





BPSA Field Report on Research Stay in Northern Nigeria

Research Topic: Access to food security and optimal menstrual hygiene services in fragile environments: The case of women and children living in IDP camps in northern Nigeria.



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Table of Contents

1: Introduction and Motivation	1
2: Local Partnerships and Travel Preparations	1
3: Overview and Implementation of the Research	2
3.1 The Research Problem	2
3.2 The Global Displacement Situation	2
3.3 Women and Children in Forced Displacement	
3.4 Forced Displacement, Food Security and Malnutrition	
3.5 Forced Displacement and Menstrual Hygiene	
3.6 Forced Displacement and Gender-Based Violence	
3.7 The Nigeria Humanitarian Situation	
3.8 Methodology	5
3.9 Ethical and Regulatory Approvals	5
3.10 Field photos	5
	6
4: Some Research Findings	
	7
4: Some Research Findings	7
4: Some Research Findings	7
4: Some Research Findings	7 7 7 7
 4: Some Research Findings 4.1. Level of Education	
 4: Some Research Findings 4.1. Level of Education 4.2. Household food security situation 4.3 Coping strategies employed by food insecure households 	
 4: Some Research Findings 4.1. Level of Education 4.2. Household food security situation 4.3 Coping strategies employed by food insecure households 4.4 Prevalence of under-five malnutrition 	
 4: Some Research Findings 4.1. Level of Education 4.2. Household food security situation 4.3 Coping strategies employed by food insecure households 4.4 Prevalence of under-five malnutrition 4.5 WASH and menstrual hygiene 	
 4: Some Research Findings 4.1. Level of Education 4.2. Household food security situation 4.3 Coping strategies employed by food insecure households 4.4 Prevalence of under-five malnutrition 4.5 WASH and menstrual hygiene 4.6 Discussion of Some Research Findings 	
 4: Some Research Findings 4.1. Level of Education 4.2. Household food security situation 4.3 Coping strategies employed by food insecure households 4.4 Prevalence of under-five malnutrition 4.5 WASH and menstrual hygiene 4.6 Discussion of Some Research Findings 5. Personal Experience and Challenges Faced 	

1: Introduction and Motivation

The overarching goal of the United Nations Sustainable Development Goals 2030 is that no one should be left behind. Specifically, Goal 3.2.1 is to end preventable deaths of newborns and U-5 children by 2030. Yet in 2020, 23% of the world population representing 1.8 billion people lived in humanitarian environments and over 75% of them lived in extreme poverty (WHO/UNICEF JMP, 2021). Sadly, 25% of the world population still lack access to safe drinking water, and nearly half of the entire world population representing 3.6 billion people still lack a safe and adequate sanitation, with as many as 494 million of them engaging in open defecation as a daily routine. Even more tragic, a 2019 WHO report shows that at least 2 billion people drink water from sources contaminated with faeces (WHO/UNICEF JMP, 2019; (UN Water, n.d).

By May 2022, over 100 million people were forcefully displaced worldwide (UNHCR,2022) and more than 205 million people in 45 countries faced the three highest phases of acute food insecurity (FSIN& and GNAFC, 2022). Further, as many as 149 million, representing 22% of all U-5 children worldwide were stunted at the end of 2020 (WHO/UNICEF/WB, 2021), while 8 million children are at the risk of dying from severe wasting in 25 crisis hit countries (UNICEF, 2022a).

Further, 21% of displaced women suffer sexual violence, and these values could be higher because of the stigma associated with sexual violence reporting (Bendavid et al., 2021; UNHCR, 2021b; Brigitte Rohwerder, 2017). Yet there remains paucity of evidence in the literature on the overall wellbeing of internally displaced persons, especially on the menstrual hygiene and sexual exploitation. My motivation for this study is to help fill some of these evidence gaps, contribute to furthering the discussions on access to food and menstrual materials in humanitarian contexts and help stakeholders innovate for greater effectiveness.

This study was conceptualized using two views. (1) The human right angle to food, water, sanitation and hygiene and (2) The linkages between forced displacement, food insecurity, U-5 malnutrition and GBV. Some of the legal instruments employed in discussing the human right lens of this study include the following:

- ✓ The 1974 Universal Declaration on the eradication of hunger and malnutrition
- ✓ 2010 UN General Assembly declaration of WASH as a human right
- ✓ Declaration on the protection of women and children in emergency and armed conflict.
- ✓ 1979 Convention on the elimination of all Forms of discrimination against women.
- ✓ The Sustainable Development Goals 1, 2, 3, 4. 5, 6, 8, 10, 13, 16, & 17
- \checkmark The Convention on the Rights of the Child (OHCHR, 1989).
- The Humanitarian Charter
- The Sphere Minimum Standards in Humanitarian settings

2: Local Partnerships and Travel Preparations

Following my 6-month internship at Christoffel-Blindenmission (CBM) Bensheim, CBM kindly provided logistics support to enable me to undertake the data collection project. This included on the ground support by CBM Nigeria offices in Abuja and Maiduguri in Borno Sate. With the help of CBM Nigeria, it was possible

to get the support of other local organizations working in the research locations in Borno and Benue states. CBM was also very supportive in my travel preparation, including for early vaccination appointments, application for international travel insurance, emergency kit and in-country security training after my arrival in Abuja.

3: Overview and Implementation of the Research

3.1 The Research Problem

Globally, the number of forcibly displaced persons continue to rise, hitting over 100 million in May 2022. Notably, the war in Ukraine contributed to this figure, causing the fastest mass displacement since World War II (UNHCR, 2022). Over 66% were internally displaced and 90% of them were due to conflicts and violence (IDMC, 2022). Worsening conflicts have created some of the most rapid rise in displacement crises ever known (IDMC, 2021a). Unfortunately, over 80% of all conflict-related displacements are in sub–Saharan Africa.

The study was carried out to (1) determine the food security situation of displaced households, (2) to measure the prevalence of malnutrition in children aged 6-59 months, (3) to understand the menstrual hygiene experiences of displaced women and girls, and (4) to identify additional vulnerabilities faced by displaced women and girls including the tolerance of sexual exploitation as a coping mechanism against food insecurity.

3.2 The Global Displacement Situation

Figure 1 below shows the steady rise in the number of displaced persons worldwide.



Figure 1 | People forced to flee | 2012-2022

Figure 1: Trends in global displacement 2 (UNHCR, 2022)

Africa has the most countries with net rising numbers of forced displacements in the world (UNHCR, 2021a). In 2021, over 80% of all conflict-related displacements were in Africa (IDMC, 2021).



Figure 2: Worsening conflict related displacements in Africa 1 (IDMC, 2022)

3.3 Women and Children in Forced Displacement

At least 1 million children were born as refugees between 2018 and 2020 (UNHCR, 2021) despite the evidence that children exposed to armed conflict within their first year of life have a 7.7% higher risk of death before their first birthday (Bendavid et al., 2021, p. 526). Sadly, the proportion of displaced children below 18 years (42%) is higher than the total proportion of children in the world (30%). With additional 28% of all displaced persons being women above 18 years, at least 70% of all displaced persons are women and children (UNHCR, 2021). Between 1995 and 2015, more than 10 million deaths in children can be attributed directly to conflicts worldwide.

Some displaced households resort to negative coping strategies, including food rationing, child marriage (UNHCR, 2021) and transactional sex (UN OCHA, 2021), hence 10 million additional adolescent girls may be forced into marriages within the next 10 years (UNHCR, 2021).

3.4 Forced Displacement, Food Security and Malnutrition

The 2021 joint malnutrition figures show that 149 million representing 22% of all U-5 children are stunted and 45.4 million (6.7%) are wasted (WHO/UNICEF/WB, 2021). Acute malnutrition is a global health problem which affects 50 million U-5 children in the global south. According to UNICEF, "the global hunger crisis is pushing one child into severe malnutrition every minute in 15 crisis-hit countries" and nearly 8 million children are at the risk of dying from severe wasting in 25 crisis hit countries (UNICEF, 2022a). Further, over 205 million people in 45 countries faced the three highest phases of acute food insecurity by mid-2022, the highest in the 6-year history of the GRFC. Not surprising, about 68% of them representing 140 million people are in Africa (FSIN and GNAFC, 2022).

3.5 Forced Displacement and Menstrual Hygiene

Globally, at least 800 million women and girls between 15 and 49 years menstruate daily, and 1.9 billion people menstruate every month, including persons with LGBT+ status. Yet many of them, especially those in the global south as well as those in conflict settings lack access to the right information on menstrual hygiene, and menstrual materials for a life with dignity (UNFPA, 2022).

Menstrual hygiene is a key way to empower women, as access to optimal menstrual hygiene can influence the decision of getting uninterrupted education or dropping out of school during menstruation (World Vision, n.d). Worldwide, there are over 500 million women and girls who lack access optimal menstrual hygiene facilities (World Vision), n.d), including over 26 million who live in conflict settings (Columbia University, 2022).

3.6 Forced Displacement and Gender-Based Violence

Evidence from 10 studies show that at least 21% of displaced women suffer sexual violence, and these values could be higher because of the social stigma associated with the reporting of sexual violence (Bendavid et al., 2021). According to Filippo Grandi, the UN High Commissioner for Refugees, "One in five refugee or internally displaced women have faced sexual violence" (UNHCR, 2021b).

In March 2022, Amnesty International raised the alarm regarding the high level of both physical and sexual violence suffered by women and girls in the northeast of Nigeria, where Boko haram terrorists and other non-state armed groups rape and abduct women and girls to be used as sex slaves (Amnesty International, 2021 March 24)

3.7 The Nigeria Humanitarian Situation

SITUATION AT A GLANCE





More than 6.4 million people have been displaced in northern Nigeria due to the activities of terrorists and other non-state armed groups (UN OCHA, 2021). Nigeria has an IDI severity score of 0.240, which highlights the severity scale of the displacement crisis, with an estimated economic cost impact of 908 million USD in 2020.

In November 2022, UNICEF Nigeria declared a "nutrition emergency" following the report that nearly 100 children now die every hour in Nigeria (about 2,400 deaths daily), with additional 15 million children at risk of wasting. According to UNICEF, malnourished children have a 12 times higher risk of death compared to well-nourished children. (PUNCH, 2022, November 4)

3.8 Methodology

The study took place in two states in northern Nigeria, where violence and armed conflicts have forced millions of women and children to flee their homes. The states are Borno state in the northeast and Benue State in the north central regions of Nigeria.

Figure 4: Map of Nigeria showing Borno and Benue states



The study population included displaced women, displaced girls, children 6-59 months, aid workers, health workers and government workers.

Purposive and an extensive quota sampling methodology were used for the study. The survey was implemented digitally using Kobo Toolbox. Focus group discussions and key stakeholder interviews were conducted with the help of interpreters.

3.9 Ethical and Regulatory Approvals

Ethical approval was obtained from the relevant authorities in both states. Details of the study was clearly explained to all participants and informed consent was obtained before their participation in the study.

3.10 Field photos

Training of Enumerators

Proficiency in English & local languages

Digital data collection using Kobo Toolbox

Survey in respondent's mother tongue

Enumerators directly record responses



Measurement of malnutrition in children 6-59 months

1. Age (months) 2. Weight (kg) 3. Height (cm) 4. Mid-upper arm circumference (UAC) (cm)



Women 19-49 years

Girls 13-17 years women& girls with disabilities





Key stakeholder interviews

4: Some Research Findings



4.1. Level of Education

In Borno State, over 70% (n=286) have no formal education. In Benue State, this number is nearly 85% (n=347).



4.2. Household food security situation

97.3% (n=397) of households in Borno State and 100% (n=411) households in Benue State have very low food security. Results show that households are in in a critical acute food security crisis.

	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5	
			Serious	Critical		
Global Acute Malnutrition	Acceptable	Alert	10 to	15 to	Extremely Critical	
Based on WHZ	< 5%	5 to 9%	14.9%	29.9%	> 30%	
GAM for Borno			29.6%			
GAM for Benue			16.2%			

4.3 Coping strategies employed by food insecure households



Most surveyed households cope by begging, which exposes the women and girls to sexual exploitation.

4.4 Prevalence of under-five malnutrition



MUAC

4.5 WASH and menstrual hygiene

Nearly 11% of respondents in Benue State use nothing during menstruation, a practice that forces them to stay at home, while over 46% use pieces of cloth

4.6 Discussion of Some Research Findings

- 1. Displaced households face crisis and emergency levels of acute food insecurity such that they pick leftover food from the ground on market days.
- 2. Begging is the main coping strategy used by affected households and this exposes them to sexual exploitation and abuse.
- 3. Results of the focus group discussions and key stakeholder interviews reveal a high prevalence of sexual and gender-based violence against the displaced women and girls.
- 4. Some women and girls use nothing during their menstruation. This means they must stay at home throughout the period, hence further impacting their opportunities for livelihoods activities.
- 5. Stunting prevalence was the highest among the various malnutrition types. This is in line with WHO/UNICEF/World Bank latest results.

5. Personal Experience and Challenges Faced

Although the whole process was tedious, it was rewarding to undertake this research among vulnerable women and children who have been forcefully displaced by armed conflict in northern Nigeria. Much of my studies and career has been focused on helping to improve access to social services among this group, including to essential healthcare, food security and nutrition and optimal water, sanitation and hygiene services. There were many people who tried to discourage me from going to these conflict zones, especially to Maiduguri, Borno State, which has been the epicentre of the Boko Haram terrorist group. Throughout the data collection period, my team and I, including the language interpreters spent the whole day in the IDP camps carrying out surveys, focus group discussions and key stakeholder interviews. It was a great opportunity to experience the daily struggles and vulnerabilities of these vulnerable women and children. More importantly, it was an opportunity to raise further awareness especially on child malnutrition. This is important considering that over 70% of them in Borno State and 85% in Benue State have no formal education.

In Maiduguri, Borno Sate, I stayed at the UN Hub and had the opportunity to regularly meet and network with fellow humanitarian workers from different countries. Furthermore, this study offered me opportunities to improve on my leadership, organizational and people skills. Everyday, I had the responsibility to lead, motivate and manage the team of enumerators and interpreters who were very important for overcoming the language barrier.

Nevertheless, although, I am happy with the overall success of the research visit, I encountered several challenges and difficulties. Some of them are listed below:

a. Determined to save costs, I booked an indirect flight through Dubai with a waiting time of nearly 5 hours. In all, I was traveling for nearly 24 hours for each way of the journey.

- b. Due to unavoidable issues such as delayed ethical approvals, limited budget and other logistics, I worked on a very tight deadline. This created additional challenges when the set deadlines could not be met.
- c. A lot of pressure was created when my local contacts could not provide some of the logistics support they had agreed to provide.
- d. It was a lot of work monitoring the enumerators for data quality. In Benue State, I discovered that two of them were not honest in following the survey guidelines. I had to delete all the data they had collected and ask them to stop. As a result, it was no longer possible to meet the tight deadline set for the data collection in Benue State.
- e. While in Nigeria, Emirates Airline announced the cancellation of all flights to or from Nigeria. The chance to fly from Ghana was offered but expensive. Combined with a tight deadline and unforeseen challenges to meet them, I had to change my return flight several times and incurred higher travel costs.

6.BPSA Application Tips for Future Students

Important tips to keep in mind include:

- 1. Starting early both with BPSA application and preparations for the actual trip.
- 2. Consult your supervisor or course administration for guidance.
- 3. Seek local partnerships and support from in-country organisations.
- 4. Ask for help.

7. Potential Challenges to Consider

Potential Challenges to consider include:

- a. Realistic Timeline: Set a realistic deadline.
- b. Security: Consider security in the country or location you are going.
- c. **Local Partnerships**: Be aware that local contacts and partnerships could fail. So have a plan B, if possible.
- d. Inflation: Consider the effect of inflation on prices.
- e. Monitoring for data quality: If you are doing a research, pay attention to data quality.

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