

Letter to the Editor**TERRORISM AND DISABILITY: ANY RELATIONSHIP?****Miracle Ayomikun Adesina^{1,2}, Kehinde Kazeem Kanmodi^{1,2*}**¹Cephas Health Research Initiative Inc, Ibadan, Nigeria.²Mental and Oral Health Development Organization Inc, Birnin Kebbi, Nigeria.***Correspondence:** Dr. Kehinde Kazeem Kanmodi; +234 703 232 9156; kanmodikehinde@yahoo.com**Keywords:** Terrorism, Disability, Relationship, Association.**Cite this article:** Adesina MA, Kanmodi KK. Terrorism and disability: Any relationship? Yen Med J. 2020;2(3):7–8**Dear Editor,**

Terrorism is a global health problem, which also affects the political, economic and social aspects of society and concerns all continents of the world.¹ Fernando Reinares beautifully captures terrorism using these three statements: 1) terrorism is an act of violence which produces widespread disproportionate emotional reactions e.g. fear and anxiety which are likely to influence attitudes and behaviours; 2) the violence is a systemic one, unpredictable and is usually directed against symbolic targets; and 3) the violence conveys messages and threats in order to communicate and obtain social control.²

Disability is a condition affecting about 1 billion persons or 15% of the world's population.³ Disability can be described as an umbrella term encompassing impairments, activity limitation and participation restriction.⁴ The three key terms used in describing disability are defined as follows: 1) impairment is a problem in body structure and function; 2) activity limitation is difficulty experienced by an individual in carrying out an action or task and 3) participation restriction is problem encountered by an individual in real life situations.⁴ Almost all humans will at one moment or the other be temporarily or permanently disabled. Disability is also a global health problem affecting the political, economic and social aspects of the human society; in fact, it is also an issue of concern in all continents of the world.³

What is then the relationship between these two global problems (i.e. terrorism and disability)? Well, there exists a unidirectional relationship. Terrorism is a major cause of disabilities.⁵⁻⁹ In 2016 alone, about 25,673 persons lost their life's to terrorist attacks only. This is a sad situation. The death of these victims of terrorism would definitely have great negative health

consequences on the people close to them (such as siblings, spouse(s), children, parents, etc.)⁵ For instance, their deaths can lead to mental disorders like anxiety, depression, etc., among their loved ones and/or dependents.⁷ Hence, in this way, we could say terrorism is a potential and indirect cause of mental disability. Among those who narrowly survived from the death attacks from terrorists, many of them are not spared from mental disorders. Some of them could experience post-traumatic stress disorder (PTSD), specific phobia, anxiety disorders or other forms of mental disorder.⁸

Terrorism is also a leading cause of physical disability. In some regions that are devastated by terrorist attacks, a lot of individuals had lost body parts due to the attacks, rendering them physically disabled. Furthermore, visual and hearing disability can also be caused by terrorist attacks as well. The explosions and gun fires at terrorist-operating zones may cause civilians to lose their sight and/or vision.⁹

Logically, disability is usually not a direct cause of terrorism. Hence, we could generally say that the relationship between terrorism and disability is unidirectional, i.e. terrorism is a cause of disability.

Finally, both disability and terrorism are big global phenomena that are of major concern to all. The government, security personnel and everyone need to work together to combat the issue of terrorism. Victory in the war against terrorism will definitely bring about a decrease in the occurrence rate of disabilities in our societies.

CONFLICT OF INTEREST

Authors have none to declare.

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REFERENCES

1. Terrorism and counterterrorism remain a global issue. Homeland Security Digital Library. <https://www.hsdl.org/?view&did=3579>. Accessed April 27, 2020.
2. Bruce G. Definition of terrorism-social and political effects. *J Milit Vet Health*. 2013; 21(2):26-30.
3. World report on disability: Factsheet. World Health Organization. www.who.int/disabilities/world_report/2011/factsheet.pdf. Accessed April 27, 2020.
4. Mutlu A, Bugusan S, Kara OK. Impairments, activity limitations and participations of the international classification of functioning, disability, and health model in children with ambulatory cerebral palsy. *Saudi Med J*. 2017;38(2):176-185.
5. Iastrebov VS. Terrorizm i psikhicheskoe zdorov'e (mashtab problemy, tolerantnost' naseleniia, organizatsiia pomoshchi) [Terrorism and mental health (problem's scale, population tolerance, management of care)]. *Zh Nevrol Psikhiatr Im S S Korsakova*. 2004;104(6):4-8.
6. Roser M, Nagdy M, Ritchie H. Terrorism. <https://ourworldindata.org/terrorism>. Accessed April, 27 2020.
7. Ghafoori B, Neria Y, Gameroff MJ, Olfson M, Lantigua R, Shea S, et al. Screening of generalized anxiety disorder symptoms in the wake of terrorist attacks: A study in primary care. *J Trauma Stress*. 2009;22(3):218-226.
8. Njenga FG, Nicholls PJ, Nyamai C, Kigamwa P, Davidson JRT. Post-traumatic stress after terrorist attack: psychological reactions following the US embassy bombing in Nairobi: Naturalistic study. *Br J Psychiatry*. 2004;185(4):328-333.
9. Mimran S, Rotem R. Ocular trauma under the shadow of terror. *Insight*. 2005;30(3):10-20.