

Full Length Research

Castration Options for Persons with Special Needs in Nigeria

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Abstract

This paper examined castration options for persons with special needs. The origin/history of castration and the various types of castration were outlined. More so, the reasons for castration were also highlighted. The sexual and reproductive rights of persons with special needs were discussed. Finally, conclusion and recommendation was proffered in terms of providing legislation and policies concerning the sexual and reproductive rights of persons with special needs in Nigeria.

Keywords: castration, persons with special needs, origin

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INTRODUCTION

On January 23rd 2019 the Discrimination against Persons with Disabilities (Prohibition) Act, 2018 was signed into law after nine years of relentless advocacy by disability rights groups and activists. However, this group of persons still faces a number of human rights violations that stems from social, religious, cultural etc dimensions. Castration over the years has been an option for persons with special needs due to the severity of their disabling conditions. This alternative is usually recommended by health practitioners or forcefully carried out by parents, guardians or caregivers of persons with special needs. For instance a child with severe mental retardation or a very aggressive child with special needs. Castration can be described as any action, surgical, chemical or otherwise by which a male loses the functions of the sexual organs. Similarly, to castrate is to remove the testicles of a male animal or person (Oxford Advanced Learners' Dictionary, 2010).

Castration is done in both sexes (male and female) but males are more castrated in our society. In the case of the woman, female genital mutilation is mostly practiced.

However, she can still enjoy sexual pleasures but cannot reproduce. In male folks, castration involves the total removal of all male genitalia (including the testes) and this renders him totally sterile. In addition it affects the individual psychologically and mentally.

Aiyeloso (2001) defines persons with special needs as exceptional persons, children, youths and adults with one form of disability or learning difficulty or the other such as persons with hearing impairment, visual impairment, mental retardation, with other health and physical disorders, multiple disabilities, gifted and talented who because of the disabilities or impairments need special services in order to live a useful life in the society. Because of the vulnerable nature of these individuals their rights are often being tempered with. Castration as an option for persons with special needs is an infringement of their human rights and should be totally discouraged as everybody has the right to live the condition notwithstanding. It has been observed that castration has always been an option for persons with mental retardation as compared to other categories of persons with special needs.

According to the International Disabilities Alliance

(2010), the sexual and reproductive rights of persons with disabilities have traditionally been denied, ignored or at best misunderstood by medical and health professionals, policy makers and the wider society. As a result of this, persons with special needs have frequently been considered genderless or asexual. This paper therefore examines castration as an option for persons with special needs in Nigeria.

HISTORY (ORIGIN) AND FORMS OF CASTRATION

Castration has been in existence since biblical times and human history when eunuchs were utilized to guard women's quarters or act as chamberlains'. In Matt 19:12 and I quote "some are born eunuchs, some have been made eunuchs by others, and some choose not to marry for the sake of the kingdom of heaven. Castration should be the choice of the individual concerned and should not be done forcefully.

Similarly, Indiana in 1907 became the first state to pass an involuntary sterilization measure based on eugenic principles. This law required the sterilization of inmates of state institutions who were insane, idiots, imbeciles, feebleminded, convicted rapists or habitual criminals. This procedure had to be recommended by a board of experts which was determined by each state. By 1931, 30 states had passed involuntary sterilization measures. Some of these laws applied to a very wide range of "defective", including "sexual perverts, drunkard, epileptic and diseased degenerated persons (Batchelor, 2001)

Castration of sex offenders has been in existence since the early 20th century. Europe and United States of America have passed castration laws against sex offenders and Denmark is the biggest user of castration as against sex offenders this tradition is as a result of research studies from this nation (Derek. 2001). Similarly, in Nigeria as other African countries, slaves and guards in chiefs' palaces in ancient times were castrated to prevent them from sexually harassing the wives and daughters of the chiefs. It has always been an option for male slaves and house helps in royal families. This serves as a punishment or as a protective measure in avoiding cases of rape or sexual assault of female adults in the royal family. This was practiced in Kogi state and other parts of northern Nigeria.

In the past 10 years, the discussion of sterilizing the mentally retarded is no longer in a genetic context. The main issue is how to protect the incompetent person and the right of that person to be sterilized. Castration should only be an option if convinced that the operation will benefit the individual with special needs. Just like persons with special needs, slaves of those days had no fundamental human right as it was. It is forcefully done coupled with inhuman treatments with no anesthesia administered during the process. They were forced to

bear the pain that accompanies the castration process. This is in contrast to what is practiced in other countries of the world where castration options is only sex offenders.

There are various forms of castration as outlined by Anderson (2015) and Aremu (2012) which includes the following:

- (A) Chemical Castration: In this case, regular injections of anti-androgens are administered to the persons undergoing the procedure. This type of castration is less painful and the risk of infection and attendant death is minimal.
- (B) Physical (Surgical) Castration: This is normally done by quacks but can also be performed by a doctor. A very sharp object or razor is used to chop off both the penis and testicles; thereafter oil is applied to the wound. A lot of blood is lost due to the nature of operation. The operation also causes immense pain as easily prone to infection this is because most times the objects for operations are hardly sterilized.
- (C) Horse hair castration: In ancient times, the processes used for castration was to tie the penis and scrotal sac tightly with a hair from a horse's tail. The idea behind this is that when both the penis and scrotal sac are tightly tied, the process stop blood supply to both organs and thereafter they would degenerate and fall off. This process follows a very long duration of time and very painful, but the slaves in those days including persons with special needs had no choice.

REASONS FOR CASTRATION

Castration option carried out without medical advice is an infringement on human rights especially if carried out without the conscience of the individual. Individuals with special needs irrespective of sex, race, age nationality and educational/socio-economic background should not be discriminated against and avoid infringement of their basic human right including right to sexual and family. This is because sex is one of the basic human needs of man. However, in some countries castration involving the removal of all male genitalia was seen as the same as a death sentence. Also in some communities, person with severe mental problem who are prone to attacking and attempting to rape the female folk are castrated to keep them in check. Similarly temporary chemical castration is also carried out as a punishment and preventive measures for several repeated sex crimes such as rape or other sexually related violence of violent and aggressive persons with disability similar to seclusion.

Obviously, there are some instances where castration is the only alternative for persons with special needs this option should only be allowed based on medical

recommendation on the basis of the individuals health condition. For instance, if a male person with special needs is diagnosed as suffering from a health problem such as cancer of the testes, prostate cancer or cervical cancer and ovarian cancer in the case of a woman, the best option is total removal of the affected body part in order to save the life of the individual concerned.

Basically as enumerated by Wilson and Roehrborn (1999), persons with special needs are castrated based on the following reasons.

1. Medical reasons for castration: Some medical conditions may require the individual to be castrated e.g. testicular cancer, ovarian or cervical cancer and prostate cancer.
2. Castration as a preventive measure: Persons with special needs especially severely mentally retarded and the like are usually castrated in order to avoid a replication/reproduction of their kind, a superstitious belief that if a person is mentally retarded, for instance, there is that tendency that he/she will give birth to a child with same problem. Castration in humans has been proposed and sometimes utilized as a method of birth control in certain poorer regions.
3. Castration as a punishment: In ancient times, after battle winners castrated their captives and seize their power. This practice was used by the winning side to torture or demoralize their enemies. According to Piyush (2013), it was also employed to extinguish opposing male lineage and thus allow the victor to sexually possess the defeated groups' women.

SEXUAL AND REPRODUCTIVE RIGHTS OF PERSONS WITH SPECIAL NEEDS

Persons with special need have the same sexual and reproductive health needs as any other person in the society. Persons with disabilities have the right to protection against discrimination as well as full and equal participation and freedom to enjoy all human rights. They are often deprived of their right to independent living. The federal ministry of health and a wide variety of stakeholders put together a comprehensive document to provide a policy direction to the government, civil society, organized private sector, disability groups etc on how to deal with reproductive and health concerns of persons with special needs especially women and girls (Federal Ministry of Health, 2018).

Article 23 of the International Disability Alliance (IDA, 2010) on respect for home and family states the elimination of discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships to ensure that persons with disabilities exercise their right to the following

a) Marry and found a family on the basis of free and full consent,

- b) Decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning education and the means necessary to enable them exercise these rights are provided,
- c) Retain their fertility on an equal basis with others (including children with disabilities),
- d) Adopt and receive appropriate assistance in the performance of their child-rearing responsibilities.
- e) Receive early and comprehensive information, services and support for children with disabilities and their families
- f) Not be separated from their child on the basis of a disability of either the child or one or both parents.
- g) Ensure that where the immediate family is unable to care for a child with disabilities, every effort is undertaken to provide alternative care within the wider family and failing that within the community in a family setting.

CONCLUSION AND RECOMMENDATIONS

Castration of persons with special needs should not be an option unless medical advice and recommendation is sought which should be based on health condition only. It is important to note that everyone has the right to enjoy sexual and family life irrespective of his/her special needs. Therefore castration should be a matter of choice for everyone (not even a person living with a disability). Therefore, castration should not be considered as an option for persons with special needs in Nigeria. To ensure this if done, there is need to ensure that the national Policy on Sexual and Reproductive health and rights of persons with disabilities is fully implemented in Nigeria in order to achieve this goal.

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