ASSESSMENT OF GENDER-BASED VIOLENCE IN THE INTERNALLY DISPLACED PERSONS (IDP) CAMPS IN MAIDUGURI BORNO STATE

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ABSTRACT: The study assessed gender-based violence (GBV) in IDP camps in Maiduguri, Borno State. Using a survey design, both quantitative and qualitative data were collected from 205 respondents across three camps: Bakassi, NYSC, and Stadium camps located within the Maiduguri metropolis. Focus group discussion (FGD) was also conducted with four respondents representing each of the three camps, making a total of 12 respondents out of the 205 respondents. Findings revealed prevalent cases of sexual abuse, including rape, leading to unwanted pregnancies. The study recommends increasing government, NGOs, Human Rights activists, interventions, legal enforcement against perpetrators, and improved support for victims.

Keywords: Gender-Based Violence (GBV), Internally Displaced Persons (IDPs), Maiduguri, Sexual Abuse, Humanitarian Intervention

INTRODUCTION

The Northeast of Nigeria is still experiencing some pockets of attacks by the Boko Haram insurgents. This is in spite of the fact that the Nigerian Military has declared that they have defeated Boko Haram since none of the local government is under the control of the insurgents. However, there are still some occasional attacks on local communities by Boko Haram where women and girls continue to be victims and are still living with these impacts of violence. Many women and girls are bearing the brunt of the insurgency, such as social displacement, psychological problems, gender-based violence, hunger and deplorable health conditions. Thus, this research intends to analyse the victims of Boko Haram among women in the IDP camps so as to ascertain the level to which women suffered from gender-based violence.

In recent years, insecurity has become Nigeria's most challenging issue, emerging in various dimensions. Boko Haram insurgency, herdsmen attacks on farmers, kidnapping and ethno-religious conflict. The terrorist group Boko Haram became well known following several deadly attacks on civilians in Borno State, Nigeria, in 2009.

The ideology of the sect is against Western education, law and lifestyle (Malachy, 2013). The group's agitation for a Sharia state and complete Islamisation of the country has been the spearhead

of the deadly incessant attacks (Malachy, 2013). The group has carried out numerous bombings, killings, and abductions, including the abduction of over 2000 women and 276 girls from Chibok Secondary School, Borno State, in 2014 (Amnesty International, 2015). Since the inception of insurgency in Nigeria, around 14 million people have been affected by the attacks, causing over 20,000 deaths, 3 million displacements, and hundreds of invasions of communities (Amnesty International, 2015). Internally displaced persons (IDP) camps are located in the affected states of Borno, Adamawa, and Yobe, as well as other parts of the country. These three states host significant numbers of affected persons, including the Nation's capital, Abuja, and Lagos state (Internally Displacement Monitoring Centre, 2017). The violence on its huge scale thwarts the nations' efforts on poverty reduction, nation-building, and sustainable development more broadly. A high fraction of Nigeria's population, particularly in the northeast, lost their livelihood in the heat of the crisis, fuelling poverty and starvation, to mention but a few challenges (Adewale, 2016).

Statement of the Problem

In Nigeria, women constitute approximately half of the population; they play important roles as mothers, producers, managers, and community developers/organizers, as observed by (Afolabi, Kehinde, and Lanre, 2013). However, they also contribute to society, socially, politically, and economically, to the development of the nation. It is a known fact that women performed double responsibilities in all societies compared to men by virtue of their dual roles in the industrious and reproductive domains (Makama, 2013).

Borno State, like other States in Northeastern Nigeria, is patriarchal in nature, which is a major feature of a traditional society, where men dominate and control everything by taking care of their wives and children at all costs. It can also be stated that Nigeria has a structure of a family that allows men with a material base to have control over their women. Women are therefore subjected to domestic responsibilities; thus, sometimes, women are denied the opportunity to obtain proper education, neglected, and continually kept at home as housewives (Allanana, 2013; Makama, 2013).

With this type of family structure, it can be understood that women in the Northeastern region are being taken care of by their husbands since it is the responsibility of the husband to provide all the necessary goods and services to the family. A study by Mohammed (2018) noted that Nigeria, particularly in the Northeastern region, has been suffering from the tragedy of Boko Haram insurgents since 2009, which claimed thousands of lives and property worth billions of naira. It does not end up on the economic problem alone, but it has caused a lot of social damage to the lives of women. Considering the major duty of the husband in the family, unfortunately, today, the Boko Haram sect has killed many men (Musa, 2015). Those in positions to cater to the lives of their family members are no longer alive as a result of the Boko Haram insurgency. Despite the increasing number of studies and institutional reports on IDPs and the various specific health challenges such as sexually transmitted diseases, post-traumatic disorder and depression, among others (Ager et al., 2015; Owoaje et al., 2016), there is a dearth of studies on the victims of violence among women in internally Displaced Persons Camps (IDPs).

Apart from the fact that many of the previous studies focus on mental health, they also failed to provide a general picture of the violence faced by women in IDP camps due largely to the consequence of the Boko Haram insurgency. Contrary to the earlier research conducted by other scholars in other areas, this study intends to assess gender-based violence experienced by women as a result of Boko Haram insurgency in the Internally Displaced Persons (IDPs) camps in Maiduguri, Borno State.

Therefore, this study examines the prevalence and impact of gender-based violence among women in IDP Camps in Maiduguri Borno State, highlighting systemic challenges and policy recommendations.

LITERATURE REVIEW

Concept of Insurgency

Insurgency can be conceptualized from the divergence dimension; it is an ambiguous concept. The United States Department of Défense (2007) defines it as an organized movement that has the aim of overthrowing a constituted government through subversive means and armed conflict (Hellesen, 2008). This definition suggest that insurgent groups employ unlawful means towards achieving an end, which could be political, religious, social or even ideological. The goal of insurgency is to confront and overthrow an existing government for the control of power, resources or for power sharing (Siegel, 2007). According to Ekaterina (2008), insurgency is a sort of violence that uses one-sided violent approach against civilians, which could be a state or a group of states.

Concept of Internal Displacement

According to International Organization for Migration, internal displacement refers to people who are uprooted from their homes and trapped within the borders of their own states. The World's 20 to 25 million 'internally displaced persons'' (IDPs) are a defining feature of the post-Cold War era. Their plight, which now amounts to a global crisis, poses a challenge to established systems of humanitarian relief and protection, as well as to international law's longstanding principle of national sovereignty (IOM, 2015).

Many factors, sometimes in combination, create IPDs. The most important at present are internal armed conflicts, economic upheaval and natural disasters. Most of the millions of men, women and children uprooted by these forces endure fetid living conditions, daily hardships to obtain necessities such as water and food, and the threat of death from violence, deprivation or disease. Today, the largest concentrations of internally displaced persons can be found in Africa, such as Sudan, the Democratic Republic of the Congo, Angola and Sierra Leone (O'Neill, 2013).

IDPs are rarely counted accurately, however, due in part to incongruities over how to define who is internally displaced. This is tied to a lack of awareness of their needs as a population, and a shortage of resources devoted to establishing an accurate statistical base of knowledge. Hence, the estimate of 20-25 million IDPs frequently cited by commentators may well fall short of the actual total. In contrast, the United Nations High Commissioner for Refugees (UNHCR) estimates that

the number of refugees globally was 12.1 million in 2012 and 13.5 million in 2015 while it rose to 18.7 million in 2020 (UNHCR, 2012, 2015, 2020).

The health of displaced people, migrants and refugees is of concern to public health. According to Evans (2008) report, more than 10% of the world's 35 million displaced persons who fled from civil conflicts, war or natural disasters live with disabilities. These numbers are expected to rise as environmental events classified as natural disasters are expected to become more frequent. Although the Guiding Principles on Internal Displacement states that people with disabilities are entitled to protection and assistance required by their condition and to treatment that takes into account their special needs, they remain among the most hidden, neglected and socially excluded of all displaced people today (Evans, 2008).

Internally Displaced Persons (IDPs)

Presently, there is no globally accepted definition of who is an internally displaced person, but according to the United Nations (UN), Displaced persons under international law are persons or groups of persons who have been forced or obligated to flee or to have cause to leave their homes or place 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 they must have either remain within their own national borders (as internally displaced persons) or they must have crossed an internationally recognized state border (as refugees), (Ladan, 2016). Thus, displaced persons are of two categories: Refugees and Internally Displaced Persons (IDPs).

According to Oduwole and Adebayo (2013), the Convention Relating to the Status of Refugees Conflict-related Sexual Violence (CRSV) of 1951 defines the term "refugee" as applying to any person who is physically, psychologically and socially displaced as they have to relocate to a refugee camp. Statistics on IDPs in Nigeria revealed that an overwhelming majority of women and children constitute the IDPs. Women and children remain the most vulnerable to sexual and gender-based violence. There have been reported cases of rape, sexual harassment, forced marriage, infant marriage, sexual diseases and uncontrolled birth occasioning high infant and maternal mortality. Furthermore, because some of the IDPs integrate with other family members in various locations, data about them is not easy to get. All these factors make it nearly impossible to obtain an accurate number of displaced persons in Nigeria.

IDPs are caused by several factors; according to a strategic conflict assessment carried out by the Institute for Peace and Conflict Resolution in 2002, the return to democracy and the competition for new political opportunities have led to increased violence. Local competition for resources has often been aggravated by "Inter-elite" rivalries over privileges such as political and public service appointments, oversight of projects and admission into schools (IPCR 2002). In addition, the interplay between the tripod ethnic structure and communal patterns of inequalities, closely linked to this is the issue of natural disasters such as flooding or soil erosion. Other causative factors identified in the literature include religious violence and displacement due to communal conflicts over land and borders and militancy in North East and Southern Nigeria (Banatvala, 2010).

Causes of Gender-Based Violence

There are different types of causes of gender-based violence depending on the society or culture of that society or community in question. However, according to the European Council, there are four main causes of violence, which include cultural, economic, legal and political factors. Where it was stated that the Patriarchal nature of family legitimizes violence to ensure the dominance and superiority of men over women in many societies, other cultural factors include gender stereotypes and prejudice, where responsibilities are shared according to gender difference, women culturally are expected to be submissive to their husbands being male and who is responsible for feeding the wife. This further indicates that the socialisation of gender is an understanding of the family sphere and private, which men take advantage of to abuse women (Denis-Ramirez, Leslie & Elizabeth, 2021). Religious and historical traditions have sanctioned the physical punishment of women under the notion that men are entitled to ownership of their women (European Council). This means men have the right to sexual relationships with their wives at all times, particularly in the north among the Muslims. Similarly, according to Penal Code Law 89 Laws of Northern Nigeria (1969), as was also cited in Davies Ugowe (2022) where stated that domestic violence is normal and is not a crime if committed by a husband for the purpose of correcting his wife. This may not be unconnected with the reason why domestic violence in the north is not reported as it is in other Western societies like Europe. However, Uyanne, Elizabeth O. (2021:2), unlike the European Council, relates causes of gender-based violence to so many factors such as poverty, drug abuse, personality disorder, failure of parents to fulfil parental obligations to the child, witnessing of violence between parents as a child, extra-marital relationships by a parent, lack of moral standards/ lack of fear of God in the family, death of one parent/single parent.

Furthermore, Uyanne, reported that other causes of gender-based violence are related to harmful traditional practices such as genital organ mutilation for non-medical reasons, forced marriage, arranged marriage against the victim's wishes, killing a child for rituals and socio-economic violence, which included denial of education for girls/women, discrimination and/denial of opportunities for a person because of his/her gender, social exclusion based on sexual orientation, denial of property rights (Uyanne, 2021; Mtetwa, 2017). Contrary to the above views, Elise and Leslie (2008) were of the view that the most common types of violence included physical, emotional, and economic violence, where they further highlighted that intimate partner violence is persistent in informal settlements, which shows that gender violence varies from one community to another. This explains the difference in the vulnerability to gender-based violence in the IDP camps as a result of forced displacement, which workers and security agents explore in exchange for relief material shared in the camps to the IDPs as those who submit get access to enough share of the relief. In other words, some are abused as a result of their quest for enough relief materials in the camps, as they don't get enough if they don't have a connection with any officials.

Empirical Review

Universally, studies about GBV have been taken from the angle of the women. To support this, legislative and health measures are taken to protect the interest of women (George, 1994, cited in Animasaun and Animasaun, 2017). The argument in support of this is that there are more reports and studies on female victims of gender-based violence than male. This is why literature abounds

that domestic violence is a domestic and social phenomenon attributed to patriarchy, and women as victims and men as perpetrators (Dobash & Dobash, 2009 in Alooma, 2012). However, some believe that the lack of studies on male victims of violence only strengthens the argument for conducting serious research on this issue. (Animasaun & Animasaun, 2017). Thus, data have been drawn from the media (Alooma, 2012), internet sources (Naijamovie, 2012), police reports (Ibrahim & Mohammed 2016), medical reports (Asekun, Olarinmoye & Fawole, 2010) and counselling agencies. The support for the idea that women cannot escape the role defined by a patriarchal society suggests that men are expected to maintain control at all times. However, this does not imply that male counterparts are free from experiencing gender-based violence, both within families and across the globe. Consequently, it should not be assumed that some women do not inflict harm on their husbands in their households.

Nwidor (2015) conducted a study on the Boko Haram insurgency and gender-based violence in northeast Nigeria (2007-2015). The broad objective of his study was to investigate the nexus between Boko Haram insurgency and gender-based violence in northeast Nigeria. The study is based on the one-shot case design, which involves the careful examination of only one group, event or phenomenon at a single point in time after a presumed causal event has occurred. The study found out that since 2011, this Islamist sect in the northeast region of Nigeria has turned to the kidnapping of women and girls as its strategy. To this end, there is a widespread increase in Gender violence in the region. The study recommended that the Nigerian government and the government of the six states in northeast Nigeria strive to improve the quality of governance in the region. The socio-economic conditions should improve in terms of creating jobs, reducing poverty and lowering the illiteracy level in the region.

In another development, Yahaya (2012) conducted a study on the effect of Boko Haram on market output and agricultural production in Maiduguri, Borno State. Random sampling techniques were used for this study, which included 250 respondents. Both descriptive and inferential statistics (chi-square) were applied. The study was divided into four clusters. It revealed that Boko Haram viewed markets as fertile ground for confronting military authorities, evidenced by events at the three major markets: Monday Market, Gomboru Market, and Baga Market. This has resulted in a fear of attack among traders, thereby reducing the quantity supplied to the markets, which in turn has driven up food prices, negatively impacting the amount of food consumed by households. The assaults on these markets have adversely affected food production, resulting in a decrease in food quantity.

Aside from consensual sexual activities among adolescents in IDP camps in Nigeria, there is also a high prevalence of sexual violence observed in the camps in Nigeria (UNFPA, 2016). For instance, in an assessment by the Centre for Population and Reproductive Health, Nigeria (2016), it was found that young girls are exposed to sexual violence by insurgents, policemen, armed forces, partners, relatives and unknown persons (UNFPA, 2016). This is also in line with the reports by Human Rights Watch, where it was noted that young adolescent girls are exposed to rape by security operatives in IDP camps (Ynaija, 2016). Victims were sometimes drugged, raped or coerced into sex through false promises of financial and material assistance (Ynaija, 2016). One of the victims, a 17-year-old girl living in an IDP camp, described her experience to the Human Rights Watch group thus:

One day, he (a policeman) demanded to have sex with me. I refused, but he forced me. It happened just one time, but soon I realised I was pregnant. When I informed him about my condition, he threatened to shoot and kill me if I told anyone else. So, I was too afraid to report him (Ynaija, 2016).

Sexual violence among internally displaced persons (IDPs) in Nigeria is frequently linked to poverty and exposure to child labour within camp settings. Victims of such violence face heightened health risks, including the potential contraction of HIV, AIDS, and other sexually transmitted infections (STIs). Furthermore, IDP camps in Nigeria are marked by a significant lack of clinics and facilities dedicated to sexual and reproductive health care. Observations indicate that young girls who have suffered rape at the hands of Boko Haram insurgents often encounter mistrust from their families and community members, resulting in inadequate maternal care and support, contrary to their needs as caregivers (International Alert and UNICEF, 2016). Reports reveal a scarcity of essential resources such as rape kits, functional vehicles for transporting victims of sexual violence, private counselling services, and proper documentation forms for victims (UNFPA, 2016). Alarmingly, despite over 60% of the camp population living with HIV, only 30% of IDP camps offer any form of HIV testing services, and these services lack standardisation (USAID, 2015). IDPs affected by AIDS within these camps face numerous barriers in accessing necessary medications; fear of stigma often prevents them from seeking treatment, exacerbated by their exclusion from centralised medical facilities outside the camps (PM News, Nigeria). The camps also suffer from inadequate provision of services related to antiretroviral refills, comprehensive HIV/AIDS treatment, counselling, testing, and proper storage for antiretroviral drugs (USAID, 2015). Concerning the qualification of personnel, roughly one-third of IDP camps in Nigeria have trained staff capable of providing HIV testing and counselling services (USAID, 2015).

Types of Violence Suffered by Women in IDP Camps

Acts of gender-based violence represent one of the most prevalent forms of violence encountered globally, significantly impacting the lives, health, and well-being of millions across diverse demographics, including women, girls, boys, and men. This phenomenon is pervasive across all societies and cultures (Onuoha & George, 2015). Conditions often associated with forced displacement, such as conflict, the disintegration of the rule of law, and the collapse of familial and community structures, exacerbate both the incidence and severity of gender-based violence. Gender-based violence is characterized as any act perpetrated against an individual based on their gender or sex, encompassing acts that result in physical, mental, or sexual harm, as well as threats, coercion, and other forms of liberty deprivation (Onuoha & George, 2015). This form of violence manifests in various expressions, including physical, sexual, and psychological violence, which may be enacted or tolerated within familial settings, the broader community, or by state organizations and institutions. Thus, gender-based violence encompasses a multitude of forms and contexts.

Sexual Violence: these include actual, attempted or threat to (vaginal, anal or oral) rape, as well as domestic violence such as martial rape; sexual abuse and exploitation; forced prostitution;

transactional/survival sex and sexual harassment, intimidation and humiliation, (Ward & Vann 2012). Ward and Vann (2012) stated that displaced women and girls are vulnerable to a range of sexual violence including forced sex/rape, sexual abuse by an intimate partner, child sexual abuse, coerced sex, and sex trafficking in conflict and humanitarian settings. A study conducted by Hynes, Lopes and Cardozo (2012) reported that actors and military personnel are the main perpetrators of sexual violence. Other perpetrators, however, may also include family members, NGO and humanitarian workers, trusted individuals, or strangers who take advantage of heightened vulnerability (Onuoha & George, 2015). As a result, many women and girls who experience sexual violence experience a range of long-lasting physical, reproductive, and mental health consequences of sexual violence.

Physical Violence: These include actual, attempted or threatened physical assault or battery; slavery and slave-like practices; and trafficking. Nonetheless, research by Garcia, Moreno, Jansen, Elsberg, Heise, and Watts (2016) demonstrated a pervasive trend of violence against women, both cross-culturally and cross-nationally. Violence against women has many physical and mental health consequences that can last long after the violence has ended, resulting in serious public health implications. Physical health consequences may include injuries, chronic pain, fibromyalgia, headaches, gastrointestinal disorders and sexually transmitted diseases.

Other research suggests that different types of violence often coexist; for instance, one was of the view that physical IPV is often accompanied by sexual IPV and emotional violence. WHO multi-country study in Bangladesh, Brazil, Ethiopia, Japan, Namibia, Peru, Samoa, Serbia and Montenegro, Thailand and Tanzania reports that 23-56 percent of women who experience physical IPV also experience sexual IPV (Garcia-Moreno et al., 2016). However, the UN multi-country study also states that "not all perpetrators use all types of violence, and although some overlap exists between physical and sexual partner violence, this is not always the case" (Fulu et al., 2013; 2014). Fulu points to regional variations; for instance, in South Asia, sexual violence often occurs on its own. Additionally, multiple studies have found that while physical and sexual violence often have shared correlates, they also have unique associations. For instance, studies revealed physical and emotional victimisation in childhood, gender-inequitable attitudes, conflict within the relationship, depression and alcohol misuse (Barker et al., 2011; Fulu et al., 2013; Jewkes et al., 2002a). Sexual violence, on the other hand, often stems from experiences of childhood sexual and emotional abuse, having multiple sexual partners and engaging in transactional sex (Fulu et al., 2013). Fulu et al., (2013) suggest that given factors associated with sexual violence and physical violence may not be the same and factors with sexual violence are more similar to those associated with non-partner violence, interventions must be tailored to address different types of violence (even when committed by the same individual) in order to be most effective.

Emotional and Psychological Violence: These include abuse and humiliation, such as insults, cruel and degrading treatment, compelling a person to engage in humiliating acts and placing restrictions on liberty and freedom of movement. Other studies have also found that psychological abuse tends to be associated with physical abuse. For example, Capaldi and Crosby (1997) found that at age 18 years, there were significant correlations between the perpetrations of the two types of abuse.

Harmful Traditional Practices: These include female genital mutilation/cutting (FGM/C); forced marriage; child marriage; honour or dowry killings or maiming; infanticide, sex-selective abortion practices; sex-selective neglect and abuse; and denial of education and economic opportunities for women and girls

Socio-economic violence: These include discrimination and denial of opportunities or services on the basis of sex, gender, or sexual orientation; social exclusion; and obstructive legal practices, such as denial of the exercise and enjoyment of civil, social, economic, cultural and political rights mainly to women and girls.

Violence against women and girls (VAWG) is one of the most pronounced manifestations of gender inequalities and has been reported to increase in the wake of disasters. Evidence of the occurrence of violence in emergencies, mostly generated by agencies involved in relief work and development projects, underscores that post-disaster sex and gender-ba0sed violence (SGBV) occurs in all countries and at all stages of development (Amnesty International, 2011; IFRC, 2016). In Japan, sexual and physical violence against women occurred in the aftermath of earthquakes in 1997 and 2010, affecting not only local women but also evacuees and volunteers working in the evacuation Centres. However, social pressure impedes victims' capacities to report abuse and for any information to be adequately collected (Saito, 2012). In the United States, following Hurricane Katrina in 2005, the rape rate among women displaced to trailer parks was 53.6 times higher than the highest baseline rate for Mississippi in 2004, with intimate partner rape being 16 times higher than the US yearly rate (IFRC, 2007). In Uganda, a needs assessment conducted by Mercy Corps in Karamoja revealed that harmful practices, including domestic violence, child marriage, courtship rape and female genital mutilation/cutting, spike during drought and prolonged dry spells (Opondo et al., 2016).

Studies show that women and girls and even more so women with disabilities, LGBT community, ethnic minority women, or women of low care, are more likely to be targeted by violence than men, highlighting that people's social identities (i.e. their gender, age, sexual orientation, class or class status) influence the risk factor of violence. The scarcity of water in the Sahel forces women and girls to walk longer distances to fetch water and fuel, increasing their exposure and risk of harassment and sexual assault (Skinner, 2011; Le Masson, 2016; Morris, 2015). In some emergencies where CARE has provided humanitarian assistance, water is scarce, leading to long queues and potential conflict during the day. This is why sometimes girls who are deemed responsible for fetching water decide to get water at night, which increases their risk of being exposed to sexual assault (CARE Ethiopia, 2016). Moreover, in Papua New Guinea, the drought precipitated by El Nino led to increased security concerns for both men and women, with GBV reported by women alongside child abuse and robbery (CARE, 2015).

The consumption of alcohol and drugs, acknowledged as a prevalent public health concern, has been identified in various studies as a coping mechanism utilised to manage stress. Additionally, these substances are recognized as risk factors contributing to the escalation of Violence Against Women and Girls (VAWG). For instance, a post-Cyclone Nargis assessment conducted in Myanmar revealed that respondents observed a significant uptick in alcohol use and estimated a 30% rise in domestic violence incidents following the disaster (Women's Protection Technical

Working Group, 2010). Furthermore, post-disaster scenarios indicate that men are more inclined to engage in gambling, alcoholism, and acts of violence as a response to perceived threats to their masculinity, stemming from a disruption of their traditional roles as protectors and providers (World Bank, 2001; Skinner, 2011). Research conducted by CARE in East Hararghe, Ethiopia, suggests that during challenging periods, men may express resentment when they lack sufficient funds to purchase 'khat' (a traditional herbal stimulant classified as a banned Class C drug in the UK), which can lead to domestic conflicts.

Deviance Theory

Robert K. Merton's theory of deviance was adopted for the purpose of this study, Like many sociologists and criminologists, Robert Merton was interested in explaining the root of social deviance; however, unlike most theorists, who posited that crime and deviance arise from individual causes (such as a biological defect) (Cullen & Agnew, 2006) Merton argued that certain groups participate in criminal behaviour because they are responding normally to the social situation in which they find themselves (Tierney, 2006). His theory of the five personal adaptations to anomie, also known as strain theory, arose from the earlier sociological theory of anomie developed by Emile Durkheim (Gomme, 2007). Borrowing a term sociologically introduced by Durkheim (1893, 1984), Merton adopts the anomie concept as part of his effort to suggest that biological explanations of deviant behaviour are inadequate to explain social reality and that, instead, structural conditions should be considered as inducing deviation from prescribed patterns of conduct. Anomie is a sort of psychological state of confusion in which an individual observes a conflict between the prescribed and commonplace social goals and the culturally acceptable, legitimate ways to pursue those goals (Gomme, 2007).

Merton (1938) delineates five adaptations that would occur when an individual realises that not everyone can achieve the dream of equal opportunity for economic success; The conformist accepts the goals of society and the means of achieving them, such as a college student; the innovator accepts the goals of society, but rejects the means of achieving them, such as drug dealer, the retreats gives up on the goals and means, and withdraws from society, such as an alcoholic; the rituals rejects the goals and accepts the means, such as a person who has given up on a promotion, nice car, and punching the time clock to keep what he has; and the rebellion type refers to one who rejects both the goals and means of society, and wants to replace them with new goals and means, such as a militant (Merton, 1938).

The examination of the adaptation characteristics of the Boko Haram terrorist group indicates a clear alignment with rebellion against the Nigerian state. Previous discussions have established that the theoretical framework posits that a disjunction between institutional means and culturally endorsed objectives generates strain, which fundamentally contributes to elevated crime rates. In this context, terrorists inherently reject these cultural objectives and the legitimization of their attainment. Consequently, they construct alternative goals and employ illegitimate means to achieve them. The Boko Haram group epitomizes a rebellion against the overarching state system and structure in Nigeria, aspiring to establish an Islamic caliphate through methods deemed illegitimate by the prevailing legal standards (Adejoh, 2018). Furthermore, the prevalence of sexual violence associated with Boko Haram underscored the organization's non-conformist

nature, as they oppose societal norms regarding goal achievement. Their objectives are fundamentally at odds with those of the state. The use of sexual violence as a tactic and strategy directly contravenes the constitutional framework and the laws governing the nation. Such actions represent egregious violations of human rights as delineated by both national and international law. This consistently corroborates the characterization of Boko Haram as a rebellious and non-conformist entity. Indeed, any organization that resorts to armed conflict against the state and contradicts its ideologies is, by definition, both rebellious and non-conformist.

METHODOLOGY

This research paper focuses on a study conducted in the Internally Displaced Persons (IDP) camps located in Maiduguri Metropolitan. Central to this investigation are the respondents, particularly women who have suffered from gender-based violence. In essence, this paper addresses one of the key objectives identified in the research undertaken in Maiduguri, Borno State.

The sample population for the study was drawn from three distinct camps: Bakassi, with a total population of 33,915 individuals and 5,320 households; the NYSC camp, with a population of 3,750 and 626 households; and the Stadium camp, comprising 6,442 individuals and 2,387 households. The cumulative total for the research population amounts to 44,121 individuals across 8,333 households. To determine the appropriate sample size for this research, the Taro Yamane formula was employed, as detailed in the subsequent sections.

Taro Yamani thus:

$$n = \frac{N}{1 + N(e)2}$$

Where n = sample size

N = total population

E= the level of significance (5%)

1= Constant areas

The level of significance = 5% = 0.5

$$n = \frac{44121}{1 + 60212(0.005)2}$$

$$n = \frac{44121}{1 + 150}$$

$$n = \frac{44121}{151}$$

n = 205

This study utilized a mixed-methods approach, effectively integrating both quantitative and qualitative methodologies for data collection. Questionnaires were distributed, and focus group discussions (FGDs) were conducted with female participants from three distinct camps. Twelve women participated in the FGDS, with four participants selected from each camp.

However, it is important to note that the size and demographics of internally displaced persons (IDPs) varied across the camps, resulting in a differing number of respondents based on the occupant population. Specifically, the Bakassi camp, being the largest, contributed 97 out of the 205 total respondents through purposive sampling. Subsequently, the second camp, Stadium, yielded 68 respondents, while the NYSC camp, which had the smallest population, accounted for 39 respondents. This distribution ensured adequate representation from each camp within the overall sample of 205 participants.

Table 1: Distribution of the Respondents by socio-economic characteristics = n (205)

Socio-economic	Frequency	Percentage (%)
Sex		
Male	82	40.0
Female	123	60.0
Age (Years)		
15-19	60	29.2
20-29	56	27.3
30-39	40	19.5
40-49	28	13.6
50 and above	20	9.7
Marital Status		
Married	82	40.0
Single	56	27.3
Divorced/Separated	24	11.7
Widow/Widower	43	21.0
Educational Status		
Non formula education	45	21.9
Primary/Secondary	45	21.9
Diploma/NCE	15	7.4
HND/BSc	05	2.4
Illiterate	85	41.4
Religious Background		
Islam	131	63.9
Christianity	60	29.2
Traditionalist	10	4.8
Atheist	4	2.1
How long have you lived in this camp		
1-3 years	15	7.4
4-6 years	35	17.0
7-10 years	140	68.2
Above 10 Years	15	7.4
Total	**205**	**100**

The results in Table 1 show that 40.0% of the respondents were males, while 60.0% were females. This indicates that the majority of the respondents are females. This is because females are the ones who are largely victims of sexual abuse, which sometimes leads to unwanted pregnancies in the study area. From Table 1: It is seen that 29.2% of respondents are within the age of 15-19 years, 27.3% are within the age of 20-29 years, 19.5% were within the age of 30-39 years, while 13.6% were 40- 49 years and 9.7% 50 years and above. This shows that 29% of the respondents are young, which also means they are within the active age. The marital status of the respondents also revealed that 40.0% of the respondents are married, 27.3% are single, 11.7% are divorced/separated, and 21.05% are widowed/widowers, respectively, which also means they are single and vulnerable to sexual harassment. While 21.9% of the respondents have no formal education, 21.9% of the respondents are primary and secondary school holders, 7.4% are diploma/NCE holders, 2.4% are HND/B.Sc. and lastly, 41.4% are illiterates. This shows that the majority of the respondents have no formal education, which means they are illiterate and more vulnerable to sexual abuse, while few have religious qualifications.

However, based on religious background, the data shows that 63.9% of the respondents are Muslims and 29.2% are Christians, while 4.8% are traditionalists; this indicates that the majority of the respondents are Muslims in the study area. It was also uncovered that 7.4% of the respondents have lived in the camps for1-3 years, 17.0% of the respondents have been in the camp for as long as 4-6 years and 68.2% of the respondents have been in the camp for 7-10 years and finally, 7.4% of the respondents have been there for more than 10 years in the IDPs camp. This indicates that these respondents are in the position of what is happening in the IDP camps and in a better position to respond to these questions.

The quantitative data collected for this study were analysed using descriptive analysis, using percentage and frequency distribution tables to explain the respondents' views. The FGD data were analysed using thematic analysis, in which the respondents' views were narrated verbatim to reflect their original views.

Table 2: Types of violence experienced by women as a result of Boko Haram

S/N	Type of gender-based violence in IDPs camps	SA	A	UN	SD	D
1.	Women experience GBV violence in the camps	75 (36.5%)	65 (31.7%)	20 (9.7%)	25 (12.1%)	20 (9.7%)
2.	Women are raped in the camp	80 (39.0%)	65 (31.7%)	15 (7.3%)	20 (9.7%)	25 (12.1%)
3.	Women are forced into hard labour	68 (33.1%)	72 (35.1%)	30 (14.6%)	20 (9.7%)	15 (7.3%)
4.	Women are deprived of basic needs in the camp	57 (27.8%)	83 (40.4%)	18 (8.7%)	12 (5.8%)	35 (17.0%)
5.	Women are sexually abused	100 (48.7%)	80 (39.0%)	5 (2.4%)	10 (4.8%)	10 (4.8%)
6.	Woman are discriminated at WASH facilities	35 (17.0%)	30 (14.6%)	20 (9.7%)	50 (24.3%)	70 (34.1%)

From Table 2, item 1 illustrates the experiences of women with Gender-Based Violence (GBV) in the IDP camps, revealing that 36.5% of the respondents strongly agreed that women indeed encounter GBV in the camps. Additionally, 31.7% of the respondents agreed with this statement, while only 9.7% were undecided or did not disclose their position to the researcher during data collection. This indicates that 68.2% acknowledge gender-based violence as one of the prevalent forms of violence against women in the displacement camps in Maiduguri, Borno State. Meanwhile, 12.1% strongly disagreed, and 9.7% disagreed, respectively. Based on the aforementioned percentages, one can conclude that women in IDP camps are, indeed, victims of GBV.

The qualitative data also revealed the position of women in the displacement camps when they were asked about their opinion on gender-based violence. One of the respondents has this to say:

> Many women in the IDP camps experienced sexual abuse, physical abuse and psychological abuse. Women are also faced with the challenges of raising their children as a result of the death of their husbands at the hands of Bok Haram before joining the camp, and some of the men have even joined Boko Haram as foot soldiers (Female 1 respondent, 2023).

Fulu et al. (2013), on the other hand, were of the view that sexual violence often stems from experiences of childhood sexual and emotional abuse, having multiple sexual partners and engaging in transactional sex. But in Maiduguri IDP's camps, the reverse is the case as most of the IDPs have never experienced sexual violence from their childhood; as such, it's come to them as something strange and against their religious teachings as Muslims. Thus, the above qualitative results confirmed the quantitative data result in Table 2, Item 1, which means that women in the camps are victims of gender-based violence.

Item 2 on the table sought to know if there are rape cases in the camps, and it was discovered that 39.0% and 31.7% of the respondents strongly agreed and agreed, respectively, that there are victims of rape within the camps as it can be seen in an item on table 2 above.

While 7.3% could not respond to this aspect of the question reason base is known to them, and only 9.7% strongly disagreed with the above statement; therefore, these results proved that women are being raped in the IDP camps. Item 5, which is set to uncover whether or not women experience sexual abuse in the IDP Camps, the findings indicated 48.7% strongly agreed and 39.0% agreed, which indicates that 87.7percent of the women confirmed the existence of sexual abuse among the women in the IDPs camps as it can be seen on the table above. However, 2.4% could not take a position; as such, they were left undecided, and 4.8% of the respondents disagreed and strongly disagreed. This indicated that women are sexually abused in the IDP Camps based on the percentage of the respondents with 87.7%.

In another response by one of the female respondents on which types of gender-based abuses they experienced, the respondents lamented that:

> Women experienced many types of violence ranging from sexual violence, physical abuse, psychological abuse, and social abuse and apart from that, we also experienced different types of segregation when it comes to the distribution of goods where those who are close or have personal relationships with the officials benefits more than those who do not have in the camp as they are given more share more than their mates (Female respondent 2 2023).

While responding on how safe they are in the camps, respondents from NYSC camps stated that:

> Leaving the IDP camp is not a palatable option because there are issues of gangsterism, prostitution, rape, diseases and early girl child marriage and so on. One other thing is that for you to get food from the camp in time, you have to establish a relationship with the officials where they may demand something in return, or you will not get anything or enough. This is where the sexual abuse comes in. This is an opportunity for them to get what they want from the women in the camps. (NYSC, Respondents, 2022).

These responses correspond with the responses in Table two on items 1 and 2, which further confirmed that women are really facing gender-based violence in the camps for many reasons, particularly if they want to get recognition and enough food in the camp. Some have to offer themselves for such abuses. This also means that the camps are not safe or free of gender violence.

Table 4.3: Effect of violence on women

S/N	Effect of violence on women	SA	A	UN	SD	D
1.	Violence makes women to lose their self-esteem and self-efficacy	57 (27.8%)	83 (40.4%)	18 (8.7%)	12 (5.8%)	35 (17.0%)
2.	Women lose their source of income as a result of violence	35 (17.0%)	30 (14.6%)	20 (9.7%)	50 (24.3%)	70 (34.1%)
3.	Girls stay out of school or drop out of school as a result of violence against them	75 (36.5%)	65 (31.7%)	20 (9.7%)	25 (12.1%)	20 (9.7%)
4.	Violence in the form of rape results to unwanted pregnancies and diseases in women	68 (33.1%)	72 (35.1%)	30 (14.6%)	20 (9.7%)	15 (7.3%)
5.	Violence makes women experience mental health issues such as depression, trauma, stress, etc	100 (48.7%)	80 (39.0%)	5 (2.4%)	10 (4.8%)	10 (4.8%)
6.	As a result of sexual abuse, women experience VVF	80 (39.0%)	65 (31.7%)	15 (7.3%)	20 (9.7%)	25 (12.1%)

Source: Field Survey, 2022

Table 4.3 shows the effect of violence on women. Item 1 indicated that violence makes women lose their self-esteem and self-efficacy, where 27.8% strongly agreed, and 40.4% agreed that violence makes women lose their self-esteem and self-efficacy, and 8.7% were undecided, while 5.8% and 17.0% disagreed with the statement. The total percentages show that 61.1% of respondents confirmed that gender-based violence has serious effects on the victims of gender violence, as can be seen in the table above. The table also revealed that gender-based violence led to unwanted pregnancy as well as VVF, as indicated in the quantity data analysis above.

The qualitative data analysis also corresponded with the quantitative results where respondents from focus group discussions lamented that:

> The effects of gender-based violence are many, such as depriving us of education and health care services, leading to early marriage, as well as victims of sexually transmitted diseases and even death arising from the trauma and physical abuse from the hand of Boko haram (FGD with female respondents, 2023).

Item 2, on women losing their source of income as a result of violence, showed that 17.0% strongly agreed and 9.7% were undecided, while 34.1% of the respondents disagreed with the statement.

DISCUSSION

The research empirically established that 68.2 percent of women residing in IDP camps reported experiencing gender-based violence (GBV), predominantly attributed to their separation from husbands or the loss of their partners due to the Boko Haram insurgency. This situation has been exploited by perpetrators who exploit these vulnerabilities for their advantage. Support for these findings is provided by Garcia, Moreno, Jansen, Elsberg, Heise, and Watts (2016), who highlighted a pervasive trend of violence against women in IDP camps. Additionally, Ward and Vann (2012) elaborated on GBV to encompass actual, attempted, or threatened acts of rape (vaginal, anal, or oral). Their assertion aligns with the present research, wherein 70.7 percent of women in the IDP camps reported incidents of rape, as illustrated in Table 2. Onuoha and George (2015) further emphasised that forced displacement—often stemming from conflict, the breakdown of the rule of law, and the collapse of familial and community structures—increases the frequency and severity of gender-based violence. This indicates that internally displaced persons (IDPs), particularly those affected by insurgent activities in Maiduguri, Borno State, fall into the category of forced displacement that precipitates GBV, as suggested by Onuoha and George (2015). Furthermore, this study confirmed the prevalence of sexual abuse, with 87.7 percent of female respondents reporting such incidents within the IDP camps, corroborated by findings presented in Table 2. This assertion aligns with reports from the Norwegian Refugee Council (2013), which stated that women and children remain highly vulnerable to sexual and gender-based violence. In contrast, Tjaden and Thoennes (2000) reported higher instances of male victimization in developed countries like the United States, estimating approximately 2.9 million male victims of violence. This comparison elucidates that the experience of abuse varies across cultures and societies. In northeastern Nigeria, however, women face heightened vulnerability to gender-based violence,

with Bazza (2010) identifying sexual harassment as the most predominant form of GBV against women. Furthermore, the study challenges the notion posited by certain media scholars, including Nwabueze and Oduah (2013), who argue that sexual violence is underreported in the media due to the associated stigma. Given the prevailing conditions, women and girls in IDP camps are especially susceptible to various forms of GBV, particularly those arising from forced displacement. This study demonstrates the prevalence of sexual abuse, often resulting in unwanted pregnancies within the camps. Conversely, the research observed that non-governmental organisations have made significant strides in providing WASH (Water, Sanitation, and Hygiene) facilities in the IDP camps in Maiduguri, with no reports indicating discrimination in the access or use of these facilities.

Conclusion

This study aims to illuminate the prevalent forms of violence against women within internally displaced persons (IDP) camps, with the intent of guiding policymakers in developing effective solutions. The findings indicate a significant incidence of gender-based violence, particularly sexual violence, which can lead to unwanted pregnancies. Alarmingly, perpetrators of such acts frequently evade punishment and prosecution in accordance with the law. Moreover, the research reveals that some perpetrators exploit the context of relief distribution, which is often inadequate and inequitably allocated. Consequently, individuals seeking sufficient resources to survive become vulnerable to abuse, not out of desire for such treatment but due to their dire necessity for sustenance in the camps.

Recommendations

Based on the research findings and subsequent conclusions, the following recommendations are proposed:

1. Newspapers should enhance their reporting on gender-based violence within Internally Displaced Persons (IDP) camps, thereby fulfilling their role as advocates for marginalised voices in alignment with the principles of the social responsibility theory of communication.
2. The government is urged to augment the presence of female law enforcement personnel in IDP camps to bolster the security of women residing in these environments.
3. It is essential to strengthen the legal framework governing the prosecution of gender-based violence cases in humanitarian contexts nationwide, with a particular emphasis on Maiduguri.
4. All levels of government, non-governmental organisations (NGOs), and human rights activists are encouraged to closely monitor reports of gender-based violence in IDP camps, ensuring that perpetrators are publicly reported, sanctioned, and prosecuted in an appropriate manner.
5. Furthermore, the government should develop a policy aimed at expediting the sanction and prosecution of offenders through state assemblies, thereby facilitating more timely legal responses.

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