



Accounting for Resiliency and Abuse in Nigeria

The Center and its regional partners work to break the cycle of trauma for women and girls who have been displaced in conflict zones

In the decade since the Boko Haram insurgency invaded Nigeria, over two million people have lost their homes. Over half are women.

Photographs by Carey Wagner for
Center for Reproductive Rights



Onyema Afulukwe has spoken with more than 250 women and girls in internally displaced persons (IDP) camps in Nigeria over the last few years. She’s listened as they detail the layers of abuse, violence, and loss they have suffered at the hands of Boko Haram insurgents who began their attacks on the Northeast region of the country more than a decade ago.

“These women and girls went through unspeakable experiences,” said Afulukwe, Senior Counsel for Africa for the global legal program with the Center for Reproductive Rights. “Many of their stories still live with me and I doubt that they will ever go away.”

“Really,” she added, “I hope they never do.”

One story she will never forget was from a woman who told of being pregnant with twins when Boko Haram insurgents arrived in her remote village in Northeast Nigeria. Somehow, the woman calmly recalled how they beheaded her husband and then forced her to remain in the same room with him as they went around the house and took her children. Before

The Boko Haram insurgency has most directly affected people living in the Northeast Nigerian states of Borno, Yobe, and Adamawa.

leaving, the men pushed her to the ground, repeatedly raped her and stomped on her stomach. Soon, she said, her pregnancy was lost, and tests confirmed she had contracted HIV.

BEARING WITNESS TO ABUSE OF WOMEN AND GIRLS

Afulukwe understands the power of documenting the experiences of women and girls, especially in places of conflict where they are most vulnerable to extreme violations of their sexual and reproductive rights. The work that the Center team is doing in Nigeria, in partnership with the Legal Defence and Assistance Project (LEDAP), aims to identify and assess the exploitation of women and girls in the Boko Haram-targeted states of Borno, Adamawa and Yobe. And to stop it.

For decades, the Center has used the power of law to advance reproductive rights as human rights around the world. In Nigeria, the Center's multi-pronged strategy for conflict work includes advocacy, movement building, research, and legal accountability measures. The ultimate goal: Improve the lives of women and girls living in conflict zones by securing the commitment of the Nigerian government to fulfill its human rights obligations under national, regional, and international law.

Afulukwe knows how critical it is to understand the complexities of a problem before taking action—and the first-person accounts she has witnessed and documented are helping the Center and its local partners to lay the foundation for meaningful change.

Other experiences that Afulukwe and her colleagues absorbed and documented in-



involved variations on horrific and repeating themes of sexual slavery, child marriage, maternal injuries and death, and unending cycles of abuse and violence.

There are no simple solutions to the ongoing sexual and reproductive health violations in the IDP camps that house hundreds of thousands of women and girls. Cultural and religious factors also come into play. Despite inadequate access to food and shelter, many women Afulukwe talked

(top) Over 500,000 women living in the internally displaced persons camps (IDP camps) are of reproductive age.

(bottom) For years, the Center and Lagos-based LEDAP have used field and advocacy work to measure the impact of the Boko Haram conflict on women and girls in Nigeria.



“Hearing these women talk about their experiences, this could easily have been me,” she said. “I feel a deep need to ensure that their stories are told and their voices are heard.”

Representatives from the Center and LEDAP have spoken with hundreds of women and girls who have experienced conflict-related sexual and reproductive health violations in IDP camps.

to had become pregnant several times at IDP camps. This situation is partly due to a lack of access to contraception, and partly due to a perceived pressure to bear children, particularly for those in plural or polygamous marriages whose husbands had children from other wives. And in the camps, women in polygamous relationships are even more susceptible to sexual and reproductive health violations.

As Afulukwe points out, bringing visibility to complex issues like these—through the stories she’s heard and the women she’s met—is the first step to protecting women from sexual violence.

Having grown up in Nigeria, Afulukwe said these stories felt intensely personal. “Hearing these women talk about their experiences, this could easily have been me,” she said. “I feel a deep need to ensure that their stories are told and their voices are heard.”

A SHORT VISIT TURNS INTO STAYING POWER

Afulukwe came to the Center for Reproductive Rights for a short stint as a visiting attorney in 2007. During her first project, a fact-finding mission about maternal mortality in Nigeria, she discovered commonplace practices that were contributing to high levels of preventable maternal deaths in local hospitals.

At one of the largest hospitals in the country, Afulukwe noticed that people of all ages were camped outside. She soon learned that the women who could not afford to pay the hospital bills were separated from their newborns immediately after birth, detained at hospitals and often subjected to severe mistreatment, simply because they could not afford the cost of delivery.

Hearing these accounts, women without means often choose to give birth at home

Nigeria has one of the highest maternal death rates in the world. Women and girls affected by conflict are at even greater risk of mistreatment while seeking maternity care.



The Scope of the Boko Haram Conflict in Nigeria

Between 2009 and 2016...

- 2.2 million people were internally displaced
- 53.2% of the internally displaced persons (IDPs) were female
- 7,000 women and girls have been abducted
- 1.2 million women of reproductive age have been affected

As of 2018, about 37,000 people had been killed.

In Nigeria, the Center's multi-pronged strategy for conflict work includes advocacy, movement building, research, and legal accountability measures.

on their own, without the assistance of skilled medical professionals and facilities that many of them need to deliver their babies safely. Factors such as these contributed to Nigeria's high maternal mortality rate, consistently one of the worst in the world.

"There was just so much going on under the radar," Afulukwe said, "that if there was no one to connect the dots—and question those happenings—it was difficult to relate them to the high levels of preventable deaths."

The human rights documentation surrounding preventable maternal injury and death led to a maternal mortality complaint against Nigeria brought by the Center, along with the Dullah Omar Institute of the University of the Western Cape, the Africa Alliance, and the Women Advocates Research and Documentation Centre. It also helped to inspire the Cen-

ter's more recent conflict work following the emergence of Boko Haram's violent reign of terror.

THE LONG ROAD TO JUSTICE FOR BOKO HARAM VICTIMS

Since 2009, Boko Haram insurgents have killed nearly 40,000 civilians while also displacing more than 2 million people. Approximately 1.17 million of the refugees, known as internally displaced persons, are women, and almost half of the women are of reproductive age.

Women and girls have been particularly vulnerable to the Boko Haram insurgents, who have targeted them for exploitation—including rape, sex trafficking, and forced marriage—while also denying them access to basic reproductive and sexual health care, such as obstetrics, contraception, and safe abortion services. But because health care officials and providers fled the region after the insurgency, it has been nearly

In 2018 and 2019, the Center for Reproductive Rights and LEDAP conducted 150 interviews with over 250 women and girls who had experienced conflict-related sexual and reproductive health and rights violations.

During the Center and LEDAP interviews, women in IDP camps recounted sexual violence they were subjected to when their homes were attacked by Boko Haram.

impossible to measure its full impact.

In 2018, the Center, in collaboration with Lagos-based LEDAP, stepped in to help fill that void. Hundreds of women and girls have been interviewed in camps and host communities by Afulukwe and LEDAP's staff, all of whom underwent extensive training to make sure their research and advocacy efforts did not cause any revictimization. The interviewers received both written and verbal consent from the women and made clear that the interviewees could end the interview at any time. All of the women they spoke with said they experienced some form of sexual exploitation, and many had to deal with several kinds of trauma. Even more distressing, the exploitation did not end once they sought protection in the camps. It just came in different forms.

A pervasive lack of accountability in the government and from IDP camp authorities has made this cycle of trauma ever

more complicated. Through her interviews, Afulukwe has learned that much of the exploitation of women and girls in the camps is carried out by those in authority who should be protecting them. Women, especially those with children, are regularly put in the position of being forced to make terrible choices, such as trading sexual favors in return for food, water, and other necessities.

There are increased levels of child marriage among displaced children, and women and girls in the camps say they are routinely subjected to forced sex. One woman told Afulukwe, "I've been raped so many times, I can't even remember." One account after another reveals the impossible choices women and girls make in order to survive.

DEVELOPING SOLUTIONS TO HOLD NIGERIA ACCOUNTABLE

As with other seemingly intractable environments of abuse, Afulukwe and the



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Photo Credit: Ikechukwu Udeh for Center for Reproductive Rights

Over 1.2 million women of reproductive age have been affected by the decades-long Boko Haram insurgency.

On a fact-finding trip to Nigeria, Onyema Afulukwe, Senior Counsel for the global legal program at the Center, met with dozens of women at IDP camps.

team of field researchers are connecting dots and looking for evidence-based legal and human rights solutions. Over the years, the Center has made real progress in creating standards for how humanitarian settings should protect the reproductive and health rights of their residents. A decade of persistent advocacy in Nigeria has led to the African Commission on Human and Peoples’ Rights agreeing to hear a maternal mortality complaint brought by the Center and partners. A decision on the case, first filed in 2014, is expected in 2021 or 2022.

As they await a decision, the Center and

partners will continue their work, applying pressure to governments in courts and before human rights bodies, and challenging systemic violations to women and girls in conflict regions in Nigeria—and wherever they occur.

The Center’s strategic work around the world relies on collaborating with trusted partners and challenging systemic sexual and reproductive rights violations using a human rights framework so that governments and authority figures at all levels can be held accountable.



What Progress Looks Like: The Center's Human Rights Work in Nigeria

The Center for Reproductive Rights and its partners, after a decade of field and advocacy work in Nigeria, are recognized by medical and human rights organizations as key resources in the region on sexual and reproductive rights and for their expertise in training human rights workers in conflict zones. These organizations include the African Union, Society of Gynecology and Obstetrics of Nigeria, the Nigerian Medical and Dental Association, and the Nigerian Human Rights Commission.

2007: The Center begins its documentation and advocacy work in Nigeria.

2014: The Center and partners, including Dullah Omar Institute of the University of the Western Cape, the Africa Alliance, and the Women Advocate Research and Documentation Centre, bring a complaint to the African Commission on Human and Peoples' Rights against Nigeria.

2018: The Center's documentation work in Nigeria helps to inform the UN Human Rights Council's adoption of a groundbreaking resolution on maternal mortality and morbidity in humanitarian settings.

2019: The African Commission on Human and Peoples' Rights agrees to develop a general comment on the protection of women in conflict based on Article 11 of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa. This is an important first step toward addressing the problem of maternal mortality and morbidity.

2020: The African Commission on Human and Peoples' Rights agrees to hear the Center and its partners' case, originally filed in 2014. This case seeks to hold Nigeria accountable for its high number of maternal deaths. A decision is expected from the Commission in 2021 or 2022.

The Center continues to work to ensure that women and girls impacted by conflict-related violence have access to the comprehensive medical and support services they need.

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