# ASSESSMENT OF COPING STRATEGIES OF INTERNALLY DISPLACED PERSONS IN NIGER STATE, NIGERIA

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#### **ABSTRACT**

Globally, banditry, terrorism, conflicts, natural and man-made disasters, construction of development projects, human rights violations and many others have resulted in internal displacement of many people. In Nigeria, some of these factors have affected many victims majority of whom are rural farmers to Internally Displaced Persons (IDPs) camps. The study was a rapid assessment of coping strategies adopted by the IDPs in Niger State, Nigeria. The population of the study comprised all the 10,465 IDPs from the five functional IDP Camps in the state. A two-stage sampling technique of simple random and convenient samplings was adopted in the selection of 400 IDP respondents. The study adopted the mixed methods approach which comprises Focused Group Discussions and Questionnaire administration by electronic means. Multinomial Logistic Regression and descriptive statistics were used for the analysis. The study revealed that IDPs coped mainly by relying on traditional medicine, contributions from relatives and friends, stored foods, and food aid from government. The study recommended that Government should provide adequate humanitarian assistance, especially orthodox medication to the IDPs to make their lives meaningful in camps.

**Keywords:** Assessment, coping strategies, internally displaced persons, displacement, banditry

## 1.0 INTRODUCTION

Worldwide, displacement of persons is a daily phenomenon. In 2018 alone, 28 million people from 148 countries were internally displaced (Hollinger and Sienkevych, 2019). Displacement of populations is triggered by political, social, economic and environmental factors. During the 2020 crises in Ethiopia, Sudan, Sahel countries, Mozambique, Yemen, Afghanistan, and Colombia, about 11.2 million persons were forced to flee their homes (United Nations High Commissioner for Refugees, UNHCR, 2020). Turkey hosted about 4 million who were mainly Syrian refugees. Colombia hosted over 1.7 million displaced Venezuelan refugees. Germany equally hosted a large population comprising Syrian refugees and asylum seekers amounting to

1.5 million (UNHCR, 2020). There were about 59.1 million internally displaced persons worldwide at the end of 2021(Internal Displacement Monitoring Centre, IDMC, 2022).

Nigeria had about 3.3 million displaced Persons due to conflicts in 2013 (Okon, 2018). The rise in the number of internally displaced persons in the country was due to increased number of Boko haram attacks, heavy-handed counter insurgency operations and on-going inter-communal violence and the famers-herders conflicts (Okon, 2018). This insurgency or conflicts took a heavy toll on the availability of food, both quality and quantity that families or households had access to (Kah, 2017). Following this development, many people deserted their villages and were scared of returning home to avoid further attacks. Farms were abandoned, many lost their houses, children, wives, husbands, animals and crops (Wikipedia, 2017). Niger and Benue states were the worst hit in the country. Some of the affected households moved to IDP camps where they are receiving humanitarian assistance from the National Emergency Management Agency (NEMA), the Niger State Emergency Management Agency (NSEMA), NGOs such as Development Initiative of West Africa (DIWA), Development Partners and individual donors. According to Yikwabs and Tade(2021), many of the victims in camps have adopted numerous coping strategies, such as relying on friends and families, job switching, formation of a vigilante group and trusting God. Raji et al. (2021) stated that some IDPs practiced the cultivation of a small garden within the camp backyard to grow vegetables and other foods for their families. Ezikiel (2022) stated that IDPs exhibited resilience by adapting to their current locations, establishing internal camp and health management structures and advocating with external organizations. This will, no doubt, exacerbate shortage of food supply and poverty in the country due to farm abandonment. This is further stressed by Ukamaka et al. (2017) which stated that, "displacement is a big challeng to economic development, threat to food security and sustainable livelihood of agrarian communities." The number of persons forcefully displaced from their homes, the long period of their plight and many negative consequences of internal displacement

informed this study. This study will provide a foundation for policies and programmes for the IDPs in the country which go beyond the provision of humanitarian assistance to durable solutions.

## 1.1 Concept of Coping Srategies

A Coping strategy is a short term response to threats to livelihoods (FAO, 2009). Algorani and Gupta(2023) defined coping as the thoughts and behaviours mobilised to manage internal and external stressful situations. Coping strategies are therefore the actions, behaviours, and cognitive processes that individuals use to manage, tolerate, or overcome stressful, traumatic, or challenging situations. They help individuals to regulate their emotions, reduce stress, and maintain their physical and mental well-being. Newell and Davis (2023) defined coping strategies as any conscious or unconscious decision which causes relief or consolation in stressful situations. It stated that the two main types of coping strategies are emotion focused coping strategies that address the emotional needs of an individual and problem focused coping strategies that seek to eliminate the source of the problem.

#### 1.3 Theoretical Framework

The study is premised on the Conservation of Resource Theory. It was propounded by an American psychologist, Stevan E. Hobfoll in 1989. The theory proposed that individuals strive to conserve and protect their resources, such as time, energy, social support in the face of stress. Coping strategies are employed to conserve resources and mitigate resource loss. The IDPs have experienced significant resource loss, including their houses, livelihoods, social support networks, and sense of security. In the camp, they must conserve their remaining resources, such as food, water, shelter, and health to survive. In this context, IDPs employed various coping strategies to conserve resources, such as: sharing resources with others, seeking support from aid organizations or community leaders, engaging in informal economic activities, and practicing

stress-reducing behaviours, like prayer or socializing. The theory provides a foundation for understanding the complex and dynamic nature of coping strategies.

## 2.0 METHODOLOGY

## 2.1 Sampling Technique and Sample Size

A two-stage sampling technique was adopted in the selection of 400 IDP respondents. The first stage was the simple random sampling of four IDP camps (Gwada, Kuta, Sarkin Pawa, and Mashegu IDP camps) from the 5 functional camps in the state. The five functional camps were: Gwada, Kuta, Sarkin Pawa, Mashegu and Kagara IDP camps. The second stage was the covenient sampling of 100 respondents from each of the 4 camps, making a total of 400 IDPs.

#### 2.2 Methods of Data Collection

Both quantitative and qualitative data were collected through a cross-sectional method by using structured questionnaire and interview method in addition to the Focused Group Discussion (FGD). Data were collected electronically with the use of Kobo-tool-box.

## 2.3 Analytical Technique and Model Specification.

Descriptive Statistics and Multinomial Logistic Regression were used in the analysis of data. In identifying the coping methods adopted by the IDPs and their determinants, the following coping strategies were considered. They are: street begging, sale of productive assets while in camp, skipping of meals, eat whatever food given by donors, relying on stored foods, feedin from relatives/friends outside the camp, relying on daily income activities, relying on traditional medicine, praying always, sending children to stay with relatives/ friends outside the camp, depending on contributions from relatives/friends in camp, street hawking by children, relying on previous savings, marrying out children early, withdrawing children from schools, relying on aid from donors (individuals, government and NGOs/Development partners), purchasing of less expensive foods, reducing quantity of foods, asking children below 15 years to work, relying on

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obtained credit, sale of family assets, sold harvest in advance, and did nothing. The IDPs were asked to select only one majorly adopted coping strategy to avoid multiple responses. Part of the objective was achieved using descriptive statistics. In arriving at the determinants of the coping strategies, Multinomial logistic Regression analysis was employed because the dependent variable, Y, is categorical. The arrays of the coping strategies were grouped into 4 broad categories which gave the categorical dependent variable, Y<sub>0</sub>, Y<sub>1</sub>, Y<sub>2</sub>, and Y<sub>3</sub> as follows:

 $Y_0$  = relying on others (last-resort) (reference group)

 $Y_1$  = seeking employment outside IDP camps (strongest effort)

 $Y_2$  = relying on savings and cost-cutting measures (stronger effort), and

 $Y_3$  = relying on aid and supports (strong effort)

Coping strategies in category  $Y_0$  are:

- 1. Sale of productive assets while in camp
- 2. Eat whatever food given to me
- 3. Praying always
- 4. Marrying out children early
- 5. Sale of family properties
- 6. Sold harvest in advance, and
- 7. Did nothing
- 8. Withdrawing children from school

Coping strategies in category Y<sub>1</sub> are:

- 1. Street begging
- 2. Relying on daily income activities
- 3. Relying on harvested traditional medicine
- 4. Street hawking by children, and
- 5. Children less than 15 years asked to work.

Coping strategies in category Y<sub>2</sub> are:

- 1. Relying on stored foods
- 2. Sending children to stay with relatives/friends outside the camp
- 3. Relying on savings
- 4. Purchasing less expensive foods.
- 5. Skipping meals
- 6. Reduce quantity of food taken

Coping strategies in category Y<sub>3</sub> are:

- 1. Feeding from relatives/friends outside the camp
- 2. Contributions from relatives/friends inside the camp
- 3. Relying on aid from individuals, government, NGOs and development partners
- 4. Relying on obtained credit

All the IDPs that responded yes to all these coping strategies were summed up by categories. The values obtained for each category gives the value of the categorical dependent variable,  $\mathbf{Y} \cdot \mathbf{Y}_{0,1,2,3}$ 

$$= F(X_1, X_2, ..., X_n)...$$
 (1)

Where  $Y_{0,1,2,3}$  are the coping style categories (categorical)

Explicitly, the model is expressed as follows:

$$Y = a + b_1X_1 + b_2X_2 + b_3X_3 + b_4X_4 + b_5X_5 + b_6X_6 + b_7X_7 + b_8X_8 + b_9X_9 + \mu \dots (i)$$

Where:

Y = categorical dependent variable

a = constant

 $b_1$ -  $b_9$  = coefficients of the determinants

 $X_1..X_9$  are the independent variables (determinants of coping strategies)

 $\mu = error term$ 

The Multiple Logistic Regression is expressed thus:

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$$\log \frac{\pi j(xi)}{\pi k(xi)} = \beta oj + \beta_{1j} x_{1i} + \beta_{2j} x_{2i} + \dots \beta_{pj} x_{pi} \dots (ii)$$

$$j = 1, 2, ....(k-1)$$

$$i = 1, 2, ...., n$$

Since there is no ordering, any group can be labelled k. Let  $\pi_j$  denote the multinomial probability of an observation falling in the  $j^{th}$  category. Since all the  $\pi$ 's add to unity,

$$Log[\pi_{j} \ (x_{i})] = \frac{exp\beta oj + \beta 1jx1i + \cdots + \beta pjxpi}{1 + \mathcal{L}_{j=1}^{k-1} exp(\beta oj + \beta 1jx1i + \beta 2jx2i + \cdots + \beta pjxpi)} \quad \dots \dots \ (iii)$$

Therefore, probability of belonging to the comparison category is expressed as:

$$\pi(Y_I=K) = \frac{\exp\beta oj + \beta 1jx1i + \cdots + \beta pjxpi}{1 + \varSigma_{j=1}^{k-1} \exp(\beta oj + \beta 1jx1i + \beta 2jx2i + \cdots + \beta pjxpi)} \quad \dots \quad \text{(iv)}$$

It means for each case, there will be k-1 predicted log odds, one for each category relative to the reference category,

$$\pi(Y_i = 1) = \frac{1}{1 + \sum_{i=1}^{k-1} \exp(\beta oj + \beta 1jx1i + \beta 2jx2i + \dots + \beta pjxpi)} \dots \dots \dots \dots (v)$$

When estimating the Model, the coefficients of the reference group are normalized to zero since the logit model is a logistic distribution bounded between 0 and 1 (Heisey & Mwangi, 1996).

## 3.0 RESULTS AND DISCUSSION

## 3.1 Coping Strategies of IDPs

The coping strategies of the IDPs are given in Table 1a. From the Table, a total of 23 coping strategies were adopted by the IDPs in order to live a meaningful life in the camps. In category **a,** all those who adopted coping strategies that have resemblance of seeking employment outside the camps were grouped here. In this category, relying on traditional medicine, representing 37.77 % of the IDPs is the highest followed by relying on daily income from daily paid labour (24.44 %). The findings revealed that this category had a total of 90 IDPs. The findings also

revealed in category **b** that 23 IDPs responded to have relied on aid and support from donors. Twenty of the IDPs responded to had fed from relatives or friends outside the camps. In this category also, 25 IDPs adopted the main coping strategy of relying on contributions from relatives and friends inside the camps. The study revealed in category **c** that, 26 of the IDPs have coped by relying on stored foods to ensure they survived in camps and it is the highest coping strategy in this category. This might be due to insufficient foods from government and other donors. These were the foods stored by the IDPs before their displacement to the camps. In this category also, 17 of them relied on previous savings before being displaced to the camps. About 25 of the IDPs in this category adopted the coping strategy of reducing quantities of meals while 15 of them skipped their meals to cope with the stress and hunger in the camps. This may be due to poor quantities of foods or shortage of foods for the IDPs or the adult may have decided to skip meals in order to satisfy their children. This category has a total of 100 IDPs.

The research findings also revealed that in category **d**, major critical decisions were taken here to ensure the survival of the IDPs. 27 of the IDPs sold their productive assets to cope with the life in the camps while 40 of them ate whatever food given to them. This means they had no alternatives.

In this category too, children were married out early. This might be due to excess burden of catering for them and lack of money to feed and educate them. This will lighten their burden by transferring the costs to their spouses. Other critical coping strategy here was the selling of harvest in advance by 10 of the IDPs. This means, they had nothing left to rely on at the end of the cropping season. In order words, they were living from hand to mouth. Some of the IDPs (15) believed in the efficacy of prayer. They prayed everyday trusting God that a day was going to come when they would leave the camp. While the researcher was in a focused group discussion session, one man rode on a motorcycle to Gwada camp. All the participants in chorus told the researcher:

"Ah! Our pastor has come for prayer."

It was exactly 1630 hrs of 29<sup>th</sup> March, 2023. They believed in God's power. This category has a total of 120 IDPs. The study revealed that, in the four coping categories, relying on traditional medicine, relying on contributions from relatives and friends in camps, relying on stored and eat whatever food given by the donors were the main adopted coping strategies. This is in line with Yikwabs and Tade (2021) which stated that victims of internal displacement in Nasarawa state relied on their friends and families to cope. The victims equally reled on traditional medication. It means the IDPs majorly relied on traditional medicine when sick than orthodox medication. This might be due to poor orthodox medication in the camps. IDPs relied on stored foods and ate whatever foods provided for them by donors. This is in agreement with Tade (2021) which stated that victims of internal displacement relied on friends and family for food and shelter to cope. Meaning that eating whatever food offered, even if not preferred, is a common coping strategy due to limitred access to food and the need to survive.

Table 1 a: Distribution of IDPs by coping strategies

Category of coping	Coping strategies	Number	Percentage per category
	-	of IDPs	
a. Seeking employment outside the camps(strongest effort)		5.50	
	Rely on daily income	22	2444
	Rely on traditional medicine	34	37.77
	Street hawking by children	20	22.22
	Children aged 15 start to work	9	10.00
	Total	90	
b. Relying on aid and support(strong effort)	Feeding from relatives/friends outside camp	20	22.22
	Contributions from relatives/friends inside and	25	27.78
	outside the camps		
	Rely on aid from donors	23	25.55
	Rely on obtained credit	22	24.45
	Total	90	
c. Relying on savings and cost- cutting measures (stronger effort)	Rely on stored foods	26	26.00
	Sending children to stay with relatives/friends outside the camps.	7	7.00
	Purchase less expensive foods	10	10.00
	Rely on savings	17	17.00
	Skipping meals	15	15.00
	Reduce meal quantity	25	25.00
	Total	100	
d. Relying on others (last-resort)(reference group)	Sale of productive assets	27	22.50
	Eat whatever-food given to me	40	33.33
	Praying always	15	12.50
	Marrying out children early	7	5.83
	Sale of family properties	6	5.00
	Sold harvest in advance	10	8.33
	Withdrawing children from school	10	8.33
	Did nothing	5	4.16
Overall Total	Total	120 <b>400</b>	

Source: Field survey, 2023

# 3.2 Determinants of IDP's Coping Strategies

The result in Table 1b shows the multinomial logistic coefficient for each of the exogeneous variables and each of the alternate categories of the endogenous variable. The Chi square results indicate that the pseudo  $R^2$  is 0.0489, meaning that 4.89 percent of the change of the dependent

variable was attributed to the change of few independent variables used in the model. The positive but non-significant coefficients of variables such as IDP credit, membership of religious organization, IDP income and gender imply that the probability of grouping the IDPs into different coping category levels relative to the reference category increases marginally as the variables increase. The negative but non-significant coefficients of variables such as paid employment, intervention value, and previous savings show that the probability of grouping the IDPs into different coping category levels relative to the reference category decreases as the variables increase. In the class of strong effort, number of association belonged, though not significant but significant in the stronger effort category. This implies that a unit increase in the variable will marginally increase the likelihood of IDPs in strong effort category to move to the stronger effort category. This means the greater the number of associations they belonged to, the greater the probability of belonging and coping at this level. The results also revealed that gender role in the strong effort level is positive but not significant. This means that an increase in the variable will result in the marginal increase in probability of IDPs moving from strong to stronger effort and remain there. The results also shows that camp duration have negative coefficients in all categories but significant in the stronger effort category. This means that all the IDPs coping in this level would remain here whether the camp duration increases or not. This may be due to the fact that they are contented with the savings and cost-cutting coping arrangement. The implication of the results given is that, the IDPs did not cope well as the determining coping factors did not greatly explain the variation in coping style as the Pseudo R<sup>2</sup> is 0.0489. This is an indication of weakness. The overall findings indicate that the variables that determined the coping strategies of the IDPs, though marginal, were the number of associations belonged and camp duration. This means that IDPs coped with the assistance from people by leveraging on their knowledge of the environment of the camps. This is in line with Ezikiel (2022) who stated that IDPs exhibited resilience by adapting to their current locations, establishing internal camp health

management structures and advocating with external organizations.

Table 1 b: Determinants of IDPs' coping strategies and categories.

Variable	Aid and support	Savings & cost-	<b>Employment</b> outside	
	(strong effort)	cutting(stronger effort)	camp(strongest effort)	
Association number	.1485596	.3919876*	.07906355	
	(0.74)	(2.23)	(0.38)	
IDP credit received	1.21e-06	2.42e-07	-2.13e-06	
	(1.02)	(0.22)	(-0.97)	
Paid employment	3937684	5030074	.0648359	
	(87)	(-1.2)	(0.15)	
Membership of	.4452409	.4334192	.1357535	
religious organization	(1.44)	(1.39)	(0.44)	
Income generated	7.96e-08	-3.94e-07	-9.57e-07	
	(0.41)	(-1.29)	(-1.63)	
Intervention value	-1.67e-07	-3.08e-08	-3.53e-07	
	(-0.27)	(-0.06) (-0.58)		
Previous savings	-1.87e-06	1.37e-07	-8.13e-07	
	(-1.91)	(0.41)	(-0.92)	
Camp duration	0118587	0287655*	0166703	
	(-1.36)	(-3.14) (-1.76)		
Gender role	.3941775	.4297643	252219	
	(1.34)	(1.47)	(-0.88)	
Constant	6652565	3570469	.895495	
	(-1.05)	(-0.56)	(1.42)	
Log likelihood	-524.63783			

Source: Field survey, 2023

Numbers in parentheses are the Z-values.

Number of observations = 400

LR chi square (27) = 53.93

Prob.>chi2 = 0.0016

Pseudo  $R^2 = 0.0489$ 

\* = Significant at 5%

#### 4. 0 CONCLUSION AND RECOMMENDATIONS

#### 4.1 Conclusion

The study assessed the coping strategies of IDPs in Niger state, North-Central Nigeria. They coped by relying on traditional medicine, assistance from friends and relatives and stored foods before being displaced to the camps.

#### 4.2 Recommendation

Government, philanthropic individuals and NGOs should jointly provide adequate humanitarian aid, such as foods, clothings, orthodox medication, health facilities and other consumables to the IDPs in various camps to reduce or completely remove their reliance on traditional medicine and their dependency on friends and relatives for survival.

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