

PEOPLE IN DIFFICULT CIRCUMSTANCES IN NIGERIA



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Vulnerability and Health Risks of Refugees, Internally Displaced Persons: Strategies of Meeting their Needs for Sustainable

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Development

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Abstract

Human displacement in form of internal displacement and refugee has become a nightmare to the global community's unfolding events in the middle East and Africa leading to increase in the number of internally displaced persons (IDPs) and refugees in the world. The influx of refugees and IDPs presented the problems and challenges of management of refugees and internally displaced persons to the African governments and heads of states which necessitated the intervention of United Nations High Commission on Refugees to take over the management of refugees in West African sub-region. This however has not been able to address the humanitarian crisis posed by the escalating figures of refugees and internally displaced persons. This paper therefore attempted a holistic analysis of refugees and IDPs phenomenon globally with focus on West Africa and Nigeria with emphasis on conceptual clarification of refugees and IDPs, factors responsible for displacement, vulnerabilities of the displaced people, and response plan to manage humanitarian crisis occasioned by the phenomenon of refugees and IDPs.

Introduction

Every century in human existence is characterized by unique challenges that pose grave concerns to personal and community health. The global refuge crisis has reached alarming proportions, whereby a large proportion of the world population of people was forced to abandon their homes and communities because of war, political or religious violence and related threats, including not only those displaced outside their country of

residence but also internally displaced persons, asylum seekers, stateless persons and returned refugees. The Internally Displacement Monitoring Center (2013) observed that internal displacement of persons could be triggered by natural disasters or human induced conflict which leads to violent clashes. Examples of the natural disasters are flooding that occurred in some states in Nigeria in 2012 which resulted in three hundred and sixty two deaths while over two million people across the country were displaced (NEMA, 2012).

Arising from violent clashes are victims of various kinds of injustices or violence confrontations, perpetrated against them by their own government or agents of communal clashes, riots, terrorism, natural disasters, religious conflicts among others. Olukolajo, Ajayi and Ogungbenro (2014) remarked that irrespective of the causes of the displacement, the phenomenon always leaves negative socioeconomic footprints on millions of people worldwide. The flooding that occurred in some states in Nigeria in 2012 resulted in three hundred and sixty two (362) deaths while over two million people across the country were displaced (NEMA, 2012).

There has been an upsurge in the number of internally displaced persons as available statistics shows. The Internally Displacement Monitoring Center (IDMC) accounted that in 1982, only 1.2 million people were IDP in 11 countries. However ,by 1995 there were 20 to 25 million in more than 40 countries almost twice as many as refugees, and by the end of 2012 it rose to 28.8 million.

Internally Displaced Persons/Refugees Conceptual Clarification

According to the 1951 United Nations (UN) Convention relating to refugees, a refugee is defined as a person who owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside of the country of his (or her) nationality

and is unable to or owing to such fear, is unwilling to avail himself (or herself) of the protection of that country (UNHCR, 2006). Ladan (2006) reported that the OAU Convention of 1969 governing the specific aspects of refugee problem in Africa gives a broader definition of the term “refugee” taking account of the most of the root causes of the refugee problem. The second paragraph of article 1 of the OAU Convention state that, the term refugee shall also apply to every person, who, owing to external aggression, occupation, foreign domination or events seriously disturbing public order in either part of the whole of his (or her) country of origin or nationality, is compelled to leave his (or her) place of habitual residence in order to seek refuge in another place outside his (or her) country of origin or nationality.

Internally displaced persons can be seen as persons or group of persons who have been forced or obliged to flee their homes or place of habitual residence in particular as a result of or in order to avoid the effects of armed conflicts, situation of generalized violence, violation of human rights and who have not crossed an internally recognized state border (Deng, 2010). United Nations (2004) defined IDPs as persons or groups of persons who have been forced to flee their homes or places of habitual residence suddenly or unexpectedly as a result of armed conflict, internal strife, systemic violations of human rights or natural or manmade disasters, who have not crossed an internationally recognized border. Iwabukuma (2011) observed that the terminology highlights two core elements of IDPs. The first is that the movement is involuntary in character, and secondly, such movement takes place within national borders.

United Nation High Commission for Refugee (2004) reported that the majority of refugees and displaced persons in Africa are victims of armed conflicts. A small proportion of displaced persons are caused to move by natural disasters such as floods and drought. African states that have the largest numbers of IDPs include: Sudan with the most number at nearly 5 to 6 million IDPs (and 250,000 refugees living in camps in Chad), the Democcratic Republic of the Congo (DRC) with

approximately 2 million IDPs (and 300,000 Congolese refugees in neighbouring state); Somalia with 1.5 million IDPs (and 500,000 refugees in neighbouring states of Ethiopia, Djibouti and Yemen); Zimbabwe with a count of between 590,000 to 960,000 IDPs and many refugees residing in South Africa); Uganda with 869,000 IDPs; Cot D' Ivoire with 709,000 IDPs, Central African Republic (CAR) with nearly 200,000 IDPs, and Kenya with between 250,000 and 400,000 IDPs.

In Nigeria *Boko Haram* insurgency has led to the displacement of huge human population in the affected states. Available information shows that the number of internally displaced persons and refugees associated with the insurgency has been enormous; United Nations Humanitarian. African Refugee Report (2011) stated that countries with most internally displaced persons between November 2000 and May 2011 are: Sudan, 4,000,000; Angola, 3,800,000; Congo Democratic Republic, 1,800,000; Sierra Leone, 1,300,000; Uganda 610,000; Rwanda, 600,000; Somalia, 350,000; Burundi, 1,580,000; Ethiopia, 350,000; Eritrea, 208,000; Cote d' Voire, 319; Liberia, 596,000; and Nigeria, 89,315. As at the end of 2014 it was estimated there were 38.2 million IDPs worldwide, the highest level since 1989, the first year for which global statistics on IDPs were available. The countries with the largest IDP populations were *Syria* (7.6 million IDPs), *Colombia* (6 million), *Iraq* (3.6 million), the *Democratic Republic of the Congo* (2.8 million), *Sudan* (2.2 million), *South Sudan* (1.6 million), *Pakistan* (1.4 million), *Nigeria* (1.2 million) and *Somalia* (1.1 million). (Wikipedia, 2015).

United Nation High Commission for Refugee (UNHCR) reported that no fewer than 1.5 million people have been displaced in the North East region of Nigeria as a result of raging insurgency (Anyadike, 2013). The UNHCR further reveals that some Nigerians have also crossed into neighbouring Cameroon, Chad and Niger in recent times. The plight of these displaced people in their various places of refuge can be best described as critically threatening for the fact that they have been dislocated from their

family and social capital bases. The rising wave of *Boko Haram* insurgency in Northern Nigeria has been largely responsible for the spate of the internally displaced persons (IDPs) in the country in recent times. (Barkindo, Gudaku and Wesley 2013).

Factors Responsible for Displacement

The factors responsible for displacement are broadly categorized into human based violence/terror and natural disasters; associated by underdevelopment, poverty, unequal distribution of wealth, unemployment, ethnic tensions, political and economic subjugation of minorities, intolerance, absence of democratic procedures, natural disasters such as floods, droughts, climatological, geological and hydrological disasters.

An Assessment of the Management of Refugee Rights in Africa

The right of internally refugees and IDPs are highly violated due to reasons that can be attributed to both political and socioeconomic. Although South Africa is praised to have progressive contribution as well as refugee region, the political attitude of the government's agents does not allow the implementation of refugee regime (Odoh, 2015). It has been so difficult for refugees and asylum seekers to turn their basic rights into entitlements. The right to education is just enjoyed by refugees and asylum seekers who are capable to do so at their own expenses. Poor and vulnerable refugees and asylum seekers' education dream cannot be turned into reality. The government of South Africa is reluctant to distribute its resources to refugees and asylum-seekers as the most influential government agents are against such distribution of national resources (Lanzi, 2008).

African states and UNHCR are not dealing squarely in terms of protecting the rights of refugees. This is manifested in the attitudes of the South African Government in many refugee camps in Africa. This is characterized by overcrowded environment where epidemics such as measles, dysentery, meningitis and cholera have been found to be major killers of refugees and IDPs. There are also incidences of nutrition rela

diseases such as night blindness, beriberi, pellagra and scurvy caused by lack of vitamins in the ration supplied, lack of security and safety leading to incidences of rape and sexual violence particularly against women. Also, domestic violence characterizes refugee camps (*UNHCR Report, 2014*).

The policy of self-reliance as a strategy in maintaining and protecting the rights of the refugee had success in Zambia and Uganda as there were attempts to integrate the potential of refugee into national development planning. This is only possible because both countries have expanse of land while in Kenya, refugees are not given rights to participate in the economic life of the country, Kenya government adopted the UNHCR policy of development assistance to refugees but the victims have lived in the camp for over twenty five years without access to work and movement in Kenya (Iwabukuma, 2011). Congo Kinshasa and South Africa each got a failing grade on United States Committee on Refugee and Immigrants (USCRI) refugees report card for not adequately protecting refugees from violence and forcing refugees back across the border Sudan and South Africa scored F for arbitrarily detaining more than 200 refugees and denying them access to court (Odoh, 2015).

Tanzania even made USCRI's worst country for refugee list for not letting refugees leave the camp and not allowing them to seek work. Also in Namibia, a group of 41 refugees from Democratic Republic of Congo received death threats after complaining to Namibian government officials about the unsafe and unlivable conditions at the Osire refugee camp outside of Nambians capitals for the safety of their lives. They fled the refugee camps and were trapped for weeks in the bush between Botswana and Namibia with nowhere to go and no one to help them. There are over 460,000 Somalia refugees living in warehouses and in refugee camps in Kenya and Ethiopia (Odoh, 2015).

Refugees across the continent continue to suffer because governments are not living up to their commitment, the UNHCR report of 2014 showed that much is expected from the African

states in terms of plans and strategies for future refugee management.

Health Risks of Refugees and Internally Displaced Persons

The IDPs remain highly vulnerable, particularly because they lost the protection of their clan, and are exposed to increased risks of suffering human rights abuses. These abuses include among others, forced child labour and sexual and gender based violence. There are also increasing reports that many children and female IDPs are victim of gang rape. Refugees and IDPs are subjected to unacceptable living conditions such as lack of proper shelter, food and potable drinking water, severe malnutrition of children, poor sanitation, lack of education and health facilities as well as severe overcrowding.

Children are more vulnerable as refugees and displaced persons might have lost parents, siblings and other key careers and friends; they may also lose physical items such as their homes. Hence they endure traumatic experiences such as war, destruction of their homes, violent deaths of family and friends becoming separated from family, receiving injury, the arrest of their families, their own arrest, detaining or torturing themselves, forced recruitment into the army or military, rape, grave shortage of food, water or other necessities and even hostilities in their new homeland. Statistics show that in areas affected by the conflict in Sudan, a child under 5 years dies every 3 seconds because they lack simple vaccination and medications, adequate food and clean water (Mooney, 2005). Women are also vulnerable as they could get attacked and subjected to incidence of sexual violence, which could lead to STI diseases and HIV infection which spread more rapidly during armed conflicts and displacement where health services are inadequate or unavoidable.

Specifically, Marton (2004) reported that in Burundi HIV/AIDS was the leading cause of mortality during the crisis with 40,000 killed by the disease in year 2000 alone. Women who flee from their homes in search of sanctuary from violent conflicts too often find that there is no meaningful refuge, they have simply escaped violence in conflict to face a different type of violence in

the refuge camps, these women face particular protection and security risks in refuge camps as well as the challenges of heading households while suffering from their disadvantaged status as women.

Apart from the challenges faced by displaced persons in general, women, girls and young population face the extra challenge arising from their vulnerability, war situations, turn life into a "living hell" for millions of women and children in the sense that atrocious crimes are committed against their dignity and liberty. They are sexually exploited by the armed forces, government officials and even humanitarian aid givers (Korn & Weiss, 2006). In addition to these attacks on their person, they are susceptible to post traumatic stress and debilitating depression. This is made worse by debilitating condition of poverty in which they live. Arrival of refugees adversely impacts infrastructure and development resources. A case in point is Western Tanzania where refugee influx forced refugees to sleep in the classrooms of border-area schools, burning desks as firewood, filling the available latrines and overstretching local health facilities (Iwabukuna, 2011).

As people in dire need of help which often arrives late, refugees helped themselves to anything that would make them survive, even if precariously. The presence of refugee has been associated with an influx of diseases as in Western Tanzania where there were outbreaks of measles, high fever, malaria and intense dysentery, skin diseases like scabies and worms (Iwabukuma, 2011). However, such association could be spacious especially because the area had epidemics of these diseases before refugees arrived in: like all other migrants, refugees bear the blame about things for which they are hardly responsible. Owing to the escalation of *Boko Haram* and other violent activities in Nigeria, IDPs camps are scattered all around the affected states and regions. Following the continued attacks in different parts of Borno and Adamawa states in which over 2,053 persons have been reportedly killed since January 2014 by the insurgent *Boko Haram* group, thousands of local people have fled their homes to neighbouring states of Gombe, Bauchi,

Taraba and the Southern parts of Adamawa and Borno States putting more stress on the already strained resources of the host states and communities (*United Nation's office for the Coordination of Humanitarian Affairs, 2014*).

Pollution is another environmental problem occasioned by displaced persons. In their attempt to subsist at all costs, displaced persons deliberately or inadvertently pollute surface water, in the process giving rise to infectious diseases that threaten both human life and wildlife (Barnes, 2004). In response to the IDP influx into Yola metropolis, the Adamawa State Emergency Management Agency (ADSEMA) opened an IDP camp at Children's Home (Karewa) on Sunday 24 August 2014 registering 384 IDPs, on September 3. Another IDP camp was opened at NYSC orientation camp in Girei LGA, and as September 27, ADSEMA and Red Cross had registered 4,236 IDPs with daily registration of 100 IDPs while 66,792 IDPs living with host communities in Yola North Girei Yola South, Gombi and Maiha Local Government areas were also registered. The camps were so over populated that IDPs were accommodated in Emir's palace, mosques and churches.

However, the state/national emergency management agency (S/NEMA) Nigeria Red Cross, Federation of Muslim Women in Nigeria (FOMWAN) *Jamaatu Nasrul Islam*, (JNI) and other agencies supporting the IDPs in various camps there were still in need of gaps to fill to alleviate the challenges that were faced by the refugees and IDPs; such as inappropriate nutritional supplement/feeding for children, pregnant and lactating mothers, coupled with limited food aid that has reached over 82,831 IDPs living in host communities of Yola, inadequate water supply, treated mosquito nets, hygiene kits (sanitary pads and delivery kits). Indiscriminate waste disposal, limited WASH support, poor management of waste and practice of open defecation were observed in the IDPs camps as well as inadequate health facilities such as essential drugs, functional ambulance, absence of antenatal care.

Strategies for Managing IDPs and Refugees

The very first step to manage human displacement is by addressing issues leading to displacement in the first place by ensuring that IDPs and refugees crisis does not arise at all. In view of this, effort must be made to manage and reduce the environmental disaster, and embark on alternative conflict resolution mechanisms built on dialogue to address intra and international conflicts. To handle the already existing cases of displacement and future ones should they arise, the understated points response plan distilled from various studies cutting across Africa and the Middle East where human displacement is common are central to effectively managing the plight of the displaced population.

Shelter Intervention

IDPs generally live in open spaces like stadiums, open fields, schools and make shift house like under tents and canopy. They therefore, lack access to land and construction of protective walls for their housing. There should be a renewed efforts to provide permanent shelters for IDPs upon return as well as providing land and housing for safe resettlement.

Improving Food Security and Essential Items

Malnutrition is one of the most notable characteristics of displaced persons. This arises from the physical barriers to access food and inaccessible farm land from their host communities to enable the IDPs exhibit their farming skills to fulfill their household food needs. It is therefore important to make concerted efforts to feed this population by establishing a food bank for every state ravaged by natural disaster and/or violence. This will lead to more coordinated efforts to meet the nutritional needs of these people. The food and agricultural organization, WHO, UNICEF and government agencies as well as NGO in the local communities involved can team up and execute this programme. Research has shown that IDPs express needs in heating, clothing, bedding and blankets. A key recommendation

therefore, is the need to combine nonfood with food items distribution.

Health Response, Water Sanitation and Hygiene

Health needs are prevalent among displaced persons. It is therefore important to involve medical practitioners as volunteers to meet to the health needs of displaced persons with efforts to guarantee their security. Provisions of mobile clinics, first aid service and efficient referral systems must be the focus of meeting the health needs of displaced persons. There's also the need for a clear WASH strategy to increase access to clean water, sanitation facilities and latrines as well as overall waste disposal needs which has strong implications for health and general wellbeing.

Youth Based and Gender Based Programme

IDP youth are seen as a problematic category as many of them tend to rely on drugs as a coping mechanism in displacement, therefore posing as security threats to other displaced people and the host communities due to their illiteracy and lack of skills in meaningful jobs. Hence, there should be training for displaced persons on home based livelihood activities and vocational training for women and the youth. Concerted efforts must be made as well, to protect every right of the child and the right to education which is as equally important to right to life.

Disaster Risk Reduction

Conscious efforts must be put in place to ensure that risk reduction and disaster impact mitigation strategies are put in place and information on what to do in cases of emergency are well communicated to everyone in the displaced persons camps.

Finally, efforts must be consciously geared towards protecting women and children who do not only contribute the largest proportion of displaced persons but also stand the highest risks and are therefore the most vulnerable group. To this end, the following must be considered:

- i. Ensuring greater participation of refugee and displaced women in decisions affecting their security such as mechanisms to improve the reporting of physical and sexual protection problems.
- ii. Establishing of effective mechanisms for law enforcement officers to ensure that abusers are identified and prosecuted for their offences.
- iii. Addressing protection concerns particularly to refugee and displaced women in all aspects of the programmes.
- iv. Children of school age should as much as possible be removed from the threat of armed conflict to protect them from physical harm, for the continuation of their education in an atmosphere that will ensure psychosocial support and a well-rounded development.
- v. Prioritization of protection and assistance needs of vulnerable categories by gathering disaggregated data which will factor in gender and age in order to identify specific needs of women and children.

Conclusion

Neglect on the part of the government at all levels endangering high levels of internally displaced people and greatly affect the countries development, implementing the above suggested strategic management of the refugees and internally displaced persons will reduce their suffering as well as improving their well being. Finally peace and conflict resolution modalities should be put into consideration by all sectors to prevent the advent of conflicts and violence that could lead citizens to be refugees and internally displaced.

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