



## Rapid Gender Analysis Northeast Nigeria

Even before the impact of the COVID--19 pandemic, the crisis in Northeast Nigeria is one of the most severe in the world today. In the 3 most affected states in 2020, 7.9 million out of 13 million people needed humanitarian assistance—up 11% from 2019. 79% of the displaced people are women and children.

Compounding this crisis, by July 2, 2020, Nigeria reported [26,484 cases and 603 deaths](#)—a dramatic growth in cases over the month of June. While men make up 68% of the cases, women are bearing a higher burden of mobility restrictions, economic loss, and restricted access to services.

This Rapid Gender Analysis reviewed secondary data and conducted interviews with 109 people between May 6<sup>th</sup> and May 21<sup>st</sup>, 2020 in the three Northeast states of Borno, Adamawa and Yobe where UN Women, CARE International and Oxfam operate.

“The congested situation in camps is making families to give their girls into early/force marriage.”

- *Female, humanitarian worker, Borno*

### Key Findings

- **Health workers are afraid to serve IDPs.** Both men and women reported that accessing health services at the clinic is difficult because health workers are afraid the IDP population may infect them with the virus. More than 40% of Nigerian health infrastructure is damaged due to the conflict, severely limiting health access.
- **Gender-based violence services are not considered essential.** In Northeast Nigeria, there are women in all the COVID-19 related committees, but they do not have decision-making roles. Consequently, these bodies do not consider GBV and protection services essential. This is a special concern as 30% of Nigerian women and girls (age 15-49 years) have experienced some form of violence.
- **Child marriage and child abuse are increasing.** COVID-19 has increased the risk of teenage pregnancy, with girls out of school and with lower access to health services. This will likely prevent many girls from returning to school as Sierra Leone’s the Ebola-outbreak showed. Liberia experienced higher rates of child abuse, child labour, and child marriage during the Ebola epidemic. **In Northeast Nigeria** there is a heightened risk for girls from lower income families to early and forced child marriage as their families look towards reducing the number of mouths to feed in their homes.

- **Control of resources and division of labor harms women.** COVID-19 has not changed gender inequalities. Men are still considered the head of the household. Women and girls are still expected to bear the brunt of all the domestic work. The opportunity for men to take up joint chores has largely been ignored. However, it has created added tension as many women are still working, while men who are usually in formal jobs such as carpentry and motor repair, have had to stay at home.
- **Earning income is a challenge.** The Northeast states of Borno, Adamawa and Yobe are likely to experience double economic damage because of the ongoing humanitarian conflict and COVID-19. Women and girls in cooperative societies and women-friendly spaces who received training from humanitarian organisations and were engaged in income earning activities report that they are no longer able to sell due to government restrictions aimed to reduce the spread of COVID-19.
- **Livelihoods and savings are shrinking.** COVID-19 hit Nigeria's economy before it had a chance to fully recover from the last recession. Experts say that the economy could shrink more than 20% by the end of 2020. Families have resorted to selling their hard assets like gold to stave off temporary money problems.
- **Access to water and hygiene is limited.** 35% of Nigerians lack access to improved water supply, especially those living in rural communities and conflict settings. Respondents in IDP camps reported that access to water points has been hampered both by the rains and the COVID-19 curfews.
- **Food assistance is restricted.** An estimated 3.8 million are projected to have been food insecure prior to COVID-19. With government approval of essential services, humanitarian organizations have continued to target affected population with food, however, hikes in price, movement restrictions and adhering to social distancing is challenging the flow of food assistance. Women say lack of food—and the cash for work programs that allowed them to buy and produce food—is increasing their stress.
- **Access to information and technology.** About 43% of the population are receiving information through awareness campaigns led by humanitarian organisations. Female-headed households, adolescents' girls, older populations and persons with disabilities have even further limitations and are at a higher risk of being misinformed not only due to their increased illiteracy but also inaccessible communications formats as well as reduced mobility.
- **Risk of sexual exploitation.** IDPs can no longer leave the camps, which reduces their access to goods and services. 49% of people are seeing reduced access to services as humanitarians struggle to reach the camps; this increases the rates of transactional sex and sexual exploitation. Female IDPs and humanitarians are already reporting that sexual harassment is rampant at critical services points, and that an overwhelmed judicial system is allowing police and perpetrators to act with impunity.

“When we get to water point, some of the IDPs come with their big brothers and they will finish fetching all their big cans before letting others to get.”

- Internally Displaced Girl,  
Borno

## Recommendations

- **Classify GBV prevention and response, sexual and reproductive health, and mental health as essential services.** This includes hotlines, referrals and remote and direct psychosocial services to survivors, and community protection a life-saving priority and expand their availability.
- **Focus on innovative solutions to maintain and improve livelihoods.** To reduce the long-term economic impacts of COVID-19 that is largely affecting women, actors should provide economic support—including cash transfers and targeted solutions for keeping markets open—to female headed households are losing income and maybe at risk or engaging in exploitative coping mechanisms. Ensure that this does not put women at risk further of violence by male household members and prioritizes joint spousal financial decision-making where possible.
- **Prioritize women's meaningful participation in COVID-19 response committees.** Women's voices in times of crisis are critical to ensure gender-responsive strategies, and all funding should require that women be involved in decision making about how money is spent and who benefit.