

Life After Displacement: A Study of Refugees in a Nigerian Refugee Camp

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INTRODUCTION

Africa is currently beset with enormous refugee problem. In the last three decades, there have been serious political, economic and ethnic upheavals in most African countries. The turmoil in Liberia, Somalia, Rwanda, Angola, Mozambique and presently in Sierra Leone has forced large numbers of citizens of these countries to flee in search of a safe haven mostly in neighbouring countries and other countries of Africa. For instance, thousands of people from Algeria moved to Tunisia and Morocco during the war of independence some three decades ago. Following the ethnic clashes in Burundi, ethnic Hutus also fled into Rwanda and Tanzania. The late 70's also witnessed the outflow of several thousands of people from Equatorial Guinea to Cameroon and Gabon. The refugee problem worsened in the 80's as famine and serious political and ethnic conflict emerged. The Chadian civil war saw a great flow of refugees moving into Niger Republic and Nigeria; thousands of people also fled into Ethiopia from Sudan, and because of the armed conflict in Somalia, several refugees also moved into Ethiopia. The Liberian civil war 'extended' the refugee problem to West Africa, a part of the continent which was hitherto largely unaffected by the refugee problem affecting other parts of Africa. The Sierra-Leonian war has however compounded the problem as thousands of Sierra Leonians flee the country almost everyday.

Scholars have noted the serious effects of these uprisings on development generally. Ake (1985) in this regard observed that repression has led to an enormous waste of human resources, the very engine of development and that the use of coercion has turned Africa to a continent of refugees. Muggah (2000) also affirmed this when he noted that large scale forced displacement distorts regional, national and local economies and tears apart communities and families. The African Refugee Foundation (AREF) in 1996 also made similar assertion. According to the Founda-

tion, Angola is reported to have lost 20 billion US dollars from the destruction of property, development has also stagnated in countries like Chad, Mozambique, Liberia, Somalia etc where refugees have been produced in large numbers. The United Nations High commission for Refugee (UNHCR) in 1996 gave a population of almost 12 million African refugees out of a world total population of about 28 million refugees. Sadly too, half of the world population of refugees are said to be children under the age of 15, and majority of these are also found in African countries (Migration news, 1992, Odumusu, 1995).

Apart from the problems of refugeeism to affected countries, refugees themselves face horrendous situations. The most significant of these problems is family disintegration. In flight, family members are often separated; male family members are killed; family members undergo a lot of stress, while family life, hope and aspirations are shattered (Berthioume, 1994; Dixon-Fyle, 1994). Adebayo (1994) and Ehigie (1995) also commented on the physical and mental health conditions of the refugees. They are also found to be prone to several illnesses and sexually transmitted diseases.

In Nigeria, refugees are accommodated at Oru Refugee Camp which was opened in 1990 to cater for displaced persons from Liberia and other affected countries. Although there have been studies on refugees generally but little is known about their survival strategies in the camps, their extent of relationship with the indigenes and their life aspirations. This paper is thus focused on these aspects of the refugees' lives. Specifically, the paper seeks to find out whether the camp environment is conducive for them, their sources of livelihood, common ailment and access to health care services, as well as the nature of relationship between them and the indigenes.

METHOD OF STUDY

Study Population

The study population consisted of all

refugees in Oru Refugee Camp. As at the time of this survey, there were seven hundred and forty-four (744) refugees in the camp from eight different countries namely Liberia, Sierra-Leone, Congo, Chad, Somalia, Sudan, Rwanda and Ghana. This number however does not include refugees who have been well integrated into the urban society. Table 1 shows the number of refugees by country.

Table 1: Number of refugees by country

<i>Country</i>	<i>Number</i>
Liberia	369
Sierra Leone	355
Congo	11
Chad	1
Somalia	1
Sudan	3
Rwanda	3
Ghana	3
Total	744

Source: Field Work, August, 2000

Apart from the refugees, indigenes of Oru Community were also involved in the study. Other persons interviewed in the study were the camp commandant and the camp doctor. It is however important to say that only refugees who are age 18 and above were selected for the study. This was based on the assumption that this age category are most likely to be engaged in certain activities in order to improve their condition as well as those of their immediate family while in camp. Also, the age category was limited to 18 and above to avoid the ethical insurmountable problem of interviewing a minor.

SAMPLE DESIGN AND SAMPLE SIZE

Out of the seven hundred and forty-four refugees in the camp, two hundred and sixty-five were selected to represent the whole population. Two hundred and forty-three (243) of these were selected from the Liberian and Sierra Leonian population through the use of quota and simple random sampling techniques. Quota sampling was adopted to ensure that a sizeable number of female refugees were involved, at least one-third of the sampled population were to be female refugees.

The use of simple random sampling was also made easy by the list of refugees which was in possession of each chairman of each national in

the camp. The list therefore served as the sample frame from which the sample was drawn. All refugees from other countries apart from Liberia and Sierra-Leone were included in the study because of their small number. Table 2 shows the distribu-

Table 2: Distribution of sampled refugees by country

<i>Country</i>	<i>Number</i>
Liberia	123
Sierra Leone	120
Congo	11
Sudan	1
Chad	1
Rwanda	3
Somalia	3
Ghana	3
Total	265

tion of respondents by country.

For the indigenes, purposive sampling was used in selecting eight (8) respondents. This was due to their proximity to the refugee camp, thus putting them in a position of regular contact with the refugees. The two other respondents (camp commandant and camp doctor) were selected due to the nature of their jobs in the camp.

DATA COLLECTION AND ANALYSIS

The field work was undertaken in April, 2001. Two methods of data collection, namely the survey and in-depth interview were used. The survey method was used to gather data from the refugees through a questionnaire containing questions regarding the objectives of the study. The questionnaires were administered to all two hundred and sixty-five sampled refugees. Refugees who understood English language completed the questionnaires themselves while those that did not, especially refugees from Francophone countries, were provided with translators who assisted in completing the questionnaires.

In-depth interviews were employed to gather qualitative information from the indigenes, the camp commandant as well as the camp doctor. In all, field work lasted four weeks.

Data Analysis was essentially qualitative and descriptive.

FINDINGS

Findings on the socio-demographic characte-

ristics of the respondents are shown in table 3. The findings show that 50.6% are males while females constitute 44.1% of the total sampled population. Five percent however did not indicate their sex. Although, the general female population in the camp as well as in the sampled population can be considered high, the lower population compared to males can however be explained by the fact that more often than not, females are forced into marriages with soldiers or rebels during war situation as experienced in the countries of refugees. Again, it is also plausible to argue that women, more than men have various other ways of integrating themselves into the society. For instance, females are likely to attract the sympathy of relations and even soldiers, as to prevent them from seeking refuge in another country.

Although the respondents' ages were limited to 18 and above, there are still great disparities within age categories which call for explanation. For instance, majority of the refugees (62%) are between 21 and 35 years old. This could be adduced to the fact that within these ages, refugees are very strong, thus making it possible to escape from war-torn areas.

The majority of refugees are Christians (60.8%) while only 29.3% are Muslims. No respondents indicated affiliation to traditional religion.

Furthermore, only 6% of the refugees did not have any formal training at all. Others at least have primary school leaving certificate.

The refugees are engaged in farming, manual jobs and petty trading. There is actually no distinct occupation of the refugees as they are engaged in more than one economic activity. Interestingly, most of the refugees are also going to schools while some also take to organizing coaching classes for refugees' children and willing children of indigenes.

About 56% of the refugees are married while 31.7% are single. Less than 2% are either separated or divorced while another 5.7% gave no response.

Majority of the respondents also have children (67.2%) – 33.2% have between 1 and 3 children while 26% have also given birth to 4 – 6 children. Twenty-one (8.0%) respondents have seven children and more. Almost 30% however have none. This later category constitute the unmarried group who are mostly students, and

Table 3: Socio-demographic characteristics of refugees

<i>Characteristics</i>	<i>Frequency</i>	<i>Percentage</i>
<i>Sex</i>		
Male	134	50.7
Female	117	44.3
No response	14	5.0
Total	265	100
<i>Age</i>		
18 – 20	31	11.7
21 – 25	49	18.5
26 – 30	56	21.1
31 – 35	60	22.6
36 and above	69	26.1
Total	265	100.0
<i>Religion</i>		
Christianity	161	60.8
Islam	78	29.4
Traditional	-	-
Others	12	4.5
No Response	14	5.3
Total	265	100.0
<i>Education</i>		
None	16	6.0
Primary	155	58.5
Secondary	80	30.2
Tertiary	14	5.3
Total	265	100.0
<i>Occupation</i>		
Farming	61	23.0
Petty-trading	56	21.1
Artisan	46	17.4
Domestic worker	6	2.3
Student	87	32.8
Others	9	3.4
Total	265	100.0
<i>Marital Status</i>		
Single	84	31.7
Married	148	55.9
Separated	2	0.7
Divorced	2	0.7
Widowed	14	5.3
No Response	15	5.7
Total	265	100.0
<i>Number of Children</i>		
1 – 3	88	33.2
4 – 6	69	26.0
7 and above	21	8.0
None	72	27.2
No Response	15	5.6
Total	265	100.0
<i>Income</i>		
Below N1,000	80	30.2
N1,000 – N1,500	33	12.5
N1,500 and above	5	1.9
None	130	49.0
No Response	17	6.4
Total	265	100.0

those who lost their children during the war back at home.

On respondents' income, most (49.0%) have none whatsoever. Thirty percent earn below N1,000 a month, 12.5% earn between N1,000 – N1,500 while only 2% earn more than N1,500. In other words, majority of the refugees depend on the relief materials given by the United Nations High commission for Refugees (UNHCR).

SURVIVAL STRATEGIES OF REFUGEES

The refugees are fed by the relief materials supplied by the UNHCR. The relief materials are supplied once a month and their distribution are handled by the Red Cross Society present in the Camp. The distribution is such that it is given according to each registered person or family in the camp. Majority of the refugees (97.8%) however assert that the materials are not supplied regularly and are insufficient for their needs. Most of the refugees, as the survey shows augment by engaging in one form of economic activity or the other. According to one of the refugees.

The relief materials do not include fish, meat or pepper, so I have to provide for those as well and at times I sell some of the relief materials to get these other things.

This response is typical of the others from the respondents. They engage in farming and petty-trading. Some even engage in a form of exchange with the indigenes. They sell part of their relief materials to the indigenes for them to buy the things that they require. The survey further shows that the insufficiency of relief materials has nothing to do with family size as both married and single hold same views. For instance, only 2% of refugees with children and 2.5% of those with no children (single) feel that the relief materials are adequate.

RELATIONSHIP WITH INDIGENES

The study shows that the relationship between the refugees and the indigenes is essentially economic, although some traces of social relationship also exists. The in-depth interview conducted with the indigenes generated some useful responses regarding this. For instance, an indigene, a tailor who lives very close to the camp say *I only talk to them when they bring clothes*

to me. Another indigene says also

I went to school with them but because they were much older than myself, we did not have much to say to one another. I only relate to them when they have things to sell.

Indeed, some indigenes see the refugees as being more comfortable than them. According to a barber, an indigene,

I cannot help these people because what they have, I do not have. They wear things that I can not even afford so why should I help them.

These opinions also have some bearing on marriage between the indigenes and the refugees. About 48% of the Refugees will not allow their children to be married to indigenes, most of these are Sierra-Leonian refugees who are still new in the camp. The Liberian refugees are not opposed to the idea. Infact, as the Camp commandant says, the few cases of marriage between refugees and indigenes have been that between Liberians and Nigerians. Here, the length of stay of refugees seems to influence their opinion. Further analysis also shows that the level of education of the refugees can also tacitly influence parental decision on their children's choice of spouse. Almost 62% of those with tertiary education will allow their children to be married to indigenes. However, 87.5%, 72.7%, 69.6% and 34% of those with no formal education, Primary, Secondary and tertiary education respectively object to the idea. These figures show that the higher the educational level of refugees, the higher their tendencies of having an open mind to their children's choice of an indigene as marital partner.

REFUGEES' CHILDREN

The results of the study indicate that children of refugees have changed in several ways since their arrival in camp. Their attitude towards people have changed from those who witnessed the war. They identify very well with other refugee children and now feel very safe and happy, although they initially found camp life strange. Majority (81.9%) of the refugees who have children said their children initially were asking for their school friends and other friends but that they have now adjusted well. However, 91.7% of parents still say that their children ask about their country and when they will be returning. Most of the children

are within school age, so they go to the primary school located in the camp. About 72% of children go to school while 28.8% do not go. Interestingly, an overwhelming majority of the refugees say they still teach their children in line with what obtains in the country. In short, although the children are in foreign land, they are still socialized according to the culture of their home country.

REFUGEES' HEALTH

The health condition of the refugees can be described as appalling. Most of the refugees, as the study revealed suffer from ailments such as malaria, cough, cold, catarrh, skin diseases and even sexually transmitted diseases which in-depth interview reveals has been on the increase. Of the ailments however, malaria is the commonest. In the in-depth interview with the camp doctor, he asserted that out of all the patients he sees daily, 90% of them suffer from malaria. The poor health condition of the refugees has been attributed to many factors such as the poor feeding habit of the refugees, unhealthy environment due to poor sanitation and poor housing condition.

One other interesting finding emanating from the study is the high rate at which young unmarried girls get pregnant. *There are about 40 pregnant girls between the ages of 20 and 25 and all are unmarried* says the camp doctor. Further inquiries reveal that majority of the pregnant girls are Sierra-Leonian refugees who are the newest of the refugees. Their innocence coupled with lack of knowledge of the environment are said to have been responsible for their situation. Generally, interviews reveal that there is nothing that can be done to reduce the increasingly alarming rate of pregnancy and abortion among the refugees. Indeed, the refugees in the camp are said to have a slogan which says *we live to eat, sleep and have sex*. This way of life can also be said to account for the increase in the number of people

who present with sexually transmitted diseases, since the rate of condom use is also found to be low.

With regards to utilization of health care, although most of the refugees (67.3%) utilize the camp clinic when ill, some still engage in self-medication and the use of herbs. Most refugees use the camp clinic because of the availability of free drugs while those who resort to traditional care (Use of herbs) do so because of their belief in the potency of herbs in curing disease, even sexually transmitted diseases (see Table 4).

Table 4: Type of medical care utilized by refugees

Type	Frequency	Percentage
Self medication	28	10.6
Camp clinic	179	67.5
Use of herbs	44	16.6
No response	14	5.3
Total	265	100.0

However, the refugees' level of education is seen to correlate with their adoption pattern in terms of type of health care. For instance, it was discovered that the higher the educational status of refugees, the higher their inclination towards adopting modern health care system. Majority of those with no education (45.4%) use herbs when ill as opposed to 84.4% and 80% of those with tertiary and secondary level education who go to the camp clinic when ill (see Table 5).

CONCLUSION

This paper has tried to describe the life of refugees in a Refugee Camp in Nigeria. A summary of finding suggests that majority of the refugees are males, possess primary and secondary level education, subscribe to Christian and Islamic faith and are engaged in low income generating activities. Furthermore, because of the inadequacy of relief materials supplied by the UNHCR, refugees also engage in farming, petty

Table 5: Level of education by type of medical care utilized

Type	Level of Education				Total
	None	Primary	Secondary	Tertiary	
Self medication	4 (25.0%)	27 (17.4%)	7 (8.8%)	1 (7.14%)	39 (14.7%)
Camp clinic	4 (25.0%)	81 (52.3%)	64 (80.0%)	12 (85.7%)	161 (60.8%)
Use of herbs	8 (50.0%)	47 (30.3%)	9 (11.2%)	1 (7.14%)	65 (24.5%)
No response	-	-	-	-	-
Total	16 (100%)	155 (100%)	80 (100%)	14 (100%)	265 (100%)

trading in order to meet their daily needs.

Although most of the refugees are coping fairly well with their 'new home', life at the refugee camp is also not that interesting. For instance, in spite of the relatively long presence of some of the refugees at the camp, relationship with the indigenes is still not very cordial, there is hardly any interaction except for economic purposes alone. Indeed, most of the refugees and the indigenes interviewed will not support any idea of marriage between them. Of all the categories of people in the camp, the children seem to be worst hit by their displacement, as majority of them still ask about their date of return back home. Refugees also suffer from all kinds of diseases, mostly malaria and utilize the camp clinic when ill. A high incidence of adolescence pregnancy and sexually transmitted disease was also discovered among the refugees.

On the whole, it can be said that the refugees are not living a good life at the camp, and a lot needs to be done to improve their conditions of living. In respect of this, the following recommendations are made.

Firstly, the UNHCR and the Nigerian government need to assist the refugees to fend for their own needs and not totally depend on the relief materials supplied every month. In this regard, the government can assist by providing farmlands, and embark on vocational training for those interested refugees. Through this, a feeling of refugees as somebody who has to depend entirely on the generosity of the UNHCR will be erased.

Secondly, infrastructures at the camp need to be improved upon. The houses need to be rehabilitated and various other recreational amenities provided.

Massive campaign also need to be embarked upon to improve the health status of the refugees. Information on the dangers of self medication and the use of some herbs should be provided. The male refugees should also be encouraged to adopt the use of condom during sexual intercourse to reduce the spread of sexually transmitted diseases and unwanted pregnancies.

Also, effort should be geared towards integrating the refugees into the wider community. The community leaders will have to be co-opted into this campaign. This will go a long way into making

the refugees feel that they are really not 'strangers' in their new community. Again, this will help the refugees in overcoming the feelings of the effects of the war in their home countries, and make them concentrate on living their lives once again.

KEY WORDS War. Displacement. Refugees. Survival.

ABSTRACT Very few studies have been conducted on refugees. Still very few or none have focused on their life pattern and coping strategies in their new environment. This study was therefore conceived to address these issues. Specifically, the paper addressed the socio-demographic characteristics of refugees, and life in their new environment. With a sample of two hundred and sixty five refugees, eight indigenes and two officials of the refugee camp, data were collected through the use of questionnaire and in-depth interview method. Some of the major findings of the study include the fact that most of the refugees are males, possess primary and secondary level education, and are engaged in various economic activities to augment the relief materials supplied by the United Nations High commission for Refugees (UNHCR). Furthermore, relationship with indigenes is nothing beyond economic relationships. Refugees also suffer from all kinds of illnesses but mostly malaria and some are also afflicted by sexually transmitted diseases. When ill however, they patronize the camp clinic for treatment.

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