

Covid-19 and Sexual/Gender-Based Violence (SGBV): The Experiences of Women and Children in Locked-Down Homes in Nigeria.

Mary Juachi Eteng

Department of Sociology, Alex Ekwueme Federal University Ndufu-Alike,
Ebonyi State, Nigeria; Email: mary.eteng@yahoo.com

Emmanuel Chimezie Eyisi

Department of Sociology, Alex Ekwueme Federal University Ndufu-Alike,
Ebonyi State, Nigeria; Email: mezieeyi@gmail.co

Correspondent Author: mary.eteng@yahoo.com

Abstract

Empirical evidence from reliable institutions show that COVID-19 exacerbated Sexual and Gender-Based Violence (SGBV) on women and children, because the restriction of movements imposed by the State to curb the spread of the virus unfortunately locked down women and children at home with their abusers without opportunities for escape or external intervention. The paper was guided by the insights provided by the political economy and radical feminist theories which formed the framework. This is because the Nigerian patriarchal society engendered inequalities, alienation and structural violence which formed the basis for domestic violence against women. Descriptive research design was used as a method of study. The paper explored secondary data using official statistics from government ministries, departments and agencies, journal publications and reports from the national and international non-Governmental organizations (NGOs). Data were analyzed using content analysis to ensure the validity and reliability of the data. The types and dimensions of SGBV; the major triggers of the SGBV; the quantum leap in the SGBV incidents and the impact of the SGBV on women, children and the family during the lockdown were the major objectives of the paper. Findings showed an exponential increase in SGBV incidents; increase in SGBV triggers such as economic alienation, increased alcohol and substance intake; and severe impact on women and children all round well-being. The paper recommends a revitalization of social security and social services; the strengthening of institutions that will make relevant agencies' response to SGBV incidents swifter as well as structures that will address gender inequality, economic and social injustice in the society.

Key words: *COVID-19, gender, sexual violence, lockdown, home, vulnerability*

Introduction

COVID-19 pandemic has continued to exacerbate the global socio-economic challenges. The impact of the virus on the political, economic, social, and even the religious lives of the world citizens remain obviously unsavoury. The health, housing, family and socio-psychological situation of the most vulnerable (women, the girl-child, the elderly and the physically challenged) have severely worsened (World Health Organisation [WHO], 2020). While the deleterious effect of the pandemic on the global economy has been obvious, the situation in the developing economies has been devastating (Gutterres, 2020). Lackluster political leadership, weak institutional capacity, poor structural economic base, dearth or decaying infrastructure and non-descript social security have combined to undermine a robust response to the COVID-19 pandemic challenge in the emerging nations. The Organization for Economic Co-operation and Development (OECD, 2020) showed that the global Gross Domestic Product (GDP) for instance which slowed to 2.9% in 2019 dropped further down to 2.4% in 2020. The world health architecture was over stretched because of the unprecedented surge in COVID-19 cases (Lambert et al., 2020), education was disrupted such that 2/3 of the population were compelled to stay out of school (United Nations Educational, Scientific and Cultural Organization [UNESCO], 2020). The infrastructural deficit engendered worsening urban habitation difficulties (Lambert, 2020). Again, the virus orchestrated lockdown surreptitiously deprived citizens of the well cherished rights and democratic freedoms (Yuval, 2020).

In Africa, the problems of poor economy, poverty, decrepit housing, infrastructural deficit, fragile state structure and rights deprivation, unemployment deteriorated considerably due to COVID-19 pandemic. IMF Regional Economic Outlook report on Sub-Saharan Africa showed -1.6% negative economic growth rate in 2020 for Africa (International Monetary Fund [IMF], 2020). The World Bank 2020 report also showed a sharp fall in Sub-Saharan African GDP from 2.5% in 2019 to -2.1% in 2020 (World Bank, 2020). It is established that 71 million of COVID-19 induced global poverty reflect mostly the African situation.

Eteng & Eyisi

Nigerian GDP decreased by -6% in 2020 due to the COVID-19 shutdown (Soludo, 2020). The remittances from African migrant workers in Europe and America that formed a large chunk of family income and national revenue became obstructed because of the constricted global economy. Poverty situation worsened because the lockdown generated situations that denied people the opportunities to engage in activities that ensured sustained existence. There was loss of jobs and loss of businesses for the majority of low-income group. The urban poor who depend on a daily income to feed themselves and their families through their various informal businesses were the hardest hit.

The mitigation efforts of government through provision of palliatives and economic boosting measures hardly addressed the issues due to lack of social security structures and mismanagement of the programme (Njoku, 2020). The recent report from World Bank showed that 7 million Nigerians slipped into abject poverty in 2020 due to COVID-19 pandemic (World Bank, 2021). This study will dissect the following objectives:

1. Incidence of gender-based violence in Nigeria
2. The quantum leap of gender-based violence as engendered by COVID-19 lockdown
3. The triggers of gender-based violence under the lockdown
4. The impact of gender-based violence on the women and the girl-child
5. State intervention efforts at addressing gender-based violence.

Theoretical Framework

It is important to highlight the nature of Nigeria's dependent capitalist state to understand why the Nigerian state lacks the necessary buffers required for fiscal relief for its citizens in times of crises such as COVID-19. Nigeria's political economy is, among other things, characterized by: Perennial dependence of the national economy on foreign productive forces, such as foreign technology, raw materials, finance capital and managerial know how; Low and inefficient capacity utilization; acute financial, material and human resource mismanagement and waste; a system of inequitable and discriminatory distribution and allocation of wealth, resources and opportunities; permanent socio-economic and political instabilities as well as ingrained corruption

(Eteng, 2015). Nigeria depends on bilateral and multilateral support to even fund and implement her budget. As a dependent economy, Nigeria is exposed to the vagaries of exogenous shocks, a situation which worsened under COVID-19 pandemic experience. This structure of Nigerian economy has borne directly on state policies and strategies of governance.

The Radical Feminist theory, which sees the underlying causes of gender inequity and inequality as engendered by the patriarchy and deeply rooted in the society, with the women at the receiving end, also constitutes the guiding theoretical framework of interest for this study. The framework enables us to seek explanations to the problem of women's vulnerability and relative powerlessness found in the patriarchy, a system which "describes a power relationship inherent in the structures and social relations within which the subordination and exploitation of women occur and it is used to explain the institutionalization of male power and domination over women" (Walby, 1980, p. 173-201 as cited in Burke, 2019, p. 243). Indeed, Nigeria has been described as "a society where patriarchy holds sway and certain salient socio-political structures (culture, religion, economy and polity) of the society are unjust and unbalanced, thus placing women on the receiving end, while men are at advantage" (Nnam et al., 2018, p. 35). Thus, emboldened by the patriarchal nature of the Nigerian society, and with the enabling environment created by the COVID 19 lockdown, women and girls became targets and victims of abuses and structural violence from the hands of men.

Methods

The study adopted theoretical and qualitative perspective based on the elucidation and analysis of secondary data. According to Haralambos and Holborn (2008), secondary sources of data include the following: official statistics, historical sources, life documents, mass media and internet sources. The study therefore leveraged on media-reports and other gender based journals and organisation for the procurement of data. Data were also elicited from National Agency for Trafficking in Persons (NAPTIP), Nigerian Police force and relevant ministries and agencies in the states and FCT administrations. We equally

Eteng & Eyisi

procured data from local and international agencies and Non Governmental Organisations (NGOs).

Data were analyzed using content and qualitative analysis. We ensured the integrity of the data by subjecting same to rigorous research scrutiny and authentication through content analysis. Our use of content analysis in exploring the relationship between the increasing incidents SGBV and COVID-19 pandemic lockdown is to ensure the integrity of the data. The data were thus descriptively analysed to not only enable discussion and conclusion but adequately deployed to cover analysis on the impacts of SGBV on women, the girl-child, the family and society.

The family under lockdown in Nigeria

Family as an institution has been subjected to different disquisitions; but its essence as a place of succour and abode for its members remains unchanged. Though theories have been adduced to explain the family from different dimensions; there is hardly any contention that the family remains the stabilizing force in capitalist societies. The conservative mainstream sociology espoused the essence of the family in contributing to the maintenance of the social system through reproductive, economic, educative functions as well as providing sexual regulation, social control, psychological and emotional stability (Murdock,1980 quoted in Haralambos and Holborn, 2008). Just like the functionalists, the Marxists contend that the family is fundamental to the stability of the capitalist system through its productive and reproductive mechanism (Engels, 1972)

The above postulations reveal the essence of the family as an integrative system as well as a place of abode, succor, and mutual support. The significance of the family rests largely on the fact that everybody spends the considerable span of his life within the family framework. Family remains the unwitting abode because in times of crises, we all return home. Family engenders deep, personal and emotional involvement of family members to each other (Morgan, 1996).

Relations between members of the family can be warm and fulfilling; but they can also contain the most pronounced tensions, driving people to despair and agony. In modern

societies, families have been beset by rising divorce rates, domestic violence, suicide and other consequences of modernity induced changes (Lehemanne & Wirtz, 2004). The COVID-19 lockdown has however compounded the already bad situation for the families. COVID-19 lockdown has raised issues of psychological trauma, emotional distress, poor health care system and economic dislocation among families. There has been growing concern on the safety and security of vulnerable members of the family, particularly the women and the girl-children as the restrictions imposed by the lockdown generated increasing incidences of SGBV.

Sexual and gender-based violence (SGBV)

Gender-based violence is violence directed against a person because of the person's gender or violence that affects persons of a particular gender disproportionately (European Commission, 2018). SGBV is perpetrated against men and women. Indeed, studies by Dienne & Gbeneot (2009); Kolbe & Burtner (2020) show that domestic and intimate partner violence against men is also widespread and cuts across national boundaries. However, this study is focused on the impact of domestic violence against women and the girl-child because for reasons that border on the patriarchal nature of the society, the women and the girl-child have been much more afflicted than men by SGBV (Bakere, Asuquo & Agomoh, 2010). According to Giddens and Sutton (2013) the main targets of physical abuse are children, particularly the girl-child, while violence by men against women is the most common type of SGBV. The issue of SGBV attracted popular and academic attention during 1970s as a result of the work undertaken by feminist groups (Giddens & Sutton, 2013). However, violence against women gained international attention during the world conference on women and human rights in Vienna, Austria in 1993 (Chukwuma, Osakwe, Ekpenyong & Imona, 2003).

Violence against women and girls is a global pandemic that affects one in three women in their life time (World Bank, 2019), and one of the most prevalent human rights violations in the world. It knows no social economic or national boundaries. It is one of the most profound forms of discrimination against women. SGBV takes different forms that include: domestic or intimate person's violence, sexual violence, female genital mutilations,

Eteng & Eyisi

forced marriage and online violence. While all the forms of violence are virulent on women, sexual and domestic violence are the most common crimes against women and the girl-child. Sexual harassment includes unwelcome verbal, physical or other non-verbal conducts of a sexual nature with the purpose or effect of violating the dignity of a person. It includes rape, attempted rape, unwarranted touching and non-contact forms (WHO, 2018).

Domestic violence includes all acts of sexual, psychological, and economic violence that occur within the family, domestic unit or intimate partners. (Gidden & Sutton, 2013). It is estimated that 22% of all women who have had a partner has experienced physical and sexual violence by the partner since the age of 15 (WHO, 2020). Indeed, 38% of murders of women globally are committed by the intimate partners (World Bank, 2017). The recent study by WHO indicated the prevalent estimates of life-time intimate partner violence in global regions ranged as follows:

1. Western Pacific----- 20%
2. Europe-----22%
3. America-----25%
4. Africa----- 33%
5. Eastern Mediterranean----- 31%
6. South-East Asia----- 33% (WHO, 2021)

In the same vein, domestic violence can impact in children in four categories: neglect, physical abuse, emotional abuse and sexual abuse (The National Society for the Protection of Cruelty to Children) quoted in Giddens and Sutton (2013). Sexual and emotional abuse are the most invidious on the children as the major victim in the family is the girl-child. According to Lyon and de Cruz (1993) sexual abuse is defined as the sexual contact between a child and adults for the purpose of the adult's sexual gratification.

SGBV and domestic violence are more virulent in Nigeria and Africa. Nigerian women have suffered physical and verbal abuses, psychological trauma and denial of economic rights at home by their partners and in most cases their partners' relatives (see for instance, Titilayo, Anuodo & Palemulere, 2017; Bakere et al, 2010). Domestic abuse in

Nigeria cuts across social class, religious persuasion, ethnic royalties and educational status. The woman is always the first target of aggression in the situation of a partner's frustration for reasons of loss of jobs, loss of business, sudden down-turn in economic fortune or even mere provocation from the place of work; the woman bears the brunt of childlessness or the sex of child; and the woman is the butt of the impact of national economic distress in the house. Studies have shown that 31.22% of Nigerian women have experienced one form of domestic violence in Nigeria (UNICEF, 2007). Reports by World Bank (2008) show that an average of 300-350 women are killed every year by their husbands, former partners, boy, friends or male relations.

The Nigerian girl-child has faced fundamental and cultural abuse in the home. For instance, the girl-child suffers genital mutilation and early marriage (Akpan, 2011). Studies by UNICEF (2009) showed that Nigeria has the largest number of child brides in Africa with more than 23 million girls and women who were married as children. The same study showed that one in every four girls and women (27%) have undergone female genital mutilation/cutting (FGM/C). The girl child is always subjected to physical, emotional and mostly sexual abuse in the home by family friends, family relatives such as uncles and cousins and even by fathers. Previous studies from Nigeria have shown the prevalence of Intimate Personal Violence (IPV) to range from 31-61% for psychological/emotional violence, 20-31% for sexual violence and 7-31% for physical violence (Benebo, Schumana & Vaezghasim, 2018). The UNICEF (2009) indicated that 6 out of 10 children experience some form of violence and one in every four girls have been victims of sexual abuse. The Nigerian SGBV and domestic violence situation has worsened under the COVID-19 pandemic and the attendant lockdown. The exacerbation of SGBV under COVID-19 lockdown in 2020 is reflected in the official records from the Nigerian Ministry of Women Affairs at Federal and state levels, relevant departments and agencies at Federal and State levels The Nigerian Police, international and national Non- Governmental Organisations. These issues will be discussed in the next section.

Increasing incidences of SGBV in Nigeria

The COVID-19 pandemic lockdown measures imposed by governments across the world to fight corona virus spread also engendered maladjusted behaviours that

Eteng & Eyisi

exacerbated pre-existence toxic social norms and gender inequality resulting in exponential increase in Sexual and Gender-Based Violence (SGBV) across the world. Restriction of movements and confining families at home while triggering Intimate Partner Violence (IPV) as well as risk of sexual exploitation unfortunately hampered access to SGBV services (UNHCR, 2020).

Data across the world show a steep rise in SGBV due to the pandemic lockdown. While the statistics even for the advanced countries of Europe, America and South-East Asia are alarming, the situation in developing countries elicits a major concern. This is because apart from the fact that the cases are under-reported, there is a culture of surreptitious acceptance of gender-based violence. A report published by United Nations Population Fund (UNFPA) indicated a prediction of 15 million more cases of intimate-partner violence for an average of six months restrictions on the basis of pandemic lockdown around the world. The report also estimated a 20% increase in violence in 193 United Nations member States during an average of three months lockdown (UNFPA, 2020).

Reports by the United Nations High Commissioner for Refugees (UNHCR) showed that its operations on SGBV in Afghanistan, Nigeria, Guatemala and Yemen indicated increase in gender-based violence in 2020, through their humanitarian co-ordination platforms (UNHCR, 2020). Reports by Kibira (2020) showed that police and civil society groups reported an upsurge in domestic violence in which a number of women lost their lives during the lockdown. Lockdown increased inequality and vulnerability of the poor particularly those living on a day's earnings thereby making the adolescent girls susceptible to transactional sex and violence in the hands of men. The result is an increase of unwanted pregnancy among teenagers during lockdown in Uganda (Kibira, 2020).

In Nigeria, the situation of SGBV in COVID-19 pandemic lock down is more serious. National Agency for Trafficking in Persons (NAPTIP) for instance reported 30 cases of domestic violence as at end of May, 2020 which was less than two weeks of the lockdown. This was unprecedented in the record of domestic violence in the country (The Nation, 2020). According to Vivour-Adeniyi, Coordinator of Lagos State Domestic and Sexual Violence Response Team, the cases of domestic violence have snowballed in Lagos State by

50%. Indeed, there has been an average increase of daily report of domestic violence from 8 to 15 cases (Vivour-Adeniyi, 2020). Also, empirical evidence from Dorothy Njemanze's Foundation confirmed an increase of domestic violence calls from six per week before the lockdown to twenty-eight per week during the lockdown (Njemanze, 2020).

Paulen Tallen Nigeria's minister of women affairs said that the number of abuse cases against women and children tripled during the lock down as victims are trapped at home (Salau, 2020). Reports across the 23 of the 36 states of the Federation and the six geo-political zones where data were available showed steep rise in the reported cases of gender-based violence between March and April 2020 when the lock down was introduced. The table below showed the reported cases of gender-based violence in Nigerian states between March and April 2020.

Table 1 indicate the number of reported cases of gender-based violence in Nigeria during March and April 2020 by States and Geo-political zones

Geo-political zones	States	No. of cases per states		No .of cases per zones	
		March	April	March	April
North-East	Adamawa	16	20	50	115
	Bauchi	9	30		
	Borno	6	26		
	Gombe	19	39		
North-West	Kaduna	6	26	52	87
	Kastina	23	33		
	Sokoto	23	31		
North-Central	Benue	30	52	67	156
	FCT	5	31		
	Nasarawa	5	20		
	Niger	2	8		
	Plateau	25	45		
South-East	Abia	25	46	36	92
	Anambra	3	32		
	Ebonyi	5	2		
	Enugu	3	22		
South-West	Ekiti	25	51	91	296
	Lagos	37	185		
	Ogun	18	22		
	Osun	3	18		
	Oyo	8	20		
South-South	Cross River	8	12	18	35
	Rivers	10	23		

Source: Federal and State Ministries of Women Affairs in Nigeria (in United Nations Nigeria, 2020)

Eteng & Eyisi

The data from the above table show overall increase of gender-based violence within the initial one month of COVID-19 lockdown experience across all the regions in Nigeria. Data on reported cases from 23 states and the six geo-political zones showed that the GBV reported cases in March, 2020 was 346 incidents while by April, 2020 when the lock down was imposed, the reported SGBV cases had leaped to 794 incidents. This reflects an exponential increase of 56% of reported SGBV within just one month of lockdown. The regional analysis of the above table showed that the South-West with 296 cases in April (from 91 in March, 2020 to 296 in April, 2020) has the highest cases from the regions, while South-South with 35 reported cases of GBV in April, 2020 (from 18 cases in March, 2020 to 35 cases in April, 2020) has the lowest cases of the regions. The record of the South-West can be explained by the fact that the region with the FCT suffered the first lockdown as announced by the Federal Government on 29th March, 2020, before other states.

Also, the Inspector General of Police confirmed the surge in cases of rape and gender-based violence with 717 rape incidents across the country in the five months of 2020. 50% of SGBV was reported in the same period in 2019 (Salau, 2020). Reports of the police for 2020 showed that 2, 792 suspects were arrested for SGBV and other related offences with other related allegations still under investigation (AIT News, 2021, May 7). With the third wave of COVID-19 spread and the government mooting the idea of new lockdown to contain the new Delta Covid-19 variant, there may be likelihood of upsurge in domestic violence.

Triggers of COVID-19 SGBV

Economic trigger

The 2020 report of Nigerian Bureau of Statistics (NBS) shows that 42% of Nigerians live below the poverty UN benchmark of \$1.5 a day. This approximates to about 80 million Nigerians suffering abject poverty. The Booking report of 2018 had proclaimed Nigeria with population of 110 million abject poor people on less than \$1.5 a day as the country with highest number of poor people in the world. The situation of the Nigerian poor reflects the parlous state of the Nigerian economy. With a GDP of \$448. 4 billion and a per-capita income of \$2, 149 (World Bank, 2019), Nigeria lacks the necessary buffers required

for fiscal relief in times of crises such as COVID-19. Nigerian budget for the economic stimulus and palliatives is a far cry when compared with the COVID-19 budget of the developed countries. For instance, USA, Japan and Britain budgeted \$2 trillion, \$ 1 trillion and \$750 billion economic stimulus packages and palliatives respectively to address the COVID-19 pandemic (Delloitte, 2020). Most African countries cannot afford such funds. Nigeria for instance budgeted less than \$4.2 billion in economic stimulus packages and palliatives to address COVID-19 pandemic in the country.

The Nigerian poverty situation does not guarantee the necessary buffer for the average family in terms of savings to go through minimum period of crisis or stress. Studies have shown that less than 5% of the population controls over 85% of bank deposits in the country. What it means is that the 95% of the population that control just 15% of the bank deposit cannot survive few days without income. Indeed, less than 5% of the population can sustain lockdown in days or weeks (Soludo, 2020). The period of lockdown increased the level of unemployment in the country. Unfortunately, most of those that have suffered unemployment are the poor who work with the Small and Medium Scale Enterprises (SMSEs) as they were the first casualties of the crises engendered by the lockdown. The government did not intervene as in other parts of the developed world to keep this sector of the economy afloat because of their vulnerability.

COVID-19 pandemic induced high inflationary trends also affected the poor deleteriously. The cost of basic essential items rose steeply, with inflation hitting 12.3% in the early days of lockdown (Adegboyega, 2020). The import of this situation is that most of the heads and breadwinners of families suddenly discovered that they could not take up their usual responsibilities of providing for their families. This has far reaching implications for the stability of the families within the lockdown period. The informal sector in Nigeria employs up to 80% of Nigerians through a wide range of occupations from street traders, taxi drivers, tradesmen and artisans to food vendors, hair dressers and saloon. Informal workers have lower income, often do not have savings, health insurance and pensions that provide a basic safety net and 72% are poor (Ewang, 2020).

Eteng & Eyisi

Unfortunately, the government and other organisations and individuals' economic stimulus and palliative packages deployed to mitigate the situation seem not to have been adequate and effective. In the first place, the palliative was targeted for just 3.6 million people in a country where over 80 million people are officially poor (NBS, 2020). This excludes those who have become poor by virtue of loss of their means of livelihood due to COVID-19 pandemic lockdown. Secondly, the distribution of the palliatives was bereft of any strategic and organisational competence. The result was that most of the targeted 3.6 million people were denied of the palliative. Thirdly, the entire palliative process became politicised and so corrupt laden that the essence was caught up in a political imbroglio among political elements of opposing political parties. In the process much of the palliative was diverted to serve base political interests (Njoku, 2020).

The socio-economic impact of the pandemic on the poor families pushed the poor households to turn to desperate measures just to survive. Children faced increased risk of child labour or sexual exploitation of child marriages as families struggle to meet their daily needs. These increased incidences of domestic violence especially against women, children and other vulnerable groups (Njemanze, 2020). COVID-19 lockdown induced despondency, anxiety, frustration and stress increased situations of depression, paranoia, alcoholism and domestic violence; with the women and children becoming deleteriously impacted (Ojeahere, 2020).

Lockdown residential trigger

A major trigger to SGBV during COVID-19 pandemic lockdown was the confining of members of the family, particularly women and children with their abusers who are mostly the fathers, husbands, friends or other intimate partners. The vulnerable members experienced life-threatening risks of physical and sexual abuses and violence with a reduced ability to seek help or escape. Unfortunately, the residential conditions for most people in the country are dehumanizing and characterized by overcrowding, constricted space and dearth of infrastructure. However, COVID-19 has had a most telling effect on the family, particularly the nature of the relationship among members of the family. The family is the place where everybody was forced willy-nilly to stay due to the COVID-19 lockdown.

The compulsory restrictions of everybody to the home irrespective of peculiar life nuances presented their own social, economic, psychological and intimacy challenges. The lockdown experience worsened the situation in most African families where poverty, slum dwelling, and poor health care system have become the lot of many homes.

Again, the COVID-19 pandemic lock down by placing restrictions on people from escaping the excruciating living conditions at home generated disquieting pathological conditions. Staying out of home for the greater part of the day either due to work, business or social engagement provided escape routes from the unbearable housing conditions thereby maintaining emotional balance. Enforcing COVID-19 lockdown order was bound within horrible housing conditions was to create emotional and mental instability at home. The most devastating impact of degraded housing conditions during the lockdown is unprecedented upsurge in SGBV and domestic violence.

Lockdown and inaccessibility to SGBV services trigger

For many families, COVID-19 pandemic lockdown was a period of anxiety, emotional stress and traumatic experience. What triggered SGBV during the lockdown was the inability of the victims of domestic physical and sexual violence to elicit help or protection from gender support services or the law enforcement agents. The lockdown compromised access to support services and justice. In the first place, many one-stop centres and domestic abuse shelters were compelled to close. Strict movement restrictions meant that survivors were unable to access these centres and shelters.

Secondly, lockdown also meant that the Non-Governmental Organisations (NGOs) and non-state actors that provide legal protection and counselling for the gendered victims of violence could not be accessed by the victims. Thirdly, the police officers assigned for the family and support units were mobilized to enforce lockdown thereby undermining the capacity of police to respond to urgent rescue calls for gender-based violence. Fourthly, lockdown also meant that the court system would be inaccessible to the victims of SGBV for the elucidation of justice. More importantly, the necessary protection mechanisms provided by the courts through injunctions and restraining orders that would save emergency situations for the vulnerable members of the family were lost to lockdown.

Eteng & Eyisi

Inability to access these services during COVID-19 lockdown not only amounted to miscarriage of justice but exacerbated SGBV because the perpetrators knowing that they would not be restrained became more emboldened in their impunity.

Discussion

The exacerbation of SGBV in Nigeria due to lockdown as shown in the above findings had long lasting deleterious psychological, economic, social and most importantly health hazards on the entire spectrum of society cutting across class, religious, ethnic and sex groups. However, our discussion of the effects of SGBV will be restricted to the women, the girl-child, the family and the society. This is done with the intention of putting our discourse within the contextual perspective.

Impact of SGBV on women

Women have endured a most excruciating situation as a result of exposure to domestic physical and sexual violence in various dimensions.

Economic impact: A major effect of domestic violence on women is the denial of right to participate in family economic activity as they are alienated from family economic resources as socially required; where women participate in family business, they participate in unequal terms. Another consequence of SGBV is the inability of women affected by domestic violence to access paid employment. In some cases, the men forcibly stop their wives from gaining paid jobs so as to scuttle women economic independence. Furthermore, violence against women in the home leads to loss of workdays, lower productivity and lower income. Reports from UN General Assembly (2006) showed that a woman loses 5 days of paid work for each incident of IPV. Overall, women suffered more economic strangulation under COVID-19 pandemic lockdown than the men and this undermined their contribution economically to the family and the society.

Psychological and emotional disturbance: Women suffered depression, frustration, fear, emotional instability and psychological problems. Studies by WHO (2017) showed that women who have experienced IPV, were almost twice as likely to experience depression,

alcohol abuse and solitary tendencies. Yinkore (2020) reported that the major mental health issues suffered by victims of IPV during the lockdown were mood swings, depression and struggling to stay positive for the children. Women who experience IPV live in constant fear of attack, and this demeans the dignity of womanhood. Women and children who could not escape in periods of abusers` fury were stuck with them in the homes under palpable fear of their next violence acts.

Domestic violence inflicts psychological and emotional scar, neurotic imbalance and mental fatigue on women.

Health implication: IPV can negatively affect women`s physical, mental, sexual and reproductive health. Other health implications of SGBV on women include:

1. Physical injuries on women. WHO (2017) report shows that 42% of women who experience IPV report physical injuries because of violent attack.
2. Unintended pregnancies induced abortion, gynecological problems and sexually transmitted infections (STI). WHO (2017) study on the health burden associated with violence against women found that sexually women were 1.5 times more likely to have STI.
3. Miscarriages, still births, pre-term delivery and low birth babies.
4. Migraine, pain syndrome, gastrointestinal disorder and limited mobility
5. Disillusionment, depression, frustration and trauma suffered by women due IPV undermine women`s ability to care for themselves and their children, increase isolation and shorten life expectancy.

Effects of SGBV on the girl-child

The girl-child has suffered disruption in her course of life because of her vulnerability and subjection to physical and sexual abuse in the hands of the people they are supposed to feel safe in the home, the school, the community that include the teachers, uncles, family friends and parents. To begin with, the girl-child has suffered disruption in her educational pursuit when sexual assault on her results in unwanted pregnancy, sickness or traumatic experience. Reports from the WHO (2017) studies show that 23% of the girls drop out of school across Africa due to sexual violence or rape, and 37% of sexual

Eteng & Eyisi

assault on the girl-child are committed by the teachers. Other effects of SGBV on the girl-child include:

1. Unsafe abortion, unwanted pregnancy and STI.
2. Physical and sexual violence; often resulting in physical and psychological injuries, trauma, suicide ideation and deaths.
3. Undermines health, dignity and autonomy of adolescent girls.
4. Depression, post traumatic experience, anxiety disorders, sleep difficulties, eating disorders etc.
5. Range of behavioural and emotional disturbances that may affect future relationships.
6. Increasing recourse to substance abuse, alcoholism and smoking as well as risky sexual acts among the adolescents.
7. Child marriage, particularly during the lockdown. Nigeria with 23 million married children, has the highest number of child marriages in Africa.

Effect of SGBV on the family

SGBV has transformed homes particularly during the lockdown into centres of conflict, crisis and fear; with relations among family members put under enormous pressure. The violence in the families has eroded cherished values and norms such that the families cannot fend for themselves. Minor incidents and provocations precipitate full scale hostilities between partners and between parents and children. Family crisis degenerated during the lockdown because of the economic stress, increasing substance abuse, alcoholism and consequent increasing incidents of IPV.

A major impact of SGBV particularly during COVID-19 lockdown in the family is the alienation of the men from economic activities. This has implications for the stability of the family. Again, men who are subjected to physical abuse, verbal abuse, denial of food and sometime sex as well as lockout by their partners end up suffering drug and alcohol abuse, trauma, mood disorders and suicide (Hires & Douglas, 2009). According to Kolbe and Buttner (2020), the inability of men to cope with GBV from their partners and sometimes

from their children may lead to aggressiveness, fear, anger, anxiety, disturbance of eating and sleeping patterns and divorce. Unfortunately, the family whose members including the man suffer some forms of GBV may become dislocated resulting in its incapacity to fulfill the role of family to members and the society.

Effects of SGBV on the society

SGBV increased gender inequality and instability in the society. It increased criminality, particularly physical assaults, homicide cases and suicide. SGBV stretched the society's law enforcement agencies, particularly the agencies assigned to provide support and protection to victims of SGBV. SGBV also increased economic waste especially in the investigation and prosecution of gender based violent cases. The World Bank report (2017) on gender-based violence notes that violence against women is not only devastating for survivors of violence and their families, but also entails significant social and economic cost. In some African countries including Nigeria, violence against women is estimated to cost countries up to 3.7% of their GDP-more than double what most countries spend on education. Studies across the globe showed that the annual cost of IPV were calculated at \$5.8billion for USA; \$1.1billion for Canada; and \$11.38 billion for Australia; while domestic violence cost \$32.9 billion in England and Wales (UN, 2006). With the exacerbation of IPV in 2020 due to COVID-19 lockdown, the appropriation for SGBV budget will exponentially increase.

Efforts at addressing SGBV in lockdown

There have been considerable efforts at global, regional and national levels at addressing sexual and gender-based violence. The United Nations General Assembly and her agencies such as United Nations Children's Fund (UNICEF), United Nations High Commission for Refugees (UNHCR), United Nations Population Fund (UNFPA), World Health Organisation (WHO) as well as the World Bank have addressed the issues of gender based violence through conventions, charters and declarations through women and girl-child rights. Also, the African Charter on Human and Peoples rights of women in Africa was adopted by the African Heads of States in Maputo, Mozambique in 2003 to address gender and girl-child issues in Sub-Saharan Africa.

Eteng & Eyisi

Nigeria has had a surfeit of agencies, ministries, departments and Acts at national and state levels dedicated to addressing issues of gender and girl-child sexual and physical violence. Some of the agencies include Ministry of Women Affairs, National Agency for Trafficking in Person (NAPTIP), Nigerian Human Rights Commission (NHRC), Nigerian Child Right Acts, and Violence Against Persons Act etc. There have also been rapid response teams set up at different states to respond to violence against vulnerable person, particularly women and children both in the homes, neighbourhoods and schools. Professional bodies such as FIDA, NAWOJ as well as foundations and Non-Governmental Organizations have added their efforts in addressing gender-based and girl-child physical and sexual abuse. Exponential increase in SGBV incidents during the lockdown necessitated the intensification of new strategies and response squads towards robust reaction to the incident's reports.

Despite these efforts, gender-based violence has not abated, rather they have increased. Cultural inhibitions, religion, ethnicity and social class have undermined efforts at achieving set objectives. Also, lack of coordination amongst key holders and poor implementation of legal framework combined with entrenched discriminatory norms and lackluster political will have hampered government and civil society efforts to address gender-based violence. The efforts have been further compounded by the COVID-19 pandemic lockdown (Titilayo, Ominsakin & Ehindero, 2020).

Conclusion

It is an indisputable truism that violence against women and the girl-child occur in the places and in the hands of persons where they ought to feel secure and safe. This situation reflects deepening gender inequality and discrimination and assailed by inequity in access to economic, social and political societal resources. Unfortunately, SGBV cuts across all societal strata and sectors as well as countries and regions of the world.

This very bad situation of SGBV deteriorated deleteriously around the globe with the emergence of COVID-19 and the attendant measures that compelled all the family members including the infamous abusers into confinement with little or no avenue for

escape. The exponential increase of SGBV was obvious. The impact was felt more in the developing countries because of the peculiar circumstances that could not assuage the excruciating circumstances of the lockdown conditions in the developing countries. These peculiar circumstances that include: a parlous economy, crushing poverty, horrible housing conditions and incapacity of accessing already decrepit gender-based support services became the triggers that fueled the conflagrations of SGBV during the lockdown.

The state's efforts through its agencies on gender and children's issues have been hampered by lack of political will and coordination among the agencies. But more importantly, the fundamental issues in gender violence are yet to be addressed. The impact of the SGBV has been devastating, particularly on the women, the girl-child, the family and the society. The intensity of the SGBV in lockdown has inflicted scars that have remained significant even after the COVID-19 pandemic lockdown relaxation.

In view of the above, the study recommends the following:

1. The revitalisation of social security system and social services that will address the problems of the vulnerable groups in the society.
2. The strengthening of the institutions that will make relevant agencies respond effectively and swiftly to distress calls on gender violence particularly in emergencies such as COVID-19 pandemic lockdown.
3. Reinvigorate the legal framework that will effectively implement surfeit of legislations and acts and legislations on gender violation and children rights including the girl-child protection.
4. Create structures that will address gender inequality, economic and social justice;
5. Create a strong diversified economy that can act as buffer to shocks such as COVID-19 pandemic;
6. Prioritise health, education, housing, electricity, water and poverty reduction appropriation to meet international standards in budget allocation. For instance, the Nigerian State can start with raising budgetary allocation to health from present 4.5% to the African Union recommendation of 15% and education from the current

Eteng & Eyisi

7%, to the United Nations Educational, Scientific and Cultural Organisation (UNESCO) recommended standard of 20%.

7. Provide strong counselling service centres to provide support to the victims of SGBV, and save them from psychological and emotional traumatic experiences;
8. Support strong advocacy and campaign across the schools, neighbourhoods, market places, and bureaucracies etc to sensitize the populace on the harmful effects of SGBV.

References

- Adegboyega, A. (2020, June 13). Nigerian inflation reaches 23 month high. *Premium Times*. African Independent Television (2021, May 7). News at 8. Retrieved from <http://www.ait.com/news/world-africa>. Accessed 11May, 2021
- Akpan, D. (2011). Violence against women: The policy dimension. *Journal of International Gender Studies*, 7, 169-176.
- Bakere, M., Asuquo, M., & Agomoh, A. (2010). Domestic violence and Nigerian women: A review of the present state. *Nigerian Journal of Psychiatry*. 8 (2).
- Benebo, F., Schuman, B., & Vaesghasim, M. (2018). Intimate partner against women in Nigeria. *Journal of Women Health*. 18 (136).
<https://bmc.womenshealth.biomedcentral.com> .
- Burke, R. H. (2019). *An introduction to criminological theories* (5th ed.). New York: Routledge.
- Chukwuma, E., Osakwe, B., Ekpenyong, U., & Imona, M (2003) (eds). No safe haven: An annual report of attacks on women in Nigeria: Project alert on violence against women. Lagos: Mbeji and Associates.
- Deloitte (2020). *Global COVID-19 governments response*. Retrieved from <https://www.deloitte.com>. Accessed 27 May, 2021.
- Dienye, P., & Gbeneot, P. (2009). Domestic violence against men in primary care in Nigeria. *American Journal of Men`s Health*. 3 (4): 333-339
- Engels, F. (1972). *The Origin of the family, private property and the State*. London: Lawrence & Winhart.

- Eteng, M. J. (2015). "Leadership, Corruption and Underdevelopment in Nigeria: A Political Economy Analysis" in *International Journal for Research in Arts and Social Sciences* (IJRASS) Vol.8,No.2, 143-157.
- European Commission (2020). *Ending gender based violence (2020-2025)*. Retrieved from <http://www.ec.europa.com/gender-equality>. Accessed 18 March, 2021.
- Ewang, A. (2020). Nigeria: Protect the most vulnerable in COVID-19 response. *Human Rights Watch*. Retrieved from <http://www.hrw.org>. Accessed 14 May, 2021.
- Giddens, A & Sutton, P. (2013). *Sociology*. New Delhi: John Wiley & Sons Inc.
- Gutteres, A. (2020, September 21). *Covid-19 has laid bare the world fragilities: United Nations 75 years Anniversary*. Channels News at 10.
- Haralambos, M., Holborn, M., & Heald, R. (2008). *Sociology: Themes and perspectives* (7th ed.). London: HarperCollins.
- Hires, D., & Douglas, E. (2009). Women`s use of intimate partner violence against men: Prevalence, implications and consequences. *Journal of Aggression, Maltreatment and Trauma*: 572-586. <https://doi.org>
- Kibira, D. (2020). *Health action international: The hidden impact of COVID-19 on sexual and reproductive health*. Retrieved from: <https://hairweb.web>. Accessed 7 November, 2020.
- Kolbe, V., & Buttner, A. (2020). *Domestic violence against men: Prevalence and risk factors*. Retrieved from <https://www.acbi.gov>. Accessed 3 October, 2021.
- Lambert, M., Grupt, J., & Fletcher, H., (2020). COVID-19 as a global challenge: Towards an Inclusive and sustainable future. *The Lambert Planetary Comment*, 4(8).
- Lehemann, P & Wirtz, C. (2004). *The House hold formation in EU-Lone Parents*. Brussels: Eurostat.
- Lyon, C. & Cruz, P. (1993). *Child abuse*. London: Family Law.
- Morgan, D. (1999). *Family connections: An introduction to family studies*. Cambridge: Polity.
- Nigerian Bureau of Statistics (2020). Annual report: 40% of Nigerians live below poverty line.

Eteng & Eyisi

- Njemanze, D. (2020). *Dorothy Njemanze Foundation*. Retrieved from <http://www.dnf.org.ng>. Accessed 17 June, 2021.
- Njoku, L. (2020). *Why controversy over FG COVID-19 palliative persists*. Retrieved from: <https://m.guardian.ng>. Accessed 2 June, 2021.
- Nnam, M. U., Arua, M. C., & Otu, M. S. (2018). The use of women and children in suicide bombing by the Boko Haram terrorist group in Nigeria. *Aggression and Violent Behavior, 42*, 35-42.
- Organisation for Economic Co-operative and Development (2020). *Covid-19 in Africa: Regional socio-economic implications and policy priorities*. May 7, 2020
- Ojeahere, M. (2020, May 1). *Global COVID-19 lockdown: Are we compromising the emotional status of our children?* Premium Times.
- Salau, T. (2020). *Addressing sudden gendered violence in locked down Nigeria*. Retrieved from women`s mediacentre.com. Accessed 3 October, 2021.
- Soludo, C. (2020). Can Africa afford lockdown? *African Regional Policy Platform*. Accessed April 24, 2020.
- Titilayo, A., Amuodo, O., & Paramuleni, M. (2017). Family type, domestic violence and under-five mortality in Nigeria. *Journal of African Health Sciences, 3* (2): 538-548. <https://www.ncbi.nlm>.
- Titilayo, A., Omisakin, A., & Ehindero, A. (2013). Influence of women`s attitude on the performance of gender-based domestic violence in Nigeria. *Indian Journal of Gender Studies, 12*(2).
- United Nations General Assembly (2006). Costs of gender based violence. Retrieved from: <https://www.un.org>. Accessed 27 June, 2021.
- UNESCO (2020). *Education: From disruption to recovery*. Retrieved from <https://en.unesco.org/covid-19/edu>. Accessed 29 May, 2021.
- UNICEF (2007). *Child protection*. Retrieved from <http://www.unicef.org>. Accessed 26 March, 2021
- UHHCR (2020) *Sex and gender based violence*. Retrieved from <http://www.unher.org>. Accessed 21 April, 2021.

- UNFP (2020). *15 million more cases intimate-partner violence predicted around the world as a result of pandemic restrictions*. Avenir Health John Hopkins University. Accessed 15 July, 2020.
- Vivour, A. (2020, April 11). Domestic and sexual violence in lockdown. *The Guardian*.
- Walby, S. (1980). *Theorising patriarchy*. Oxford: Basil Blackwell.
- World Health Organisation (WHO) (2021). *Violence against women*. Retrieved from <https://www.who.int>. Accessed 14 May, 2021.
- World Bank (2019) Gender based violence: Violence against women and girls. Retrieved From <http://www.worldbank.org>. Accessed 14 May, 2021.
- Yinkore, A. (2020). *Mental health issues for victims of COVID-19 restrictions*. Mental Health and Psychological Services Department of the Stand to End Rape Initiative. Retrieved from standtoendrape.com. Accessed 23 July, 2020
- Yuval, H. (2020, April 30). The world after coronavirus. *The Financial Times*.