

IDPs Camp isn't a Safe Haven: Exploring Violence against Displaced Women and Abortion Liberation in Abuja Nigeria

Sub-theme: Reaching sexual and gender minorities with Sexual and Reproductive Health and Rights information and services

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Extended Abstract

Introduction

In Nigeria, the activities of Boko Haram and other conflicts attack have forced over 2.1 million Nigerians to flee their homes and resulted in living in an unprecedented humanitarian support system called internally displaced persons (IDPs) Camps (Odo et al., 2020). Research has shown that healthcare services are limited during crises, insurgency, and war (Savage, 2021). Generally, women in IDPs faced a lot of reproductive health challenges such sexual violence, rape, molestation and other gender-based violence (Adekeye et al., 2019). This had put displaced women to be left with no choice than seeking available skeletal sexual and reproductive health services from local midwives and patent medicine vendors among numerous sexual and reproductive health needs (Odo et al., 2020). In 2019, Adekeye and others in terrorism and plight of women in IDPs Camp in Nigeria examined the nature of challenges faced by women in IDPs camps and factors responsible for the plight of women, study found that women in IDPs camp faced a lot of challenges which includes hunger sexual exploitation, rape, molestation corrupt practiced among camp officials (Adekeye et al., 2019). In particular, adolescent girls were the most vulnerable, especially in post-conflict abuse (Adejumo et al., 2021).

Globally, adolescent girls constitute a considerable proportion of yearly death caused by abortion, with 15% of all unsafe abortion taking place among under 20 girls who were victims of sexual violence and rape (Bessa et al., 2019). The problem is; majority of those involve in unsafe abortion were victims of sexual violence and displacement. They were faced with emotional and mental depressions that limit their thinking toward seeking emergency contraceptives before pregnancy symptoms occur.

In Nigeria, different scholars had examined sexual violence among the displaced persons but their submissions fail to consider the legal and policy implications that complicated this violence among victims. Similarly, there is sparse literature on sexual and reproductive rights among the minority groups (displaced persons) through access to sexual and reproductive rights. On this premises, this study provides answers to the following questions: What are the experiences of displaced women who were sexually abused? What are the common of reproductive health challenges during their stay in camps? What are the determinants of sexual violence among these vulnerable populations? Would there be a better experience if abortion services are permitted in the camp?

Methods

A cross sectional study design was used for this study. Internally Displaced Persons (IDPs) camps in Abuja were purposefully selected based on security challenge in other camp outside the state capital. The selection of respondents was purposively sampled based on the interest of respondents and language/cultural barriers. The four (4) IDPs camps out of the 10 camps in Abuja were randomly selected using a simple balloting. However, 300 out of 384 sample size were considered suitable for this study using Cochran Sample size determinant formular. The study data was subjected to three levels of analysis. Frequency/percentage, chi-square test and multivariate analysis-using binary logistic regression.

Variable measurement

Outcome variable: Sexual violence aggregated from experience of sexual abuse from partner, camp officers and other men in camp. **Reproductive health challenges:** pregnancy lost, methods of abortion care used, ever experience pregnancy complications, types of complications. Other variables are knowledge of abortion law, age of child at death and other demographic characteristics.

Results

Reproductive Health Challenges (RHC)

The study considered RHC faced among Displaced women in Abuja Camps; more than 61.2% of the women had lost pregnancy through spontaneous abortion/miscarriage while 38.8% had induced abortion. More than 55% of the women who wanted abortion or post abortion care got themselves treated through self-treatment, while 35.9% of them visited health facilities and 9.1% used local herbs. It was found that 4 out of 10 women in IDPs camp had experienced pregnancy complication (42.7%) while 29.7% of them had not and 27.6% were uncertain. The type of pregnancy complication mostly reported among sampled women in camp was still birth (43%), followed by Eclampsia (40.6%) while fewer proportion experienced other complication (14.6%). On knowledge of Nigeria abortion law, about 60% are aware of it while 40% reported they were not aware. It was found that 28.3% of the women reported their husband had forced them to have sexual intercourse with them when they were not willing, more than 59% of them reported opposite sex do humiliate them since they have been in camp. 17% of them reported camp officer has sexually abuse them before and about one-third of the sample women reported other men had sex with them forcefully. It was found that about 40% of the displaced women had experienced at least one sexual violence either from intimate partner or other male individual in the camp.

The factors associated with sexual violence among displaced women, are religion affiliation in camp, especially among Christians (93.6%) compare to Muslim and 18.2% chi-square ($\chi^2=13.77$, $p<0.05$), level of education attainment was associated with sexual violence in camp, 23.8% among women with no formal education, 11.4% with primary and 20.0% with secondary education reported sexual violence ($\chi^2=9.953$, $p<0.05$).

The multivariate analysis showing the factors that were found to influence sexual violence among displaced persons in Abuja. The unmarried women were more likely to experience sexual violence compared to the married (OR=1.24, $p<0.05$). The women who had primary or no education were more likely to experience sexual violence compared to women with at least secondary education (OR=1.94, $p<0.05$). Conversely, there is significant lower odds of reporting sexual violence among women that practices Islamic religion compare to those that were Christians (OR=0.18, $p<0.05$), while the lower odds found in traditional and other religions were found to be statistically insignificant at 5% level of confidence. Other factors with higher odds of sexual violence are pregnancy complication and access to abortion care, details in table 1.

Table 1: Binary Logistics Regression of Women Characteristics and Sexual Violence

Sexual Violence (IDPs)	OR	P>z	95% Confidence
Socio-Demographic Factors			Interval
Age			
15-19year	1.00		
20-29years	0.68	0.280	0.12-0.33
30+	1.10	0.880	0.73-1.32
Marital Status			
Married (RC)			
Single	1.24*	0.016	1.14-1.76
Widowed/Divorced	3.06	0.097	0.82-4.32
Education Status			
Educated (RC)	1.00		
Primary/None	1.94*	0.013	1.85-2.10
Children Ever born			
1-2 (RC)	1.00		
3-5 Children	0.73	0.579	0.24-1.54
6+	1.04	0.95	0.29-1.44
Religion			
Christians	1.00		
Islamic	0.18*	0.002	0.06-0.38
Traditional/Others	0.07*	0.013	0.01-0.02
Ethnic Group			
Other	1.00		
Hausa/Fulani	2.17	0.181	0.70-3.11
Idoma /Tiv	1.51	0.67	0.23-1.98
Reproductive Health Challenges			
Pregnancy Complications	1.34*	0.039	1.21-2.10
Access to Abortion Care			
Self-treatment			
	1.0(RC)		
Visiting health facility	1.10	0.451	0.84-1.44
Used local herbs	2.13*	0.002	1.23-2.65

Source: Field work, 2022.

Discussion of Findings

Nigeria has been finding it increasingly difficult and is almost failing in its task to managing its displaced person (Olagunju, 2006). Obviously, the displacement in Nigeria has become common occurrence in the country, especially in the northern part and few areas in the southern parts. As at 2022, United Nation Refugees Agency's (UNHCR, 2023), reported 44 million people in sub-Saharan Africa are displaced, about 38 million of them had them displaced since 2021. Of this figure, Nigeria, accounting for about 3,300,000 IDPs as of March 2014, tops the list of the three countries with the largest population of IDPs in Africa, followed by Democratic Republic of Congo and Sudan, respectively; an additional 854,000 people in 2022 as against 107,000 recorded at the end of 2021.

This study found that are the incidence of unwanted pregnancy, complication during pregnancy, and sexual violence among displaced women is so terrible. It was found that about 40% of the displaced women had experienced at least one sexual violence in the camp and 61.2% had lost pregnancy through spontaneous abortion/miscarriage while 38.8% had induced abortion. The violence in IDPs Camps ranging from humiliations physical abused before sexual intercourse, even among intimate partners, many were forced into sexual intercourse against their willingness. This found support from the work of Adekeye et al, (2019) that women in IDPs faced a lot of challenges such sexual violence, rape, molestation and other gender-based violence (Adekeye et al., 2019).

In the selected camps, women sampled reported some common reproductive challenges such as loss of pregnancies, self-treatment due to lack of access to health facilities in the camp. Many who had miscarriage or who seek abortion care or post abortion care could not find available access because of legal restrictions of abortion law. About 60% of the displaced women are aware of the law. These had put displaced women to be left with no choice than seeking available skeletal sexual and reproductive health services from local midwives and patent medicine vendors among numerous sexual and reproductive health needs (Odo et al., 2020). Denial of safe abortions care at public facilities had led serious reproductive health challenges - unsafe abortion, suicide and other endangered activities that increase maternal mortality (Bankole et al., 2020).

Conclusion:

Nigeria struggles with managing displaced populations, especially in the north. This study reveals high rates of unwanted pregnancies, complications, and sexual violence among displaced women, emphasizing the need for comprehensive reproductive health services and policies review. It is therefore recommended as follows: access to basic education is very important to every girl child. It is one key strategy for social liberation. That a woman is displaced or under insurgency should not give other people, especially well-meaning society, like camp officers, terrorist, and the likes to abuse them. Consequently, the increasing rate of abuse on IDP camps call for reviewing Nigeria abortion law by given consideration to victim of sexual violence. This would not only put a new hope to vulnerable girl child in IDPs camps, but indirectly reduced the rate of unintended pregnancies, risk of unsafe abortion leading to high maternal mortality. This would surely increase used of contraceptive use and leading to improve maternal health among displaced women.

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