to IDPs to Boko Haram survivors. According to MAG, mine action should be prioritised as a core protection activity within the humanitarian response in the northeast.



It also emphasises attention on coordinated strategies for safe, voluntary and informed returns to areas where there is risk posed by landmines and other explosives. Bounded by the Ottawa convention also known as the Mines Ban Treaty, Nigeria is obligated to destroy stockpiles, clear mined areas and assist affected communities. Majority of landmine victims are civilians who step on a mine after armed conflicts has ceased in their areas. In most instances, over one-third of all casualties due to landmines are women and children.

There is no disputing the perils of landmines as indiscriminate weapons that lie dormant until triggered, be it by a soldier, or a civilian, a friend or a foe, an adult or a child. Jonathan Gambo is one such child. In a widely advocacy and award-winning report, Temitope Kalejaiye, a Commonwealth staff, narrated Gambo's ordeal. At age 12, Gambo lost his arms, while fetching firewood in his village, Uba, where his parents worked as farmers.

While gathering firewood, his elder brother, who had been curious to unearth a chunk of metal, unwittingly passed him the object, a bomb, before instructing him to throw it away. The device blasted off Jonathan's hand and right arm up to the elbow. Like Gambo, Muhammadu lost a limb, his left leg, while fetching firewood with his brother in Biu. Then there is the sad case of Jayya, who lost her two children, Nuru, five and Ayisatu, seven to an unexploded canister.













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