

Impact of Insurgency on the Livelihood of Internally Displaced Women in Gombe State, Nigeria

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Abstract

The study surveyed the impact of insurgency on the livelihood of internally displaced women in Gombe State, Nigeria. The study was guided by 9 research questions. A sample of 300 women was selected through volunteer Sampling technique from 6 internally displaced persons (IDPs) host communities, that is two communities from each of the 3 senatorial districts across the state. Questionnaire tagged questionnaire for the assessment of impact of insurgency on the livelihood of internally displaced women (QFAIOILEDW) was used to collect data. It was validated by experts in the school of education, Federal College of Education (Technical), Gombe. Reliability coefficient of 0.79 was established using test re-test method. Data collected were analyzed using frequency counts, percentages and ranking ordering. Results of the study revealed, among others, that the internally displaced women are in need of food and empowerment for self-sustainability, that they reduce number of meals per day or restrict consumption by adult in order for children to eat. Based on the findings of the study, it was recommended that counsellors should work in collaboration with religious and community leaders to sensitize those internally displaced women to focus on the future and life beyond host communities.

Keywords: Impact, insurgency, livelihood, displaced, women.

Introduction

For years, the issue of Boko Haram had wrecked unacceptable havoc on some parts of the North-East geo-political zone, particularly Borno State, Yobe State, Adamawa State, Bauchi State and Gombe State. The effect of Boko Haram on the people of the North-East Zone are devastating; their activities include destroying properties worth billions of naira, killing thousands, assassinations, abduction of over 200 Chibok

Secondary School girls, destroying government properties (for example the police stations in most local government areas), destroying banks, schools, houses, markets and a host of other properties. The effect also brought hunger and poverty, as the economy has been broken down; many people were displaced and schools were closed for a very long time (Robo, 2014).

Security is a high priority concept to the State and the State exists to promote that concept (Tiffen, 2009). Security is the prime responsibility of the State (Okocha, 2015). The constitution of the Federal Republic of Nigeria specifically states that “The Security and Welfare of the people shall be the primary concern of the government” (*FRN, 1999*). It is not an exaggeration to state that the constitutional responsibility of Nigerian government to provide security for her subjects has in one way or the other failed due to the inability of government to provide a secure and safe environment for lives and properties. The alarming rate of insecurity in Northern Nigeria as opined by Adamu and Rasheed (2016) has increased tremendously, the crime rate and terrorists’ attacks in different parts of the country is an unpalatable situation.

Insecurity in any environment constitutes threat to lives and foreign investors, and in turn negatively impact human and economic development of such nation. Nigeria, particularly North-East, is in a serious danger; over 350 teachers were killed and over 270 students were kidnapped and held captive in an unknown location. In Nigeria today, many people have been forced into self-exile because the security of their lives is not guaranteed.

The increased incidences of terrorist attacks in the North-Eastern part of Nigeria and series of clashes between indigeneous farmers and cattle herdsman around the North-East and central regions of the country are continuously forcing individuals and families to flee to other parts of the country, creating a high number of Internally Displaced Persons (IDPS). Located in the North-East region of the country, Gombe State is dominated by farmers and cattle herdsman. The conflict, between both groups, over land has contributed significantly to the occurrences of crisis in the region. Added to this, there has been a consistent influx of people fleeing terrorist attacks by Boko Haram in the region. These displaced people were found to seek refuge regardless of the state of the camps where they settled (Tiffen, 2009).

An internally displaced person (IDP) is someone who is forced to flee his or her home but who remains within his or her country’s borders. They are often referred to as refugees, although they do not fall within the current legal definition of a refugee. Internally displaced people are people or groups of people who have been forced to flee or leave their homes or places of habitual residence in particular as a result of or in order to avoid the effect of armed conflict situations of generalized violence,

violations of human rights or natural or human made disasters, and who have not crossed an internally recognized state border (Chothia, 2015).

A person's livelihood refers to their "means of serving the basic necessities of food, water, shelter and clothing of life;" it is defined as a set of activities involving serving water, food, medicine, shelter, clothing and the capacity to acquire the above necessities, working either individually or as a group by using endowments (both human and material), for meeting the requirements of the self and his/her household on sustainable basis with dignity (Oxford dictionary). Insurgency is an organized rebellion aimed at overthrowing a constituted government through the use of subversion and armed conflict (Enjeta, 2016). Impact can simply be defined as a strong influence; in other words, the ability of causing something without any direct or apparent effort (Annan, 2001).

The theoretical framework of this study was anchored on Logo therapy developed by Viktor Frankl in the mid-1930s (Uwe, 2005). Logo therapy, the therapy of meaning, tested in the rigors of concentration camp, offers a philosophy of life. It considers man as a being whose main concern consists in fulfilling a meaning and in actualizing values, rather than in mere gratification and satisfaction of instinctive drives (Mohammed, 1999). Also Rushing and Joe (2014) stated that watching who survive and did not survive, concluded by quoting Friedrich, 1963 "he who has a way to live for can bear almost anyhow." He posited that people who have great faith tend to have better chances than those who have lost all hope (Gokum, 1999). Logo therapy, according to Uwe (2005), postulates a will of meaning. A human being, by the attitude he chooses, is capable of finding and fulfilling meaning in suffering. Frankl believed that without suffering, life cannot be complete because suffering like death, is inevitable (Asplet, 2013).

Logo therapy encouraged personal growth and understanding. Three basic points have been extracted from the nineteen principles of this therapy. They include: life has meaning under all circumstances, even the most miserable one; Our main motivation for living is our will to find meaning in life; We have freedom to find meaning in what we do and what we experience, or at least in the stand we take when faced with a situation of unchangeable suffering. Logo therapy has these assumptions in addition to the principles above; the human being is an entity consisting of body, mind and spirit. Life has a demand quantity to which people must respond if decisions are to be made meaningful. The individual is unique.

Thus, in line with this theory, the internally displaced women that survived in the camp/host communities did so by focusing on the future and the meaning of life beyond the camp/host communities. For instance, internally displaced woman/women

who have just lost her husband or their beloved ones are not to sink in misery. Logo therapy strongly encourages them to rise and be strong. Also they are to focus on the future and the resources hidden in them to find meaning to life.

Statement of the Problem

The displaced persons were assessed to present high levels of need for essential services for health and wellbeing. Living in over stretched host communities and poorly maintained make-shift camps amidst hunger, poor sanitation and hygiene, they are at the risk of deteriorating health outcomes. According to Lenshie (2014), “Women are at higher risk because they have other special needs like nursing mother’s needs, pregnant needs women of reproductive age needs. These categories of women in addition needed more than others”.

Oyewole (2016) further stated that when people are alive, they live in harmony, unity, in love and closeness, but when death comes and takes one of them, it almost become unbelievable for the other. By our own it seems as if the rate of men dying is more than that of women. Where the man (husband) dies, the woman (wife) is left alone mourning for the death of the husband as well as thinking of the work load of taking care of the children (if any). A husband is taken as umbrella to the wife as opined by Lenshie (2014). When the umbrella is removed, the woman is in trouble and confusion to the extent of not knowing where to start a new life. With the general hardship and world economic meltdown, life is very difficult even for families that both the husband and wife are alive and even working let alone a widow, a single parent. This study therefore was designed to examine the impact of insurgency on livelihood of Internally Displaced Women in Gombe State.

Objectives of the Study

This study was therefore designed to:

1. Identify the basic needs of Internally Displaced Women in the camp/host communities in Gombe State.
2. Identify the Food Security Coping Strategies Exhibited by the Internally Displaced Women.
3. Identify the Water Sources and Availability to the Internally Displaced Women.
4. Identify the Water treatment methods exhibited by the Internally Displaced Women.
5. Identify the Sanitary and Hygienic Disposal of the Internally Displaced Women in Communities in Gombe State.
6. Identify the Health Challenges faced by internally displaced Women in Gombe State.
7. Identify the Market access of the internally displaced women in Gombe State.

8. Identify the perceptions of price of Commodities exhibited by Internally Displaced women in Gombe State.
9. Find out the sources of livelihoods of Internally Displaced Women in the camp/host communities.

Research Questions

The following nine research questions guided the study:

1. What are the basic needs of internally displaced women in the host communities in Gombe State?
2. What are the food security coping strategies exhibited by the internally displaced women?
3. What are the water sources and availability to the internally displaced women?
4. What are the water treatment methods exhibited by the internally displaced women?
5. What are the sanitary and hygienic disposal of the internally displaced women in communities in Gombe State?
6. What are the health challenges faced by internally displaced women in Gombe State?
7. What is the market access of the internally displaced women in Gombe State?
8. What are the perceptions of price of commodities exhibited by internally displaced women in Gombe State?
9. What are the sources of livelihood of internally displaced women in the host communities in Gombe State?

Methodology

The design used in this study was survey research design, to investigate the impact of insurgency on the livelihood of internally displaced women in Gombe state Nigeria. The population of the study is the internally displaced women in the IDP camps in Gombe state Nigeria. The study used a sample of 300 women selected through volunteer sampling technique; 50 internally displaced women were selected from each of the host communities across the State. Gombe State Emergency Management Agency (SEMA) (2016) gave the population of internally displaced persons from the region, across the state's eleven local government areas as 41,735 internally displaced persons and a total number of 7,860 households.

The research instrument used to collect data was a questionnaire tagged Questionnaire for assessing the impact of insurgency on the livelihood of internally displaced women (QFAIOILEDW) designed by the researchers. It consisted of two sections, A and B. Section A was on demographic data of the respondents and Section B contained statement on the problems and general issues of the internally displaced women. The instrument was validated by two experts from the School of Education, Federal

College of Education (Technical) Gombe. The reliability of the instrument was established using Pearson Product Moment Correlation Coefficient (PPMCC) where a reliability coefficient of 0.79 was found. It was therefore considered adequate and adjudged appropriate for the study.

To administer the questionnaire, researchers visited the following communities identified as some of the major places where internally displaced persons were found: Dukku, Malam Sidi in Kwami, bye pass area in Akko, Kwadon in Yamaltu-Deba, Dogon Ruwa in Billiri and Sabon Layi Awak in Kaltungo. The researchers collected an introductory letter from the School of Education, Federal College of Education (Tech.) Gombe and presented to the Executive Secretary of the State Emergency Management Agency (SEMA) seeking for permission and assistance to access the IDPs in the above mentioned host communities. Two (2) research assistants were employed and trained on how to assist the women in filling the questionnaire. At each of the host communities, the researchers first identified with the leadership structure of the communities by explaining to them the purpose of the study and that participation was voluntary; and that information required was for academic purpose and would be treated as confidential.

The data collected was analyzed using frequency counts, percentages, and rank ordering. The responses of the subjects were ranked to give a pictorial view of the respondents' rating of each item on the instrument.

Presentation of Results

Research Question One: What are the Basic Needs of Internally Displaced Women in the host Communities in Gombe State?

Table 1 revealed that lack of enough food, good food and physical accessibility to food market were the major food challenges while lack of food markets, cooking facilities are not common. Therefore, the basic need of the internally displaced women in Gombe state are that of availability of food, food market and cooking facilities.

Table 1: Basic needs of women IDPs in Gombe State

S/N	Challenges (food)	Frequency of response	Percentage (%)	Rank
1	No food market	-	-	-
2	No good food	23	7.67	2 nd
3	No physical access to market	2	0.67	3 rd
4	No enough food	274	91.33	1 st
5	No cooking facilities	1	0.33	4 th
6	No cooking fuel	0	0	-
	Total	300	100	

Research Question Two: What are the food security coping strategies exhibited by the IDP Women?

Table 2: Food security coping strategies of women IDPs

S/N	Coping strategies	Frequency	Percentage (%)	Rank
1	Rely on less preferred and expensive food item	9	3	4 th
2	Rely on help from family, friends and relatives	13	4.33	3 rd
3	Purchase on credit	1	0.33	6 th
4	Limit portion/size of meal/reduce number of meals per day	158	52.67	1 st
5	Restrict consumption by adults in order for children to eat.	115	38.33	2 nd
6	Engage in begging	4	1.33	5 th
7	Others	-	-	-
	Total	300	100	

Table 2 revealed that the major food Security coping strategies applied by the internally displaced women included limiting the size of food or reduction of number of meals per day, restricting consumption by adults in order for the children to be satisfied and relying on help from family, friends and relatives. Other strategies were relying in less preferred and less expensive food items, sometimes engaging in begging and purchasing food items on credit.

Research Question Three: What are the water sources and availability to the women in IDPs?

Table 3: Water source and availability to the women IDPs

S/N	Sources of water	Frequency	Percentage (%)	Rank
1	Public tap	23	7.67	5 th
2	Borehole	99	33.00	2 nd
3	Well water	120	40.00	1 st
4	Spring	3	1.00	6 th
5	Pond, stream & river	25	8.33	4 th
6	Purchase from vendors	30	10.00	3 rd
7	Sachet/bottle water	-	-	
8	Others	-	-	
	Total	300	100	

Table 3 revealed that the major sources of water accessed by the women IDPs in the host communities were from well, bore holes and purchasing from vendors where as other sources accessed by the internally displaced women were public tap, pond/stream or rivers and spring in the host communities across the state.

Research Question Four: What are the water treatment methods exhibited by the IDP Women?

Table 4: Types of water treatment methods used by women IDPs

S/N	Type of water treatment	Frequency	Percentage (%)	Rank
1	Bleach aqua tab	36	12	4 th
2	Boiling	86	28.67	2 nd
3	Filtration	41	13.67	3 rd
4	Stream through cloth	28	9.33	5 th
5	Others	109	36.33	1 st
	Total	300	100	

Table 4 revealed that most of the internally displaced women do not treat their water before using it while some of the internally displaced Women treat their water by boiling, filtering, using cloth to filter stream water and bleach/aqua tabs.

Research Question Five: What are the sanitary and hygienic disposal of the IDPs women in communities in Gombe State?

Table 5: Sanitation and hygiene (waste disposal by internally displaced women in communities in Gombe State)

S/N	Latrines	Frequency	Percentage (%)	Rank
1	Open field	99	33.0	1 st
2	Bush	86	28.6	2 nd
3	River	3	1	7 th
4	Family latrine	60	20.0	3 rd
5	Communal latrine	5	1.7	6 th
6	Potty	12	4.0	5 th
7	Cat method	35	11.7	4 th
8	Others	-	-	-
	Total	300	100	

Table 5 revealed that the major ways of disposing solid waste by the internally displaced women were open field, bush and family latrine. Other methods include cat method, potty, communal latrine and river defecation in communities across the state.

Research Question Six: What are the health challenges faced by IDPs women in Gombe State?

Table 6: Health challenges to the women IDPs

S/N	Health challenges	Frequency	Percentage (%)	Rank
1	Malaria fever	105	35.00	1 st
2	Typhoid fever	41	13.67	3 rd
3	Ulcer/chest pain	73	24.33	2 nd
4	Hypertension	13	4.33	6 th
5	Stomach upset (ache)	20	6.67	5 th
6	Rashes	12	4.00	7 th
7	Others	36	12.00	4 th
	Total	300	100	

Table 6 revealed that the common health challenges faced by the internally displaced women were mostly malaria fever, ulcer/chest pain and typhoid fever among others such as stomach ache, hypertension and rashes.

Research Question Seven: What are the market access of the internally displaced women in Gombe State?

Table 7: Market Access by internally displaced women

S/N	Types of markets	Frequency	Percentage (%)	Rank
1	Open markets	185	61.67	1 st
2	Local shops	38	12.67	2 nd
3	Kiosks	21	7.00	4 th
4	At home	14	4.66	5 th
5	Other Linked Markets	42	14.00	3 rd
	Total	300	100	

Table 7 revealed that the major markets accessed by the internally displaced women were open markets, local shops and linked markets. Others were kiosk and trade at home.

Research Question Eight: What are the perceptions of price of commodities exhibited by women IDPs in Gombe State?

Table 8: Perception of price of commodities by internally displaced women in Gombe state

S/N	Price of commodities	Frequency	Percentage (%)	Rank
1	High	269	89.67	1 st
2	Low	3	1	3 rd
3	Normal	28	9.34	2 nd
	Total	300	100	

Table 8 revealed that most of the internally displaced women perceived that the prices of the commodities in the market were very high.

Research Question Nine: What are the sources of livelihood of the internally displaced women in the host communities in Gombe State?

Table 9 revealed that internally displaced women relied on assistance from the government and non-governmental organizations, head of household and also engaged in begging as a major source of livelihood (food) whereas other sources such as trading, farming, wages/pension and borrowing are also sources of livelihood to the internally displaced women across the state.

Table 9: Sources of livelihood of internally displaced women

S/N	Source of food	Frequency	Percentage (%)	Rank
1	Farming	35	11.67	5 th
2	Trading/Business	36	12.00	4 th
3	Begging	48	16.00	3 rd
4	Wages/Pension	2	0.67	6 th
5	Assistance from NGOs and Government	91	30.33	1 st
6	Borrowing	1	0.33	7 th
7	Head of house hold	87	29.00	2 nd
	Total	300	100	

Summary of findings

Based on the analysis of the responses gathered, the following have been discovered:

1. There was no enough food in all the host communities visited.
2. The coping strategies by internally displaced women were to limit portion/size of meals, reduce number of meals per day and restrict consumption by adult for children to eat. Even though they have access to markets, there was no enough money, and the prices of commodities were high in the markets.
3. Most of the internally displaced women do not treat their water before use.
4. The major ways of disposing solid waste by internally displaced women was bush/open defecation.
5. The major challenges faced were mostly malaria, ulcer/chest pain and typhoid and lack of job.
6. The internally displaced women relied solely on assistance from the government, non-governmental organization (NGO) and some engaged in begging as a major source of livelihood.

Discussion of findings

The study corroborates that of Cagoco (2002) which shows that majority of households are in dire need of improved sources of drinking water; as their sources of water (well, spring, ponds rivers and boreholes) are not safe for consumption. This is because they are not treated like that sourced from public tap, bottled/sachet water etc. This can pose as a challenge health wise as it can be seen in the table 6, that malaria fever, typhoid fever, stomach ache (upset), and rashes were the major health challenges faced by the internally displaced women and their children in the host communities across the state. This study also corroborates Enjeta (2016) who found that thousands of IDPs face threat of death due to hunger, poor hygiene, poor shelter or diseases.

Lenshie (2014) affirms that open defecation poses a serious threat to human health subsequently leading to significant economic losses. The prevalence of excreta in the immediate environment is usually as a result of unavailability of sanitary facilities or hygiene habits of the population as indicated in table 5. The study re-affirms that of Lemshie (2014) and Oyewole (2016) who reported that most common illnesses such as acute respiratory infections, malaria fever, typhoid fever, cholera, measles, meningitis, Lassa fever, and diarrhea are common among IDPs. The study shows the prevalence of these illnesses was highest in the State. Another study by Robo (2014) shows that the inability of households to meet their basic needs led to high usage of negative coping strategies which has taken a great toll on children and women. Households in Yamaltu-Deba have women and children involved in hard labor and begging.

Conclusion

The study concluded that there was no enough food in all communities visited. The coping strategies by internally displaced women were limiting the number of meals per day and restricting consumption by adults for children to eat. It is also concluded that the major challenges faced by IDPs women were mostly malaria, ulcer, chest pain and typhoid fever as well as lack of jobs. It is equally concluded that internally displaced women relied solely on assistance from the government and non-governmental organizations. They also engaged in begging as a major source of livelihood.

Recommendations

Based on the findings of the study, it is recommended that:

1. There were many host communities that were not recognized by government and the occupants were suffering; citizens should donate anything they can afford as government alone cannot do it, it is our responsibility also to make personal donations of food, drugs, clothes or cash.
2. Social support/counselling and rehabilitation for IDPs should be provided by professionals voluntarily.
3. Services like medical, legal and educational should also be given to the IDPs by professionals at least during annual leave or free periods.
4. Counsellors should work in collaboration with religious and community leaders to sensitize the displaced women that survived in the host communities to focus on the future and the meaning of life beyond the host communities.
5. Counsellors should also strongly encourage the women to rise and be strong, focus on the future and the resources hidden in them to find a meaning to life.
6. Entrepreneurship development is a tool for achieving sustainable livelihood or economic independence among women. It is believed that if the displaced women are exposed to skills and provided with finances, they will be self-

reliant and well sustained. Therefore, the role of counsellors cannot be overemphasized.

7. The counsellors should create the entrepreneurship awareness in the host communities, liaise with the outside job providers, organize guest lecture series and coordinates the different bodies that offer training and finance for the establishment of small scale skill acquisition centres.
8. All hands must be on deck for the displaced women to develop and maintain sustainable livelihood to carry them along. This is because women, who develop small businesses, will form positive attitudes about themselves and their host communities. This in conclusion will lead to self-confidence, self-reliance, and leadership skills entrenched in their lives.

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