THE 2019 CROSSRIVER AND BENUE STATES REFUGEES AND HOST COMMUNITIES PARTICIPATORY ASSESSMENT (PA) REPORT

Thematic team having discussion with women during FGDs with host community, Nov 2019 ©UNHCR/J.Kasenene
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Preamble

UNHCR’s mission to safeguard the rights and well-being of all persons of concern can only be achieved if women, men, girls and boys of all ages and backgrounds are able to benefit equitably from UNHCR’s and partners interventions through funds provided by various donors through UNHCR. To achieve this objective, UNHCR adopted Age, Gender and Diversity (AGD) policy and targeted actions to address protection gaps through AGD approach. UNHCR’s AGD strategy supports the meaningful participation of women, girls, men and boys of all ages and backgrounds, using a participatory, rights and community-based approaches, in the design, implementation, monitoring and evaluation of UNHCR’s policies, programmes and activities. Therefore, to achieve this, it was paramount to engage refugees and host community to assess the protection risks they face as a step for 2020 programming.
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Executive Summary

This report presents results of a Participatory Assessment (PA) which was conducted in November – December 2019 in Cross River and Benue States. UNHCR, government counterparts and partners working in Benue and Cross River refugee operation recognize the fact that the world is continuously changing, and to ensure relevance of Nigerian Federal Government, States, LGAs and UNHCR interventions to improve lives of the refugee and host communities the PA was conducted with refugees and host community as part of the Comprehensive-Refugee Response Framework (CRRF) and Global Compact for Refugees (GCR) strategy of host community inclusion in programming. This assessment aimed at getting a better understanding of the current situation, protection risks, needs, capacities and vulnerabilities of refugees and host community in Cameroonian Refugee Situation in Nigeria by assessing Protection, Education, Health and Nutrition, Water and Sanitation, Shelter and Livelihood sectors. Secondary objectives included assessing the peaceful coexistence with host community considering that refugees are integrating in the host community and sharing the same limited resources, which makes peaceful coexistence paramount.

The joint assessment comprised of thematic teams of 60 staff representing OLGA, KLGA, SEMA, NFRMI, UNHCR and partners who were trained by UNHCR Protection Unit to equip them with skills and knowledge to facilitate focus group discussions (FGDs) and record refugee and host community protection concerns, capacities, suggestions and proposed solutions.

Protection: Protection interventions are centred in reception and transit facilities, registration and documentation, access to justice, community-based protection (CBP), prevention and response to Child Protection (CP) and Sexual Gender Based Violence (SGBV), Education and providing appropriate solutions in form of livelihood. CARITAS and FJDP implement child protection and Early Childhood Care and Education (ECCE). The reception centre accommodates new arrivals, UNHCR through FJDP and Rhema Care constructed temporary structures in 2018 –
2019 to accommodate refugees before they are relocated to the permanent shelters in various settlements namely; Adagom, Adagom 3, Ukende and Ikyogen. However, the shelters are in poor condition and almost not habitable especially during rainy season whereby the shelters leak. There is inadequate support to PSNs (people living with disabilities (PLWD), elderly, chronically sick, UAM and UASC due to lack of comprehensive quality data and inadequate funding. National Population Commission (NPC) through CARITAS and FJDP has been providing birth certificates in Cross River and Benue states respectively. However, there is need to improve refugees’ knowledge and access to civil documentation to enhance certificate provision. CP / SGBV issues raised are majorly child trafficking, early marriage and transactional sex, and domestic violence. Peaceful coexistence remains an important activity whereby government counterparts and UNHCR ensure improvement of social services such as education and health as well as inclusion of host community in livelihood projects. Furthermore, SEMA in partnership with UNHCR is raising awareness and solving conflict that arises, which has greatly enhanced good relationship between refugees and host community. UNHCR works with government counterparts and partners to enhance CBP among the refugee and host communities through empowering community-based structures and community-based organizations (CBO) to ensure refugees and host communities are at the centre of solutions.

**Education:** Education services for refugee children continue to be implemented by UNHCR’s partners that include CARITAS and FJDP in Cross River and Benue states. The services offered by the government schools include ECCE, pre-school, primary education and secondary education whereby UNHCR through partners has supported renovation and constriction of new class blocks, pays school fees and other requirements such as shoes and uniforms for refugee children. University Education is supported by the government of Nigeria and Albert Einstein German Academic Refugee Initiative (DAFI). However, there is great need to boost capacity of schools in relation to infrastructures, increasing number of trained teachers to ensure quality education and exploring possibilities of ensuring children with special needs education are prioritized to access their right to education.
Health & Nutrition services: Health centres and hospitals are managed by the Federal Government of Nigeria and refugees are integrated to access health services in the existing health system which include OPD, maternal and childcare, family planning services, laboratory services, and HIV Testing and Counselling HTC / PMTCT services. However, UNHCR supports health services to majority of refugees free of charge through health insurance which they use to access medical check-up and medication from existing national health facilities. Likewise, UNHCR has renovated and constructed some health centres in Benue and Cross River states to ease the burden of accommodating refugees in the host states. Also, through FHI360, UNHCR provided motorcycle ambulances and supplies drugs in the health facilities where refugees and host community reside to benefit the both populations. However, there is a shortage of staff in clinical and nursing departments and frequent drug stock outs, hence there is therefore great need to review and improve supply of drugs at the health facilities.

The annual standardized expanded nutrition survey called Rapid Anthropometry Survey was conducted in December 2019 to measure the overall nutrition situation and the prevalence of malnutrition in the settlements and for refugees living in border host communities. The results of Malnutrition among refugees indicates that Global Acute Malnutrition is 116/697 (16.6%; CI:10.9-22.4), Moderate Malnutrition 51/697 (7.3%; CI: 4.2-10.5), Severe Malnutrition 65/697 (9.3%; CI:5.5-13.1), Prevalence of stunting 418/697 (60.0% CI: 52.7-67.2), Moderate stunting 187/697 (26.8%; CI:21.1-32.6) and Severe stunting 231/697 (33.1%; CI:26.3-40.0)¹. Therefore, it is difficult to measure acute malnutrition based on weight-for-height z- scores or eczema but chronic malnutrition in children as well as prevalence of anaemia in both children and women remains a concern. It was observed that some refugees have other livelihood sources such as running businesses in the camp from which they derive income to purchase other nutritious food commodities however their self-sufficiency is precarious given the limited livelihood opportunities.

¹ Rapid Anthropometry Survey 2019 - Refugees in settlement and border community in Cross River & Benue states.
Water Hygiene and Sanitation (WASH): UNHCR through her partner Save the Children International (SCI) maintains WASH in the settlements and supports both the refugees and host communities adjacent to refugee settlements to access clean and safe water. Sanitation in the settlements in Benue and Cross River States is relatively good however littering of plastic bags, poor drainage systems and limited access to family latrines pose health risks. Water points are within standard distances, however when there is a broken tap leads to long queues and another chronic issue is the quality of water whereby refugees and host community complained of salty water produced by some bore holes. Therefore, increasing number of low-cost family latrines, water storage facilities, hand washing facilities and more storage facilities would help improve the situation.

Shelter and environment: Most of the dwelling units are thatched with iron sheets and with improved shelters made of burnt bricks. The strategy has been to enhance community participation whereby UNHCR through Rhema Care and FJDP provides construction materials and Cash Based Intervention (CBI) for labour hence the abled families construct their house units themselves while Rhema Care and FJDP supports most vulnerable families. However, issues of dependency on limited firewood and land degradation in the settlement was raised which require interventions to restore the environment by planting trees but also explore possibilities of inventing energy saving stoves or other source of energy such as briquets to reduce reliance on firewood.

Security: The refugees and host community reported high incidences of cultism, robbery, mob gangs and fighting within the community. The community local police (vigilantes) support was rated as being functional but with some issues such inadequate patrolling and poor reporting of suspects as well as the community reported members of vigilantes being few. As such the participants recommended the need for increased joint patrolling between host community and refugees and awareness campaigns to build the communities’ trust as well as regular review meetings with stakeholder’s security personnel and members of the community to monitor case handling and community’s responsibility in fighting crime.
**Peaceful coexistence:** UNHCR in collaboration with SEMA has enhanced peace and safety between refugees and host community. The refugee and host communities are already co-existing in a peaceful manner except in few instances where minor conflict arise over limited natural resources which are resolved by the community through leaders. The livelihood interventions, renovation and construction of health and education infrastructures were mentioned among the support in contributing to peaceful coexistence, improving household income generation and living standards among refugees and host communities. Meanwhile, alternative options for fuel supply should be promoted to reduce the current reliance on firewood and charcoal which is scare and cause some misunderstanding between host community and refugees as well as expose women and girls to SGBV.

**Livelihood:** UNHCR in collaboration with CUSO and Rhema Care strives to improve Food Security whereby CUSO deals with agriculture and Rhema Care implements Cash Based Intervention (CBI) for basic needs access. As of December 2019, more than 28,000 refugees were supported. UNHCR through CUSO, the agriculture sector as source of livelihood has supported about 1,578 individuals while vocational training has improved skills and knowledge as well as enhanced self-reliance to a total of 574 households.
PART A: Introduction

This report summarizes the findings of the 2019 Participatory Assessments (PA) comprising of 102 (58Ref, 44Host) FGDs of 1457 (893 Ref, 564Host) participants held in Cross River and Benue states with refugees residing in the settlement, border host community and host community adjacent to the three settlements and those living together with refugees in the border communities. During the discussions, participants discussed in English mixed with Pidgin – English the protection risks which they face, their capacity to address them, solutions and recommendations.

The thematic teams consisted of trained staff from OLGA, BLGA, NCFRMI, SEMA, UNHCR, SCI, CARITAS, FHI360, CUSO, Rhema Care, NRCS and FJDP. The FGDs were held in the settlements in Ikyogen, Ukende and Adagom, and adjacent host community as well as in Bakassi LGA – Ikang and Akamkpa LGA-Oban communities and Calabar municipality-Big Qua. The results presented below offer the dialogues analysis specific to the AGD of the participants. Considering protection risks faced by people which are specific to their situation, the report provides potential findings.
in terms of protection risks, communities’ capacities, solutions and recommendations. These sections of the report are critical for programming, design of prevention and response to support both effective and appropriate interventions.

UNHCR re-affirms that refugees and host community must be at the centre of decision making regarding their own protection and welfare and we express appreciation for all people who assisted with this process in line with CRRF/ GCR. Therefore, this overview is a summary text only but detailed findings for each of the six areas mentioned above are available below in detailed report and if required raw data can be provided separately upon request.

1.1. Background

Cross River and Benue States have been hosting Cameroonian refugees since 2017, following violent clashes in Cameroon between security forces and separatists that have forced thousands of Cameroonian to flee to Nigeria. As of 31 October 2019, there are more than 46,098 Cameroonian refugees registered in Cross River, Benue, Taraba, and Akwa Ibom states in the south-eastern region of Nigeria whereby 72.4% are in Cross River, 14.3% in Benue, 12.1% are in Taraba and 1.2% are Akwa Ibom. Out of the total refugee population, 51.4% are below 18 years, 45.5% between 18 – 59 years, and 3.2% 60 years and above. Majority of the refugees are female, comprising 54.4% while males make up 45.6%, and school-age children between 3 – 17 years represent 42.1% of the total refugee population. This figure, however, does not reflect the actual number of refugees who crossed the border and are hosted in Nigeria; the main reasons being that some refugees are living in remote and inaccessible areas in border host communities near the border with Cameroon.

UNHCR –Sub Office Ogoja through Protection Unit organized and coordinated the PA Exercise in coordination with SEMA, LGAs departments and partners. The PA exercise focused on issues

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2 UNHCR Nigeria, Monthly Refugee Statistical Updates, 31 October 2019
related to protection, education, health and nutrition, WASH and Shelter, livelihood and peaceful coexistence among refugees and host communities.

1.2. Objectives

The overall objective of the 2019 PA was to assess protection risks, capacities and solutions among the refugees and host community in areas of Protection, Education, Health and nutrition, WASH and Shelter, and Livelihood. The specific objectives of the PA were to:

- To lay out preparatory and participatory discussions on procedures, collection of information, ethics and engaging refugees and host community in line with AGD approach.
- To strengthen refugee and host community participation as a strategy to enhance inclusiveness in decision making for matters that affect the population.
- To collect inputs from a broad range of refugees and host community in order to establish category of protection risks, their capacity to address the risks, priorities and way forward to strengthen community-based protection.
- To strengthen the relationship between UNHCR and persons of concern, host community and partners for the benefit of the persons of concern and host communities.

1.3. Methodology

The thematic teams comprised of NCFRMI, SEMA, UNHCR and partners jointly, conducted the PA whereby the entire exercise was led by UNHCR. The assessment methodology included a desk review of qualitative secondary data for 2018 PA results and questions used to facilitate the discussion. The questions (qualitative and quantitative) for 2019 PA were developed in consultations with sector heads and review of UNHCR AGD Policy guideline. The questions for each sector were populated in the UNHCR Kobotool, uploaded in the tablets which were used during the dialogues to collect the data. The teams collected information from refugees and host community aged 10 – 18+ through FGDs adhering to AGD approach. Furthermore, 54

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stakeholders representing refugees and host communities, BLGA and OLGA, NCFRMI, SEMA, UNHCR and partners staff participated in a one day workshop to discuss the outcome of the PA whereby they came up with priorities ranging from short term, immediate and long term to ensure appropriate response to protection risks identified to feed in the 2020 programming during development of UNHCR Direct Implementation and Project Partnership Agreement (PPA).

1.3.1. Focus group discussions and Participants

A total of 102 FDGs were held by thematic teams composed of representatives from UNHCR, government counterparts and partners. The aim was to have direct dialogue with refugees and host community in order to get an understanding of what they consider to be issues of great significance in the selected themes, their perception of these issues and how they would like to address them. The FGDs composed of representative groups of men and women, boys and girls of different ages, people with special needs (people living with disability, elderly, unaccompanied minors and separated children).
1.4. Limitations

Due to strict timeframes and funding it was not feasible to involve each member of the refugees and host communities, the PA exercise used FGDs of which each was represented by a maximum of 15 respondents which did not represent 100% of community members in the PA+ dialogues. The total number of refugees participated are 893 which is not an actual representation of approximately 46,098 of the refugee population in Benue and Cross River States, therefore only 2.2% of the total population in the two states participated.
PART B: Sector Findings

Chapter 1: Protection

1.1. Child Protection

Focused group discussions (FGDs) were held separately for girls and boy’s participants. 22 FGDs were held across the six locations consisting of boys and girls aged 10-17 with a total of 421 (184 M, 237 F). In Ikogeyen participants reported that disabled children are mistreated by the host community while going to school, teachers beat the girls on their buttocks and laugh at the refugee children.

Majority of the refugee respondents including children, reported that most affected children with protection risks mentioned above are children indicated in the graph below. Refugee adult aged 18-60+ informed that girls in the settlements and those living in border host community in
Akamkpa, Bakassi and in Calabar municipality are overwhelmed with difficult life due to lack of income generating activities, they receive money from men and payment in turn with sex as interest rate which has resulted to ‘prostitution’ hence teenage pregnancies. During FGDs it was reported by respondents that most refugees borrow due to two - three months delay of CBI distribution, which makes some parents find it difficult to provide the necessary needs for the family; some parents resort to selling their children to Nigerians. Children particularly boys in Ikogyn attributed child abuse to delay in CBI distribution and polygamous marriage which contributes to child labour and early marriage because of divorce among the refugee families.

During FGDs most participants in Ikogyn settlement raised an issue of children being affected by sexual abuse and drugs abuse such as smoking and drinking as it was voiced out by children and adults.

Furthermore, refugee children in Ikogyn, Adagom and Ukende settlements were concerned with lack of recreational activities such as lack of child friendly spaces and sports activities which has greatly contributed to loitering around the
settlements and in the host community as a result of idleness.

This is against the first and third goals of UNHCR’s commitment\(^4\) to protect and realize the rights of children of concern. This was also attributed to denial of the right to education for school-age children (3-5 years) due to lack of early childhood education in Ikogyen settlement since they are too young to travel from the settlement to the primary schools located in the host community where refugee students attends primary education. For example, children reported that some parents neglect children; children like UASC are more vulnerable to hunger and inadequate care which lead to most children attending school while hungry. For example, a girl said, “our parents don't send us to school, and this leads to some of young girls to get involved in early marriage”.

Moreover, children living with disability are discriminated based on their disabilities, they do not attend school due to lack of facilities related to special needs education. Refugee respondents in Oban community, said that most children living with disability do not study because they feel inferior to other children and parents do not encourage them to attend school. They said,

\(^4\) UNHCR Six Goals Commitment for child protection
“teachers should establish special classes for students living with disability”. In Oban, Ikang and Big Qua girls and women informed that adolescent girls are most at risk of sexual exploitation because of poverty while boys are always indulging in risky behaviour such as cultism. During FGDs in Oban community women aged 18 – 25 years reported, “boys steal while young women sleep with men to get money”.

In Adagom and Ukende settlements girls reported that some girls are harassed or asked for sex by men from the host community when they go to collect firewood which is very scarce in the settlements, yet it is the very source of fuel. Refugee participants in the settlements and those residing in the borderer host community informed that not all refugee children born in Nigeria have birth certificates, this is due to inadequate orientation or awareness campaign on information regarding access to birth certificates. Though some adult participants acknowledged that they receive birth certificates from National Population Commission (NPC) through FJDP and Caritas Nigeria while other respondents in Adagom and Ukende settlement reported receiving birth notification at clinics or hospital upon delivery and they submit it to CARITAS hence receive birth certificates for their children. However, respondents from host community in Ikang and Oban complained that they must travel to Calabar municipality to access birth certificates because there are no offices to provide such service in their community which hinders access.

Furthermore, participants informed that there is a need for the community at large to support vulnerable children such as child heads households, because they need community support to protect them from abuse, neglect and exploitation. Children in Ikyogen, Ukende and Adagom mentioned that children suffering from malnutrition, disabled children and trauma require mobility appliances, good food and treatment, psychosocial support and spiritual interventions. They reported that the community know vulnerable children better, so they are in position to support the children especially vulnerable children such as pregnant children. Children respondent in Ikogyen settlement informed that children depend on parents and community due to their vulnerability then protection by the community is important such as food, shelter and clothing and taking them to hospital or clinic. They proposed that due to immorality, parents and community can inculcate good morals among stubborn and substance abusers.
1.1.1. Community capacity to address protection risks

- To address the issue of inadequate materials support to vulnerable children, the children and adult respondents informed that the community have the capacity to improve vulnerable children’s welfare by providing support to children at risk through raising funds for basic needs, wheel chairs, medical care and provision of basic needs such as food and clothes.

- UNHCR, government and partners are providing good support, but more adequate care and support is required by refugees creating social welfare group that can explore support to children at risks.

- Refugee community leadership is capable to support UNHCR and partners to protect children thus elections should be conducted in Ikyogen and Ukende settlements so that to take lead in ensuring children are protected.

- Parents lack parental skills; this requires attention so that parents are educated and advised on how to take care of children and protect them from harmful behaviour.

- Participants in Adagom and Ukende proposed establishment of children protection monitoring committee to improve children wellbeing.

- The community members such as refugee leaders, protection monitors, CPC and women committee can teach children life skills to avoid sex and pregnancy, psychosocial support for survivors through trained community volunteers and children to participate in the morning prayers in communities.

- The refugee leaders, CPC and protraction monitors to work with partners to initiate the dialogues focusing on children issues such as early marriage and child labour for the leaders to educate the community on child rights.

- The children said that the community has a capacity to identify children out of school, report to PTA and school management to ensure they are re-enrolled back to the education system.
• Health outreach workers are trained, can raise awareness on the importance of breast feeding so that lactating mothers to exclusively breast feed their children at least for six months to avoid malnutrition among children.

• Community can support the children living with disability by identifying them, raise awareness on their rights like other children and support in pushing their wheelchairs on the way to school.

1.1.2. Protection risks beyond the community capacity to address.

• The CBI distribution delay and inadequate livelihood opportunities is beyond the community which is resulting into family’s disintegration in terms of lack of parental care, early marriage, survivor sex and child labour. This is common in the settlements and refugees living in border host community hence results to abuse, exploitation, child trafficking, child labour and early / forced marriage.

1.1.3. Proposed solutions by the community

• Participants in Adagom, Ikoyen, Ukende, Calabar urban, Bakassi and Akamkpa proposed that to eradicate child labour and exploitation that deprives children childhood, education and children wellbeing comprehensive livelihood intervention is paramount to reduce dependency on CBI.

• UNHCR to advocate for CBI distribution to address difficulties of getting basic needs especially food which forces children to engage in child labour, survivor sex, early marriage and forces parents to involve in child trafficking.

• Participants in Adagom and Ukende proposed establishment of children monitoring committee to monitor them at school and in the settlement to mitigate protection risks.

1.1.4. Recommendations

• UNHCR in collaboration with SEMA, FJDP and CARITAS enhance CBP through refugee community structures such as refugee leadership, Protection Monitors, Women
Committees, Child Protection Committees and Community Based Organizations (CBO) to enlighten the entire community on child rights, importance of parental care and livelihood opportunities available to improve household income.

- FJDP and CARITAS to enhance or initiate programme which enhance community based CBP gearing to protecting children from abuse, neglect and exploitation especially children at risk.

- FJDP and CARITAS to improve Best Interest Processing (BIP) such as Best Interest Assessment (BIA)\(^5\) to all children at risk particularly by identifying and verifying them and ensure designed interventions address their specific needs accordingly.

- UNHCR and partners enhance child Protection mainstreaming in all sectors as a strategy to ensure effective and comprehensive child protection interventions.

### 1.2. Sexual Gender Based Violence (SGBV)

Focused group discussions (FGDs) were held separately with male and female participants, 102 F FGDs were conducted with a total of 1457(654M, 803F) participants from Ukende, Ikyogen and Adagom settlements as well as from Calabar municipality, Ikang and Oban communities.

\(^5\) UNHCR BIP Guideline 2018 - [library](#) (Child Protection Resources)
During FGDs majority of refugees and host community respondents in Ikang, Oban, Ukende, Big Qua, Adagom and Ikyogen reported that the most prevailing SGBV incidents are Domestic violence, Physical abuse, Rape, Sexual abuse, Denial of resources, Early marriage and Psychological abuse. The leading reported SGBV incidents are Domestic violence, Physical Abuse, Sexual Abuse and Rape as the graph below depicts.
Children informed that parents fight over lack of food at home, adultery and mostly women are beaten. In addition, in Ikyogen and Ukende settlements they reported that rape happens at friends’ homes, in the bathrooms, latrines and in the toilets were boys ‘catch girls’.

Majority of the participants in Ukende, Ikyogen and Adagom settlements informed that rape happens in the bush while fetching firewood, dark places at marketplaces, to and from school and waterpoints, at home particularly at night, hidden areas like toilet, baths and road sides in the bush path and in the farm land

The participants in Ukende settlement reported that survival sex takes place in the abandoned tents by Médecins Sans Frontières (MSF) and at reception in Ukende and places where women go to charge phones. Participants in Oban, Ikang and Calabar municipality reported that SGBV

[Diagram: SGBV Incidents]

and due to inadequate solar streetlight. Solar street in Adagom settlement ©UNHCR/R. Kirui
incidents happen at home, isolated places such as during firewood collection, going and coming from school or at market.

The male participants and women also added that cultism and lack of religious practice for some men is a cause of domestic violence and rape. The female participants from Ukende and Adagom highlighted that forced marriage is also a reason for domestic violence among families. Furthermore, participants from host community mentioned that domestic violence happens at home, attempted rape and rape happens when they are collecting firewood or grazing animals as well as at night due to lack of streetlights.

![Areas SGBV Incidents Occur]

Participants in Ikyogen, Akamkpa, Bakassi, Adagom and Ukende; aged 18 - 60+ informed that most SGBV survivors are not supported by the community rather are stigmatized, discriminated and mocked. Women said, “when you report, the community or family members will not believe you”. Women in Akamkpa reported that some of the rapist’s families pay the hospital bill and the issues is resolved quietly. Additionally, other types of violence reported by refugees and host communities include robbery, mob gang, fighting and kidnaping and vigilantes were found
common in refugee and host communities as part of security structure at local level that works with police to restore order and monitor peace and security.

1.2.1. Community capacity to address protection risks

- Participants in Ikogyen, Adagom, Akamkpa, Bakassi and Ukende mentioned that the community has the capacity through community leaders and protection monitors to address SGBV, through awareness campaign at settlement, community and at household levels.

- Women in Adagom, Akamkpa and Ukende mentioned that clan and religious leaders and elders are influential in the community therefore have the capacity to educate the community and take a lead on combating forms of SGBV and harmful traditional practices.

- Children, men and women in Ikyogen, Adagom and Ukende reported that male in collaboration with women have capacity to protect women and girls from SGBV by accompanying female when they go to collect firewood and ensure they get permission from owner of the trees or farms.

1.2.2. Protection risks beyond the community capacity to address.

- The community representatives informed that they do not have the capacity to enforce the law to deal with perpetrators, end corruption and hire lawyers to support survivors for legal advice.

- The respondents mentioned that it is difficult for them to change the behaviour of some clan leaders, chiefs and refugee leaders who are resolving serious cases related to SGBV such as rape.

1.2.3. Proposed solutions by the community

- Children, women and men in the three settlements proposed CBI to be distributed on time and feasible livelihood opportunities are the best approach to address SGBV issues such as domestic violence and survival sex among young women.
• The male and female in the six areas where PA was carried out advised that the community and family members should encourage SGBV survivors to report perpetrators so that they are prosecuted.

• Participants in Ikyogen and Ukende highlighted the importance of community awareness and impact on reducing domestic violence urging the community leaders and SGBV partners to enhance awareness campaign on SGBV, harmful traditional practices, PSEA and services available.

• Religious and clan leaders and the legal system involvement in fighting SGBV was highlighted as an important strategy in providing solution and justice to survivors of SGBV instead of refugee and clan chiefs resolving serious SGBV crimes such as rape.

• Women and some men voiced out the importance of SGBV partner to work with religious and refugee leadership to ensure legal avenues are known to the community in which survivors can seek support, protection and gain access to justice.

• The children and women in Ukende and Adagom emphasized the importance of more solar streetlights at dark areas in the community in order to prevent SGBV incidents that occur in such places and introducing community sanctions for perpetrators.
1.2.4. Recommendations

- The police should collaborate with the court to ensure SGBV perpetrators are convicted as stipulated in the Constitution by the Nigerian law to avoid impunity in the community. Additionally, confidentiality while dealing with such cases shall be enhanced during reporting, referrals and court proceedings.

- UNHCR and protection partners to enhance the capacity of community structures thereby improving CBP through training and awareness on SGBV and PSEA.

- SEMA to work with chiefs and refugee community leadership to address cultism in the community which was reported exciting violence and contribution to SGBV in the settlement and host community.

- UNHCR, government counterparts and livelihood partner to explore alternative cooking fuels to mitigate number of SGBV incidents which occur when women and girls go to collect
firewood by encouraging and supporting local production of cooking stoves or briquet production.

- SEMA and UNHCR to engage the community in identifying the streets where there are no solar streetlights aiming at procurement and to installation in order to mitigate SGBV incidents.
- UNHCR in collaboration with SGBV partners should strengthen the effectiveness of referral pathway to ensure the refugee and host community are aware of various options for reporting SGBV and PSEA incidents as well as available services.
- SGBV partner should continuously educate the religious, chiefs and community leaders the importance of SGBV cases to be handled by court and support reporting such cases to UNHCR, SEMA, police, CARITAS and FJDP.
- UNHCR, SEMA and partners enhance SGBV mainstreaming in all sectors as a strategy to ensure effective SGBV prevention and response services.

1.3. Persons with Special Needs (PSNs)

The participants in the settlements reported that they are not satisfied with services delivery because they are not receiving adequate material support as it has been one off material provision. Likewise, in Calabar municipal, Akamkpa and Bakassi they complained that UNHCR abandoned them in the border host community with difficulties in getting accommodation, food and other basic needs such as soap. However, refugees in Adagom and Ukende appreciated UNHCR, for giving preferential treatment to PLWD during distribution of food and mattresses though Ikogyen they informed that there is no special support provided to disabled refugees by UNHCR and partners which expose vulnerable individuals to protection risks.

PLWDs and the elderly stated that movement around the settlement and outside the settlement is difficult due to lack of mobility appliances. Furthermore, access to social amenities, such as schools and hospitals, as well as access to firewood is a big challenge. There is no special needs education for children with hearing and sight impairments which deter them to access education.
and denial of their right to education, though access is also attributed to high stigmatization and discrimination in the community and among fellow students.

The elderly living in the settlement appreciated the shelter that were provided to them, but doors and windows are poorly made since the doors and window cannot be locked which was a sentiment echoed across the settlements. Forex ample, male participants stated, “Shelters are good, but we need Rhema Care to provide quality doors and windows”. PLWD in the boarder host community lamented on difficulties to pay rent as most refugees are renting houses in the host community, the rent is expensive and most of the houses are in poor condition. In Ikang, Adagom, Ikogyen, Ukende, Oban and Big Qua refugees living with skin disability (albinism) reported that their skin requires special lotion to apply on their body to protect the skin from sun and insects, but they cannot afford the medicine to protect their skin.
In Ikyogen, Adagom and Ukende settlements men and children stated that the latrines and water points are not disability friendly at home as well as at schools. For instance, in Ikogyen, Ukende and Adagom said that available toilets are dirty and not accessible for PLWD because are not designed to suit PLWD. In addition, children and adult reported that disabled children are attacked by some members of the host communities while going and coming from school. Besides, one of the biggest obstacles is that the primary schools are far from Ikogyen settlement and they are not specialized schools for children with special needs. Moreover, children with disability refrain from going to school because they are bullied, neglected, discriminated and stigmatized in the community and at schools.

1.3.1. Community capacity to address protection risks

- Participants stated that they support PLWDs by washing their clothes, cleaning their homes and assist in their personal hygiene. In Ukende settlement, women stated that the community structures can support in prioritizing PLWD during CBI and NFIs distribution. In
Ikogyen participants said that the community can support PLWD who cannot to fetch water, cook food, wash clothes and accompany them during movement.

- Community leaders can support UNHCR and SEMA to identify PLWD and submit their names for support and regularly involvement in discussions to identify their specific needs.
- Parents and the community can support to accompany children living with disability to school and back home to ensure their safety and security.

1.3.2. Protection risks beyond the community capacity to address.

- Participants informed that they do not have the capacity to construct a school or equip existing schools with special needs education facilities and employ qualified teachers.
- Participants informed that skin medication and mobility appliances are expensive so they cannot afford to buy for PLWD who require mobility appliances such as wheelchair.

1.3.3. Proposed solutions by the community

- Refugee representative in Adagom proposed that PLWD requires help from the community with house chores and UNHCR empowerment to learn business and provision of mobility appliances.
- The respondents generally proposed improvement of access to services, including schools and health centres, prioritization of PSN during CBI distribution; improvement of shelter and water points such as construction consider PLWD accessibility and inclusion of PWLD in planning.
- UNHCR, SEMA and shelter partner to explore possibilities of allocation of houses to PLWD near water points, UNHCR, SEMA, partner offices and other essential services such as distribution and registration centres.
• Community leaders and Teachers and Parents Association (PTA) create awareness with the refugee and host community students to understand that children living with disability are equally important and have rights like any other children.

• Strengthen awareness raising and proper information sharing mechanisms within the community about issues affecting PSNs; SGBV and self-reliance opportunities to eradicate the negative attitude towards PLWDs.

• Teachers and students should encourage and protect children living with disability against harm while at school to raise confidence in parents to send their children to school.

1.3.4. Recommendations

• UNHCR and government counterparts explore possibilities of purchasing energy serving stoves to be provided to most vulnerable families such as living with disabilities or chronically sick since firewood reported to be the burden and contribution to SGBV.

• SEMA, UNHCR and CARITAS Education sector to explore possibility of designing education activities to accommodate people with special needs education requiring alternative modality or delivery mechanisms.

• Community leaders and other community structures such as CPC, Women and Youth Associations, and Community Based Organization (CBO) work together to support PLWD and create awareness against discrimination towards PLWD.

• UNHCR to collaborate with government counterpart and partners to explore more sources of funding to address protection risks related to mobility appliances for PLWD.

• Protection Unit to continuously work with Livelihood sector to address PSNs issues related to access to livelihood opportunities and efficient energy cooking stoves.

• UNHCR – Shelter sector, SEMA and partner responsible for shelter to explore possibilities of allocation of houses to PLWD near social services to enhance accessibility.
UNHCR and partners in Benue work with SEMA, PTA, refugee and host community leaders to discuss the issue of disabled children and girls being attacked by some community members to explore solutions.

1.4. Access to Justice

During FGDs in Adagom settlement, participants aged 18+ informed that they are facing discrimination, injustice, unfair judgment and oppression which denies them access to justice. For instance, participants mentioned that some SEMA staff and community leadership do not properly handle their issues when reported, and refugee leadership do not solve cases with impartiality but basing on nepotism and tribalism which results to injustice. Adult refugees in Ikogyen, Akamkpa, Bakassi, Ukende and Adagom reported that it is difficult for them to access justice since they do not have money to pay for legal services and most times are faced with barriers such as bribery which results to delay of justice or results to denial of justice. Refugees in Ikogyen echoed the issue of English language as a barrier, threats and undefined leadership structures as the contribution to injustice whereby their issues are not reported due to lack of follow-up by some SEMA staff and the acting refugee leadership. For instance, it was reported that weak leadership in Ikogyen affects education, since there is no proper community coordination to improve education and respond effectively to mob gangs that discourage children from attending school. Generally, men and women participants in all FGDs, reported that most women do not report SGBV incidents because they fear retaliation, stigma and shame as well as bribery discourages them to report.
Men and women in Adagom, Oban, Ikang, Ukende, Big Qua and Ikogyen raised fear of retaliation being an issue against reporting cases and seeking legal remedy. Men in Ukende and Akamkpa raised an issue of unavailability of legal advisors which denies refugees access to legal advice, leave refugees without support on how to handle serious issues such as SGBV. In Ikogyen PLWD and other participants including children echoed an issue of lack of basic recreational facilities for them to socialize with other community members.
1.4.1. Community capacity to address protection risks

- Community members have the power to choose good leaders from different tribes including women who can handle their matters without discrimination, favouritism, nepotism and tribalism.
- Community members have the capacity to make leadership accountable and report injustices to UNHCR and SEMA through existing reporting channels.

1.4.2. Protection risks beyond the community capacity to address.

- Refugee community members in Ikyogen who participated in the FGDs informed that they do not have capacity to organize and coordinate elections.
- Participants in Ukende, Adagom, Ikyogen, Akamkpa and Bakassi stated that they do not have the capacity to end injustice and bribery.
1.4.3. Proposed solutions by the community

- Refugees to report issues they are facing in relation to injustices to UNHCR when they face discrimination and tribalism.
- UNHCR and partners to create awareness in relation to SGBV, Nigerian law, reporting mechanism, accessing justice and access to legal services.
- Community leaders and SEMA to work together in resolving minor cases as well as ensure justice in handling cases and refer cases that requires legal justice to police to avoid harming the community which might result to impunity.

1.4.4. Recommendations

- UNHCR Protection Unit to work with refugee community leaders, SEMA and partners to ensure refugees are educated on existing reporting mechanisms and use mechanism in place to handle cases such as SGBV.
- UNHCR to continue working closely with government line ministries such as Ministry Of Women Affairs and Social Development and Nigeria's justice system (the Police, Courts and Prison).
- UNHCR in collaboration with SEMA to conduct democratic elections in Ikogyen and Ukende settlements by January 2020.
- UNHCR to ensure the protection partners such as FJDP, JRS and CARITAS employ Legal Officers to support refugees in legal presentation and legal counselling.

1.5. Civil registration and documentation

During FGDs with men and women in Ikyogen, Ukende and Adagom reported that before registration they are interviewed and screened by SEMA while they are registered by UNHCR though the process was cumbersome before the refugee received documents, this was especially before using the computer for registration. They informed that refugees are registered in the settlement at the registration centre by UNHCR registration team though require improvement.
For example, some participants in the FGDs said that, “the registration process is too long, we wait on long queue under the sun”.

Refugees women and men representing Ikyogen reported receiving birth certificates through UNHCR partners FJDP and National Population Commission (NPC) while women respondents in Adagom and Ukende said that they receive birth notification at hospital upon delivery, present it to CARITAS that provides the birth certificates. However, FGDs of women aged 18 – 24 reported that there are no birth certificates that have been provided to children born in the settlement and there is lack of awareness on how to access the birth certificates. In Bakassi-Oban community refugee participants aged 50+ reported that births are registered at the health centre as well as birth certificates are provided, however participants aged 18 – 49 years said that there is no offices for birth certificate provision neither UNHCR or National Population Commission (NPC) in Oban community and they do not know where to access birth certificates.

1.5.1. Community capacity to address protection risks

- The community especially the protection monitors can inform the community especially parents on facts about birth certificates provision and where to access the service.
1.5.2. Protection risks beyond the community capacity to address.

- The refugee community in the settlement and in border community do not have capacity to influence Nigerian policy regarding birth certificate provision to refugee children.
- The refugee community cannot provide the shade and change UNHCR registration procedures regarding time it takes to wait for the registration and receive required documents.

1.5.3. Solution proposed by the community

- UNHCR to explore possibilities of improving the registration process and building the waiting shade for refugees.
- UNHCR in collaboration with NCFRMI to advocate for refugee children birth certificate provision with NPC and ensure areas such Akamkpa and Bakassi refugee children born in Nigeria receives certificates.

1.5.4. Recommendations

- UNHCR Protection Unit through Registration Subunit liaise with Programme Unit to source fund for construction of the waiting shed in Ukende, Ikogyen and Adagom settlements.
- UNHCR work with NFRMI to advocate with NPC for provision of birth certificates to refugee children born in Nigeria in all areas where refugees reside including boarder host community.
- UNHCR and UNHCR partners coordinate with NPC to ensure continuous awareness campaign on importance of birth certificates and

1.6. Education

Education is a basic human right; it protects refugee children, youth and adults, and equips them with skills and knowledge for peaceful and sustainable rebuilding of their lives. A total of 1457 (654M, 803F) participants were engaged in separate 102 FGDs with children and adult appreciated efforts made by Nigerian government and UNHCR to ensure refugee children attain education. However, children and adult participants in Ikogyen settlement complained that schools are far from the settlement which requires children to walk long distance especially those
attending early childhood education due to lack of school within the settlement particularly children aged 3-5 years old who are too small to trek to school.

Moreover, participants both refugees and host communities in the FGDs aged 18 – 24 and children reported that major issues that contribute to child drop out from school are overcrowding, early pregnancy, lack of scholastic materials and inadequate facilities at school such as desks and classrooms. In Adagom participants aged 18 – 50+ complained that teachers do not call refugees children on roll call to crosscheck pupils’ attendance and examination results is not provided at the end of the term to check their children’s education progress. In addition, they reported that host community in Adagom and Ukende were disrupting provision of scholastic materials distribution to refugee children at school. They demanded that Nigerian children should be provided with the same materials. The participants aged 18 – 24 in Ukende settlement reported, “the host community have become hostile and stopped distribution of school bags”. The issue of discrimination was raised by host community representatives aged 25 – 49 females in Ukende and Adagom said, “discrimination in classrooms is evident refugee children are made to seat on the floor alleged of smelling”.

Participants reported that schools lack electricity, inadequate or no water in school toilets and lack of facilities for children with special needs education. Parents complained that teachers only provide children with notes to copy which force children to prefer skill acquisition instead of attending school.
Refugees and host community representatives in Oban and Ikang informed that their children are receiving poor education due to issues raised above but also some government teachers are not qualified, while some are not serious compared to private school though majority of parents cannot afford the costs in private schools. Furthermore, Ikang host community respondents aged 18 – 24 said that teachers do not regularly come to schools because they leave in Calabar town.

Children and adult who participated in the FGDs in Ikyogen, Adagom and Ukende informed that children at primary level are facing inadequate and some lack scholastic materials. For instance, children aged 10-17 reported that they do not have shoes to put on and they struggle to get exercise books and school uniform which was attributed to some parent’s negligence to provide such materials after receiving CBI for education.
The graph above indicates factors hindering access to education, whereby distance to school emerged the highest obstacle (50%), inadequate desks (29%) and discrimination (13%) at school.

Respondents in Oban, Ikogyen and Adagom reported that children lack support from the family on education matters. For example, children are not encouraged to attend school, parents are too busy, and they cannot control the children or follow up on the children’s education which has caused some of the children to be wild and engage in immoral behaviour. Furthermore, refugee and host community aged 18 – 45 in Ukende, Adagom and Oban complained lack of money to access tertiary education which leaves most youth idle, hence promotes participation in cultism.
1.6.1. Community capacity to address protection risks.

- Refugees in Ikyogen confirmed that parents can pay for their children’s transportation, pay school fees, buy scholastic materials encourage the school age children to go to school and rent houses close to schools to minimize the distance.
- Community members can support in small contribution to help children at school to have lunch, help to accompany the small children to and from school by trekking or pay motorcyclists.
- Parents in Ikyogen, Adagom and Ukende can cut their children’s hair and make sure they look neat so that they are not bullied and discriminated at school.
- Community can support in sensitization of the entire community to enrol children to school and protect them while going to school and coming back home and stop engaging children in home chores during school hours.
• Participants in Adagom said that parents and the community have the capacity to report and work with school management in monitoring the children and follow up to ensure compliance with school requirements.

• Adagom refugee community had a meeting with schools’ authority to discuss possibility of providing refugee teachers to close the gaps of student - teacher’s ratio and established joint PTA with host parents.

• Education committee and PTA can ensure children attend school by encouraging children to go to school, advice on the importance of education and sensitize parents on importance of education.

• Parents woke up the children and prepare them to go to school, support the children to do assignments, encourage the children to rest after school and teach them how to write.

• Parents have capacity to purchase uniforms for their children but those families that are most vulnerable can be supported by UNHCR through free provision of uniforms.

• Community to come together and build a nursery school in the settlement to ensure children aged 3- 5 are taught by community members having early childhood education teaching qualification to ensure every young child attend school.

• The community can encourage the children to go to school and enforce bylaws that shall implemented to fine parents of any child not going to school.

1.6.2. Protection risks beyond the community capacity to address.

• Refugee community do not have funds to construct more classrooms, buy desks, hire teachers and purchase the equipment for children living with disability to fully address special needs education.

1.6.3. Proposed solutions by the Community

• Children and adult participants in the FGDs proposed rehabilitation of schools and construction of new classrooms, provision of textbooks and desks at school to accommodate refugees and host community children to improve the quality of education.
• Government to employ trained and qualified teachers to improve teaching methodologies, the curriculum and quality of education provided at primary and secondary schools.
• Parents encourage the children to go to school and the government enforce a law to fine parents of any child living in the settlement or host community, but he / she does not go to school.
• In Ikogyen settlement proposed that the community members create education fund and contribute money to support in provision of transport for students in terms of hiring motorcycles for transport instead of trekking to school and from school.
• Refugees aged 25 – 49 in Ukende and Ikogyen suggested formation of community-based pre-primary school for children aged to address the issues of distance to school.
• Boys and adults in Ikogyen and male adults in Adagom proposed construction or provision of separate rooms at existing school for children with special needs education.

1.6.4. Recommendations

• UNHCR to advocate for employment of qualified refugee teachers to work in the host community existing schools to bridge the gap of child to teacher’s ratio created by refugee influx.
• UNHCR to work with government counterpart in Ikyogen to explore possibility of building a nursery school in the settlement for children aged 3 – 5 years old.
• Parents to provide their children with food before they go to school and tagging prizes to best performance students, this will attract hard working and excel in education.
• UNHCR WASH Unit and WASH partners – Save the Children International (SCI) to explore possibilities of improving availability of water at primary schools and Education partner – CARITAS and FJDP work together with SCI to improve hygiene and sanitation at schools.
• UNHCR Education sector work with Benue and Cross River Education departments to equip schools with textbooks, desks and other materials needed for quality education.
• CARITAS work with PTA, school management, protection monitors and refugee leaders to strengthen community-based structures in monitoring the pupils who are out of school and ensure there is procedures to reinstate to school.

• UNHCR through CARITAS and FJDP collaborate with government counterpart such as SEMA and NCFRMI to explore possibilities of provision of scholastic materials to vulnerable children from the host community to strengthen peaceful coexistence.

• UNHCR education partner namely, CARITAS and FJDP to explore possibilities of fundraising as a strategy to ensure children with special needs education are supported in accessing education through provision of facilities and teachers.

1.7. Peaceful Coexistence and Community-Based Protection

Generally, the children and adult respondents who participated in the FGDs from refugee and host community representatives informed that the relationship between refugees and Nigerians is good (Adagom host -75% and Ukende refugees - 63%) while some participants from host community and refugees said that there is very good relationship between host and refugees as the graph below indicates. However, 43% of Ikyogen host community respondents, 29% of refugee participants in Ikyogen and 25% of participants in Adagom refugees reported that the relationship between refugees and host community is poor while 19%, 14% and 6% participants in Adagom, Ikogyen and Ukende settlements respectively said that the relationship is very poor. Children informed that the relationship is good, they said, “we are good friends with children from the host community because we share notes and food”. The adults from host and refugee communities echoed that they share food, water and firewood, for example refugees works in host community farms and received food in return.
Likewise, refugee children in Ikyogen, Ukende and Akamkpa mentioned that host community sometimes provide food for free, while parents buy some food. However, some refugees and host community representatives complained that the relationship is very poor since some host community members deny them payment and abuse them while collecting firewood while host community respondents complained that some refugees steal food crops from host community’s farms. Furthermore, despite of mutual relationship, women are harassed and sexually abused by men in the process of firewood collection. For instance, men in Ukende and Adagom reported, “our women are been raped in exchange for firewood”. Besides, some refugee respondents living in the settlements and border communities informed that they lack freedom of movement since immigration officers and police at roadblocks force them to pay and harass them as if they must be confined in the houses. For example, some refugees in Ikyogen, Ukende and Adagom settlements as well refugees in Ikang and Oban complained of money distortion and harassment by police and immigration officers who deny them freedom of movement. Refugee respondents in Ikang reported that high presence of cultist is an obstacle too because cultism members harass refugees and some host community members. The participants from both host and refugee community echoed issues such as stealing, exploitation and mistreatment though they said that
these issues can be resolved amicably, and they cannot surpass the good relationship that exist between refugees and host community.

Host community and refugees’ respondents aged 18 – 50+ reported that presence of refugees has increased pressure on the existing limited resources such as firewood, water and food which lead to protection risks mentioned by refugees and host community. The relationship is good because we share food items and assist them in petty trading though some community members are nice some are not friendly, they exploit us when we work for them. However, “we are like brothers and sisters they are good, after assisting the host community in the farm, they provide foodstuffs, money and allow us to fetch water, access market they have shown us a lot of love”. Besides, children and adult respondents from host and refugee community reported that theft, mob gangs and fighting threaten their security as some youth are members of cultism. Furthermore, refugee respondents complained that vigilantes are not motivated which jeopardize security in the settlements because they lack security gears. In addition, host community in Oban and Big Qua said that despite of sharing resources available with refugee,
food is expensive and there is high cost of living in the town which is leads to lack of accommodation for some refugees.

1.7.1. Community capacity to address protection risks

- Community leaders such as refugee leadership and chiefs in the host community can foster cordial relationship between refugees and host communities through meetings such as town hall meetings to promote peaceful coexistence.
- Host community and refugees’ respondents aged 18 – 50+ said that the communities can come together to create joint vigilantes to monitor and patrol in the communities to enhance security.
- Refugees and host community share common security concerns, can report suspicious persons who come in their communities to security personnel.
- Refugee leaders can raise issues of mistreatment by Immigration and Police Officers with SEMA and UNHCR so that the government can educate the government law enforcers on refugee rights.

1.7.2. Protection risks beyond the community capacity to address.

- The respondents both from host and refugee communities do not have the capacity to increase the resources required such water, firewood as well as change mistreatment by law enforcers such as Police and Immigration Officers.

1.7.3. Proposed solutions by the community

- Women and men participants in Adagom, Ikyogen, Akamkpa and Bakassi proposed strengthening the existing community police (vigilantes) as well as collaboration between host and refugee vigilantes to combat insecurity.
- Refugees and host community respondents proposed that it is important to introduce affordable local production of cook stoves to reduce cutting of tree for firewood, but it should not be cooking stoves that use kerosene.
• UNHCR provide more street solar lights to support vigilantes and community members to reduces darkness and curb insecurity in their communities.

• Effective security should be put in place to safeguard the community, increased vigilantes or form vigilant groups, implement security rules and regulations for everyone, monitor the movement of young men and women in the night.

• Establish police stations close to communities in Ikyogen, Adagom and Ukende to work closely with community vigilantes in addressing cultism which is prevalent in the host community and in the settlement.

• Shelter partner improve the quality of house’s windows and doors which pose theft risks as they are weak which most times thieves break in.

• The loud music all over the settlement in Adagom should be controlled, intensify and reinforce vigilante group in every community, always check who comes and go out of the settlement.

1.7.4. Recommendations

• SEMA to work with host community chiefs and refugee leaders, conduct more dialogues with the community police and entire community to ensure joint security enhancement for safety and security within the settlements and host community.

• SEMA in consultation with refugees and host community members to explore possibilities of establishment of safer firewood collection points and introduction of woodlands by planting trees.

• SEMA in collaboration with chiefs and community structures such as refugee leadership at community level, youth associations, CBOs and community police work together to create a conflict resolution committee to solve conflict and security issues at settlement and host community levels.

• SEMA sensitize the community through existing structures for the community members engaging in the community security through identification and reporting perpetrators who violate human rights to SEMA and Police.
• SEMA and UNHCR explore possibilities of improving community police work environment by identifying gaps of necessary security gears they require to motivate and enhance security.
Chapter 2: Health and Nutrition

2.1. Health

Focus group discussions (FGDs) were held separately for male and female composed of 1457 (654M, 803F) participants. The FGDs were composed of 421 (184 M, 237 F) children aged 10 – 17. Refugees respondents in Ikogyen, Ukende and Adagom appreciated health insurance funded by UNHCR since it makes easy access to health services as they do not require cash to visit health centre or hospital. For instance, most respondents said, “health insurance is very good, we do not pay for health services when we go to the various hospitals we are assigned to”. However, some respondents complained that they are discriminated, stigmatized that they are dirty and kept on que for long when they go to hospitals. Participants in dialogues mentioned that the health problem that is common in their community is Malaria followed by diarrhoea as the graph indicates below.

Key protection risks related to Health Sector

1. Inadequate health workers at Adagom and Ukende health centres and lack of 24/7 hours ambulance to support referrals to hospitals within Ogoja and Kwande Local Governments.

2. Prevalence of anaemia among women and children is attributed to poverty, ignorance and poor dietary diversity.

3. Open defecation, lack of mosquito nets, infection from toilets and bushes and poor health seeking behaviour were most factors reported to contribute to diseases among both refugees and host communities.

4. Malnutrition is mainly caused by poverty, ignorance and lack of balanced diet due to delay of CBI distribution which most refugees depend on.
Refugee and host community participants informed that they have access to health services supported by UNHCR at Adagom and Ukende health centres free of charge. Though refugees complained that some health staff have negative attitude towards refugees as they discriminate them against nationals.

2.1.1. Community capacity to address protection risk

- Refugee men aged 25 – 49 have capacity to handle first Aid in the settlement if first aid centers are created and have existing qualified refugee health workers who can support Primary Health Care in Adagom and Ukende.

- Refugees and host community can clean the environment, use clean toilets, remove bushes around their houses and sick health services on time to prevent avoidable diseases and complications.

- The community have community members who have background on health and hygiene, they can create community structure to create awareness, monitor hygiene and sanitation in their community to improve the community health.

- The community can participate in clean up campaigns in the settlements to mitigate waterborne diseases resulting from poor hygiene.
2.1.2. Protection risks beyond the community capacity to address

- The refugees reported that they do not have capacity to change negative attitude by some Nigerian health workers towards refugees.
- Improvement of health services and provision of qualified and enough health workers motivation lies in hands of the Nigerian government and UNHCR because it requires money and procurement of health equipment.

2.1.3. Proposed solutions by the community

- The respondents suggested that SEMA through refugee leadership and the entire community should be mobilized to participate in hygiene and sanitation activities as mitigating measures for communicable diseases.

2.1.4. Recommendations

- UNHCR partner - FHI 360 to spearhead hygiene and sanitation and work with UNHCR – WASH partner – SCI to comprehensively tackle the WASH factors contributing to diseases.
- UNHCR Health Unit in collaboration with LGA Health department explore possibilities of licensing refugee health workers to practice in health centres or hospitals.
- UNHCR in collaboration with SEMA and NCFRMI advocate for inclusion of qualified health refugees in the Nigerian work force as per Nigerian Federal Government pledges under the Global Compact on Refugees (GCR).
- UNHCR explore possibilities of provision of mosquito nets and purchasing three ambulances for Adikpo, Ogoja and Calabar to support in facilitating emergency cases referrals.

2.2. Nutrition

A total of 61 Focus Group Discussions (FGDs) on nutrition were conducted with adult (18 – 50+) comprised of 1036 (470M, 566F) women and men groups of refugees and host community separately. The protection risks above are contributed by lack of opportunities for income generating activities leading refugees to use CBI for purchasing basic needs and food though not
balanced diet since they cannot regularly afford nutrition food thus exposing children to malnutrition including micronutrient deficiencies like anaemia. The lack of food variety and associated food preference of the community limits the utilization of the balanced diet among the young children which could be the reasons of malnutrition although it was not among of the predominant diseases reported during health FGDs. The community attributes malnutrition to lack of income reliable sources and income generating opportunities to afford basic needs such as nutritious food. The graph below indicates extent in which young children eat balanced diet, as it shows most respondents reported children eat well at 88% in Adagom, 86% in Ikogyen, 81% in Ukende settlements and 83% in Bakassi.

There are challenges related to compliance to adequate maternal care because of lack of knowledge as well as inadequate men participation in taking care of children. Women, despite knowing the details the practicality is limited due to multiple responsibilities, lack of time, and the food ingredients. Men are also less aware of various anaemia prevention interventions that women should get during pregnancy and after delivery, including medicine and testing, and this was uniform in host and refugee communities.
2.2.1. Community capacity to address protection risk

- Parents in host and refugee communities are interested and willing to seek treatment for children whenever they notice the malnutrition symptoms.
- Parents can ensure having backyard garden and save money to purchase nutritious food such as fruits, meat and milk for young children to curb malnutrition.

2.2.2. Protection risks beyond the community capacity to address.

- The supply of nutrition products and supplementary foods for children at health centres depends on UNHCR, government and UNHCR Health partner funding.

2.2.3. Proposed solutions by the community

- The community identified complementary food for children, pregnant and lactating women and expansion of livelihood opportunities as crucial in addressing nutrition issues.
- Expansion of livelihood opportunities would enable refugees and host community earn income to buy high nutritious food proposed by nutrition and health workers.

2.2.4. Recommendations

- UNHCR Health Unit in collaboration with Health partner to promote health seeking behaviours, address the knowledge and attitude gap towards children nurturing and appropriate diet.
- UNHCR and livelihood partner to explore possibilities of scaling up livelihood opportunities to bridge the poverty among refugees and host community and increase purchasing power.
Chapter 3: Water and Sanitation Hygiene (WASH)

Focused group discussions (FGDs) were held separately among male and female refugee and host community participants whereby a total of 1457 (654M, 803F) participants from Ikogyen, Adagom, Ukende, Akamkpa, Bakassi and Calabar municipality were engaged. The major issue raised by the refugees and host community were inadequate water due to most sources of water producing salty water which is not palatable and hardly applicable for home use.

![Water point supplied with water by a borehole in Adagom settlement ©UNHCR/R.Kirui](image)

The graph below indicates the reasons for open defecation in percentage as it were collected from refugees and host community respondents. The results indicate that highest percentage is among host community due to lack of toilets whereby Adagom (70%) and Oban (63%) while Ukende (28%) and Adagom (22%) refugee community lowest percentage.

- Inadequate hand washing facilities and other essential hygiene supplies at household, health centres and schools i.e. soaps, water storage facilities, dustbins, cleaning materials, and women and girls’ sanitary materials.
- Limited access to safe water in some areas in the settlements due to salty water in Ukende and Ikyogen, few safe water collection points in the refugee community, schools and health centres and storage contain households’ level.
- Inadequate access to latrines and bathing shelter both at household due to rocky texture that limits community participation in construction of latrines.

The graph below indicates the reasons for open defecation in percentage as it were collected from refugees and host community respondents. The results indicate that highest percentage is among host community due to lack of toilets whereby Adagom (70%) and Oban (63%) while Ukende (28%) and Adagom (22%) refugee community lowest percentage.
Majority of the participants especially refugees in Ikogyen and Ukende have limited access to drinking water because the boreholes are producing salty water. Water storage facilities echoed by most refugee despite of steps taken to address the issues; they requested more storage facilities such as jerry cans to be provided. Refugees in Ikyogen, Ukende and Adagom reported that some areas in the settlements are rocky but they do not have required equipment to support them to dig the appropriate length of the pit latrine. Moreover, in Ikyogen respondents reported that there are toilets constructed near swamps which creates dangers to children and adults.

Additionally, refugee participants in Ikyogen and Ukende settlements were happy with ventilated Improved pit (VIP) latrines because they do not release odour though they complained of small drop hole and that they get filled quickly. Refugees and host communities reported that there is no designated area for solid waste management which results to unproper handling of waste products such as dumping in the bush and burning which pollutes air and environment.
Participants from all settlements reported that there is inadequate water collection and storage containers as well as Water Users Committees were reported being inactive hence poor water points management. For example, in Ikogyen and Adagom children reported that parents and leaders are not controlling children who are the source of broken tapes. Furthermore, participants in Ukende, Ikyogen and Adagom settlements and host communities were willingly to contribute to water points management while in Calabar most participants were not willing compared to settlements and host community in Ogoja and Ikyogen. The participants who were willing to contribute explained that they are willing to contribute in terms of controlling crowd to fetch water in orderly manner and organizing the community to clean water point regularly as per the pie chart indicates below.
However, few refugee and host community participants in Adagom, Ukende, Ikyogen, Ikang and Oban proposed money contribution ranges from 50 – 300 Naira. The reasons provided by refugees for not willing to contribute were lack of livelihood and CBI attributed to food not for water points management while refugees in border communities informed that they are getting water free of charge from rivers and few from nationals who have water reservoirs. Host communities in Oban, Ikang and Big Qua mentioned lack of water points as most water supply by government is not functional so they do not have any reasons to contribute towards water system management. The refugee community appreciated the support on ensuring there are communal latrines. However, the communal latrine usage was reported to be low because are logged with water and dirty due to inadequate cleaning equipment. Therefore, respondents reported low coverage of latrines at household (HH) level associated with lack of ownership, poor hygiene and lack of maintenance of communal latrines.
3.1.1. Community capacity to address protection risk

- The community especially each parent can guide, and control children and water user committees can monitor every water point to control from damages and water wastage caused by children.
- The refugee and host communities have capacity to mobilize themselves to enhance hygiene and sanitation at household and community by ensuring simple maintenance of latrines and water points through small contributions and community participation.
- Community members at household level and community level can dig holes where to dump wastes and contribute small money for emptying the community dumping site by the local government authority.

3.1.2. Protection risks beyond the community capacity to address.

- Refugee participants in Ukende, Ikogyen and Adagom said that shortage of latrines at HH level, lack of ownership, poor hygiene and in adequate maintenance requires UNHCR support because it is associated with funding.

3.1.3. Proposed solutions by the Community

- Awareness creation among refugees and host communities on the importance and use of toilets to avoid open defecation which contributes to water borne diseases and other communicable diseases.

3.1.4. Recommendations

- UNHCR and WASH partner to provide sanitation equipment such as rakes and wheelbarrows and enhance mass campaign related to sanitation and community participation in monitoring and maintenance of water points and latrines.
- UNHCR WASH Sector and WASH partners collaborate with Calabar municipality, Akamkpa and Bakassi to address issue related with water in these communities where refugees reside.
- UNHCR – WASH partner collaborates with SEMA, community leaders, water user committees and hygiene promoters to mobilize the community to set a day for communal water points and environment cleaning to improve hygiene and sanitation.
- UNHCR – WASH partner to provide excavation and hygiene equipment to refugee WASH committee and work with SEMA and host community leadership to identify the waste management dumping site.
- UNHCR WASH Unit and WASH partner enhance Water User committee and carry out more consultative dialogues with refugees and host community on how to contribute and maintain use user fees in improving water points.
- WASH partner to organize town hall meetings to sensitize members of the refugee and host communities on the dangers of open defecations, facilitate community collective actions to end open defecation.
- WASH partner to re-consider latrine designs that are user friendly and can guarantee usage over a longer period.
Chapter 4: Shelter

Focused group discussions (FGDs) were held separately for male and female participants and it was only for refugees living in the settlements in Adagom, Ukende and Ikyogen since donors through UNHCR funded construction of shelters only for refugees residing in the settlements. The 52 FGDs composed of children and adults were held with 628 (251M, 377F) individuals whereby children were 284 (199M, 165F).

Participants appreciated involvement in the construction of their shelter, and they valued the shelter provided though they raised some issues which includes few plastic sheeting and some houses that were constructed in swamps in Ikyogen that require relocation. Poor locks, windows and doors, roof leakage and lack of kitchen were reported across all settlements while in Adagom and Ukende they reported that houses are small compared to family size and termites are destroying doors and windows.

In Ukende and Ikyogen participants complained of overcrowding in communal halls as they wait for relocation to their respective houses in Adagom III.
Respondents in Ukende and Adagom complained that dry trees are posing threats to their shelter because they are damaging their roofs, yet they are not allowed to prune. The risk caused by poor doors, locks and windows gives thieves chances to steal their properties easily and poor roof expose refugees into rain during rainy season.
4.1.1. Community capacity to address protection risk

- The participants reported that the community can come together to maintain the shelters at household level, but they require support from UNHCR and shelter partner because the materials required are not locally available and they are not financially capable to afford.

4.1.2. Protection risks beyond the community capacity to address.

- Refugees do not have financial capacity to buy construction materials although the community is capable to renovate halls and individual houses.
4.1.3. Proposed solutions by the Community

- They proposed UNHCR to provide construction materials such as poles and plastic sheeting so that the community contribute labour to ensure renovation of most poor shelters.

4.1.4. Recommendations.

- UNHCR and shelter partner to survey shelters that requires urgent repair and support the refugees with building materials for renovation.
- Community leaders and UNHCR shelter partner liaise with SEMA to discuss the way forward regarding protecting shelters from falling trees.
Chapter 5: Livelihoods

Focused group discussions (FGDs) were held separately for women and men participants in the three settlements and adjacent host communities as well as in Akamkpa, Bakassi and Calabar municipality with refugees and host communities regarding livelihood. 76 FGDs were held with only adults aged 18 – 50+ whereby 1036 (470M, 566F) were engaged in the dialogues. The livelihoods thematic team informed the participants about the livelihoods and protection interlinkages.

During the dialogues most refugees and host community expressed interests for crops production and livestock keeping such as fish and poultry as their livelihood for source of income as the graph below indicates.

Similar available livelihood opportunities related to skills they reported having include farming, hair dressing, tailoring, phone repair, small businesses, poultry, farming, education while nationals mentioned brick laying, carpentry and welding, mechanics, fishing, baking and hunting. In Ukende and Adagom settlement refugees mentioned the different skills which are soap and shoe making. However, refugees and host community had in common views regarding obstacles
related to livelihood advancement which includes lack of skills, inputs, capital and credit facilities. Also host community participants in Oban, Big Qua and Ikang informed that some members of the community have skills in electrical installation, running private school, commercial farming, plumbing and shoe making.

Participants reported that some community members belong to some savings group, association or cooperative, for example Ever Green Ladies Association and Awareness Farmers Multi-purpose Cooperative Society in the host community in Calabar particularly in Akamkpa and Bakassi which benefits them in terms of saving the money and later they share among the group during Christmas.

![Image](image_url)

**Key issues raised as setback for Livelihood Sector**

- Livelihood funded by UNHCR through partners such as FAO and CUSO are not adequate to support in addressing the number of youths in refugees and host community interests.
- Lack of land, in adequate skills in crop production, livestock keeping and fish farming to fully maximize production, ownership and sustainability.
- Lack of capital, access to loans and inputs such as varieties of quality seeds and other farm inputs particular refugees in the settlement and those living in border community.
Refugees in Ikang community reported that they formed a saving group called United we Stand Great Achievers which helps them to save money while in Ukende, Ikyogen and Adagom refugees informed that their saving group is called Jangi Progressive Group which is beneficial since it supports in saving money and use the saving for business, receives interest in return and it helps to meet household needs.

7.1.1. Community capacity to address protection risk

- Human manpower can participate in different income generating and development activities available, for instance, most youth are jobless, but they have skills and motivation to contribute in livelihoods development initiative.
- Host communities can provide land for cultivation and irrigation to engage in commercial agriculture such as crop production and livestock keeping.
- The livestock rearing skills and experience of the local communities is an asset to contribute to the development of livestock businesses in the refugee and host communities.
- Participants also described the existing peace and good refugee-host communal relations as important contributing factors to livelihoods development.

7.1.2. Protection risks beyond the community capacity to address.

- Limited livelihood opportunities which the refugee community do not have capacity to resolve as it requires enough capital.
- Lack of access to capital especially for refugees it is beyond their capacity which requires UNHCR and government advocacy.
- Lack of freedom of movement for refugees limit their capacity for marketing of agricultural products and difficult to search for jobs.
- Youth groups are facing very limited job opportunities and those trained on different skills by UNHCR partner – CUSO International lack start-up kits.
7.1.3. Proposed solutions by the Community

- Participants pointed out that refugees and host community members should come together to initiate joint livelihood activities to investment in livelihoods development support in creating employment and income generation opportunities.
- Government and UNHCR to fund more livelihood projects that give more chances to refugees and host community youth to engage in livelihood projects to deter them from engaging in cultism and harmful behaviour.

7.1.4. Recommendations

- UNHCR – livelihood partner to explore possibility of supporting cooperatives among the refugees and host community and capacitated them to work on agriculture business-oriented modality.
- Provision of improved variety of crop seeds and other farm inputs such as pesticides and fertilizer should be facilitated on time by livelihood partner considering farming season.
- UNHCR – livelihood partner should explore possibility of inputs provision where necessary, promote, encourage and educate farmers regarding the use of manure as organic and locally sourced as well as agronomic skills training to improve cropping techniques and yields.
- Government and UNHCR work with UNHCR – Livelihood partner to maximize agriculture and no-n agriculture livelihood opportunities and emphasize improvement of agriculture products and market linkages through identifying reliable markets and customers who can provide sale guarantees to cooperatives.
Chapter 6: Conclusion

During the PA, it was clear that providing feedback to refugees and host community is paramount as some respondents felt that not much consultation and interventions had been done to address recurring protection risks. It is therefore important that the government, UNHCR and partners while implementing various activities and during 2020 PA exercise feedback should be a priority to refugees and host community regarding the 2019 PA results and interventions programmed to address protection risks identified in 2019 PA. During FGDs refugees demonstrated remarkable generosity extended to refugees by the host community which is the confirmation of integration and peaceful coexistence among refugees and host community. Furthermore, they demonstrated the capacity within their communities and impressive problem-solving skills though underscoring the need for support by the government and UNHCR since most interventions require funds to address the protection risks identified.

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