

# Boko Haram war trauma: Military deploys psychologists, others to battlefields

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File: Soldiers on Maiduguri-Damaturu highway.

...okay enlistment of women, graduates for corps  
...shut door against non-indigenes, herdsmen  
•Lagos Neighbourhood Watch officials to be drafted

*Olaleye Aluko and Tunde Ajaja*

Worried by the disturbing rate of soldiers killing themselves and their colleagues, the Nigerian military authorities have deployed new strategies to mitigate the ugly development, investigations by *Sunday PUNCH* have revealed.

The Defence Headquarters has, therefore, commenced the deployment of psychologists to the battleground in a bid to reduce the suicides and murders among the troops fighting against Boko Haram in the North-East.

It was learnt that the medical experts had been catering to the emotional, psychological and mental health needs of the soldiers fighting against the insurgents whose activities have led to the loss of many lives and destruction of property in the region.

Multiple sources at the DHQ in Abuja told one of our correspondents that apart from counselling tours by the psychologists to the theatre of operations, which had been made a priority, the medical team now conduct daily ward round to hospitals where soldiers are being treated to see to their mental health.

There have been growing concerns over a spate of suicides among soldiers and troops killing their colleagues and innocent people, a development some have attributed to Post-Traumatic Stress Disorder.

For example, the country was thrown into a deep shock on February 26 when a Corporal attached to the Army Super Camp 15 at Malam Fatori in Borno State went berserk and opened fire on his colleagues, killing four of them before shooting himself.

The soldier, who was said to be having some psychological issues, also injured two other people as he went on a shooting spree.

The acting Director, Army Public Relations, Col Sagir Musa, said, “A corporal of the army serving at the Theatre Command, Operation Lafiya Dole, went berserk in the early hours of Wednesday (February 26) and opened fire, killing four of his colleagues before shooting himself. “Meanwhile, investigation into the case has since been instituted to determine the circumstances that led to the unfortunate incident.”

Prior to the incident, a soldier identified as Olodi Blessed, who was said to be on medical leave, having just returned from the battlefield in the North-East, stabbed his wife and son with a knife on January 2. The incident took place in Ede, Osun State.

After inflicting varying degrees of injury on them in the room, he came outside and stabbed his neighbour, Mrs Iyabo Olukunle, a nursing mother, several times till she died on the spot.

As if these were not enough, he reportedly stabbed one of his fellow soldiers who attempted to take the knife from him to death.

Meanwhile, one of Olukunle's children, Tosin, told *SUNDAY PUNCH* in an exclusive interview that the soldier showed signs of mental illness for some time before killing his mother.

Asked what gave him the impression, the 18-year-old said, "He showed signs of mental illness when he returned from the war against Boko Haram. At times, he would be smoking Indian hemp in the house."

Following these killings by soldiers, especially by those on the battlefield, the Psychological Counselling Unit, established by the DHQ, initiated new strategies to curtail the menace.

The Director, Defence Information, Brig Gen Onyema Nwachukwu, said the PCU was established following challenges being faced by soldiers.

In an interview with one of our correspondents, he said, "I must say the Malam Fatori incident is a very disheartening and disturbing one. Investigations have commenced to unravel the reasons for the soldier's action.

"Not to pre-empt ongoing investigations, however, it may suffice for now to say that having come to the realisation of these challenges, the armed forces in 2015 established a Psychological Counselling Unit in the North-East theatre of operations. Psychologists have been deployed to cater to the mental health needs of troops in the theatre.

"Psychological assessments are conducted by psychologists using survey instruments, which are routinely forwarded to units through their respective medical facilities, and they are to be completed by personnel. These instruments border on identified mental health challenges faced by troops in the theatre. Referrals to mental health facilities outside the theatre are also granted when recommended by the professionals."

The PCU has the responsibility of deploying mental health experts to manage anxiety, depression, trauma and suicidal tendencies among the troops, particularly those battling insurgency.

Top DHQ sources told one of our correspondents in separate interviews that the new strategies deployed to tackle a spate of suicides, friendly fire and other such actions among troops included increased deployment of military psychologists to assess the emotional and psychological well-being of troops and counsel them.

One of the sources said, “We identified three fresh steps – the first is more deployment of psychologists to the theatre of operations and intensified visits to troops’ locations for mental counselling and assessment.

“This is followed by preparation of reports to unit commanders on those who have identified mental cases and in need of special attention.

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“The second step being taken by the DHQ is to ensure daily ward rounds for troops on admission in hospitals as some of them have even lost their body parts. Don’t forget that despite their training, soldiers are first of all human beings. We believe that on account of what some of them have gone through, they are now subject to depression and when you are depressed, anything can happen.

“The third step is mental health debriefing for the new troops trained at the Nigerian Army Special Forces School, Buni Yadi, Yobe State. These strategies are being reviewed by the Psychological Counselling Unit in the North-East and may lead to the adoption of new measures to curb the rising mental disturbances and suicide among troops.”

A senior army officer also told *SUNDAY PUNCH* that the DHQ was worried about suicide cases on the battlefield.

The source said, “Post-traumatic stress incidents and anger recorded among troops are more frequent than what is reported and it is quite disturbing for soldiers and military hierarchy. From time to time, you find one soldier or another showing signs of mental illness at the theatre of operations. Soldiers who can kill one another at will can easily kill civilians and kill themselves due to slight provocation. So, we are alarmed and we have a serious situation on our hands.

“The authorities understand that due to the operational environment, some soldiers over time manifest some physiological or emotional breakdown. These conditions may be in the form of anxiety, depression, trauma and stress-related concerns in aspects of post-traumatic stress disorder, commonly known as PTSD, and acute stress as well as psychosomatic complaints.



“It could also manifest in the form of suicidal ideation and behaviour. Sadly, these are the physiological side effects of war. That is why military psychologists now conduct daily ward rounds for troops on admission to prevent suicide and other erratic behaviours.

“Mental health debriefings are also conducted for troops during training at the Nigerian Army Special Forces School, and on completion of their tour of duty in the theatre during the induction phase.”

The source said the briefings border mostly on issues around trauma, adjustment, family reunification and relationships, coping and resilience building and substance abuse.

### **Disturbing rate of suicide, mass shooting among soldiers**

On September 23, 2018, a soldier was reported to have opened fire at a military facility in the Giri area of Abuja, shooting at a colleague, injuring him before shooting himself dead.

The injured soldier was rushed to the Defence Headquarters Medical Centre in Abuja.

During the same month, a Staff Sergeant attached to the 192 Battalion in Gwoza, Borno State, was said to have killed his colleague and injured four others before killing himself.

On November 12, 2017, there was confusion in Chibok community, Borno State, after a Sergeant, Silas Ninyo, shot dead a Captain, four civilians and then killed himself.

Ninyo, 93NA/36/2608, reportedly killed the Captain identified only as Mani (NA/14430) and others, after a heated argument at a military checkpoint in Chibok.

In 2014, some soldiers opened fire on their commander, Major General Ahmed Mohammed, at Maimalari Barracks in Maiduguri after some of their colleagues were killed. The officer, however, escaped unhurt after the soldiers shot at his car.

The soldiers were said to have blamed him for the killing of their colleagues in an ambush by Boko Haram.

Security experts have on several occasions pointed that the soldiers were overwhelmed by their deployment in most states to tackle banditry, kidnapping, farmers-herders clashes and Boko Haram insurgency.

### **Military to review troop rotation**

Meanwhile, investigations by *SUNDAY PUNCH* revealed that one of the plans by the military to check suicide incidents among soldiers was to ensure regular rotation of troop to reduce trauma traceable to a lack of family unification and relationships.

A military officer told one of our correspondents on condition of anonymity that overstaying on the battlefield for soldiers could be counterproductive.

He said, “Overstaying is not good for the morale of soldiers because it has psychological effects on them. It is also partly responsible for the suicide and mass shooting we witness from time to time. When you kill people every day, it looks like a normal thing to kill, and at any slight provocation such a soldier might be tempted to pull the trigger, regardless of who is hurt and you could see that some even end up killing themselves.

“There are people who have stayed for five years and more, whereas it shouldn’t be more than two years at a stretch. There is no rule that says two years, but if you look at the psychological effect, that is about the right approach to it, so you can have refreshed soldiers on the field.”

The source said the morale of troops would be dampened because of the outdated arms and ammunition they are given to fight the heavily armed insurgents, losing their colleagues to the enemies, and how the families of slain soldiers are being treated.

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“All these have, without doubt, traumatised our colleagues and some of them are battling depression already. Another example is the overseas education being canvassed for repentant Boko Haram fighters, which is a counterproductive move. No soldier would be happy about that development, regardless of the fact that it has not been implemented. It is very sad, and these are the little things that get soldiers angry.”

But a top army source said there had been no time frame for the rotation of the troops fighting against Boko Haram in the North-East.

He said, “On whether there is a timetable for troop rotation or if there is duration, there is no time frame. However, there are provisions where soldiers are allowed to go on passes whenever the need arises.

“Some of them are also allowed to go on leave. But the rules are strict because we are fighting a war and the troops are not even sufficient to fight in all the enclaves of Boko Haram and we are to defend the territorial sovereignty of our country.”

Another military source said, “I cannot speak on the longest duration anyone in the North-East has stayed. It depends on the individual. It is not everyone who has duration. Military rotation has no time frame that says you must rotate people.

“Yes, a long stay can lead to trauma and can cause mental tendencies among troops, but if you allow for rotation, the insurgents may start winning because we also need a lot of experienced troops to win this war.”

Borno State Governor Babagana Zulum, whose state has been the worst-hit by the insurgents, a few weeks ago called on the military to recruit 100,000 additional soldiers and technology to win the war against Boko Haram.

Zulum made the call because he believed the troops fighting insurgency were not enough.

### **Troops at risk of depression over long stay on battlefields –Medical, security experts**

Meanwhile, the President, Nigerian Medical Association, Dr Francis Faduyile, said the soldiers on the battlefield needed psychological attention given what they go through.

In an interview with one of our correspondents on Thursday, he said, “It has been established worldwide that many of the soldiers at the war front could experience post-traumatic depression after leaving the battlefield.

He added, “Ordinarily, going to war and seeing your friend or people you fought together with dead can lead to depression, and that is why in many war situations, soldiers and other military officers are given psychological treatment.

“Therefore, I think this is one of those things that Nigerian Army should be able to fully institute or institutionalise if it’s not yet in place so that they can be assessing soldiers at the war front because it (the war) has a lot of psychological and emotional impact on them.”

Also, a renowned security management expert, Mr Chigozie Ubani, said keeping soldiers on the battlefield for a long time could trigger depression, adding that the suicide incidents had proved the troops were beginning to suffer serious fatigue, physical, mental and emotional stress.

He said, “A soldier at the theatre of conflict shouldn’t spend more than nine months at the theatre of war at a time before replacement. Tactical officers and operational heads could spend more than that but not the troops on the battlefield.

“When a man stays there for so long and he hasn’t seen his wife, children or parents, he begins to have serious distractions that could cause serious depression. It’s always advisable that after a period of time, they are brought back and new energy is injected into the theatre. That way, you don’t have a man whose colleagues have been killed or wounded by the enemies and he begins to see himself as the next target.”

He said the suicides and discussions about recruitment into the army had shown the war was taking its toll on the soldiers.

According to Ubani, soldiers on the battlefield who complained about poor and outdated equipment in the past could have low morale when they see that their firepower does not match that of the enemy.

He added, “When you say these things, it looks like you are trying to expose or downgrade your own armed forces but the equipment being used by our troops is not adequate. So, it’s a gamut of challenges. But chief among them is that many of them have overstayed; some of them should have psychological or psychiatric evaluation.

“If you are licensed to kill as a soldier or a security officer, when you kill enemies one after the other, at some point, you should undergo some levels of therapy to be emotionally stable to continue.

“Therefore, every security officer should periodically be subjected to psychological and psychiatric analysis and evaluation to enable the in-house medical experts to know the mental and emotional state of those handling security operations. This means that psychological and psychiatric evaluation should be part of the anti-insurgency war.”

The security expert also said the welfare and remuneration of the soldiers fighting the war should be looked into.