## Forced Migration and Access to Maternal Healthcare in Internally Displaced Persons Camps in North-Central Nigeria

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Abstract: Internal displacement and the vulnerability of women are two critical aspects of forced migration that have dominated both global and local discourses. Statistics show that in November 2021, there were over 2.1 million internally displaced persons (IDPs) in Nigeria. Literature also states that displaced women and girls are more vulnerable than displaced men. They are susceptible to adversative experiences, including various forms of sexual violence and rape. As a result, the displaced women and girls are faced with psychological and physical traumas, including HIV/AIDS as well as unexpected or poorly spaced pregnancies. In addition, the poor condition of living of internally displaced women in IDP camps affects their reproductive health, pregnancy outcomes, and maternal mortality levels. Incontrovertibly, internally displaced women constitute an imperative contributor to the ills of Nigeria's maternal health status, which is the second worse globally and the worst in Africa. World Health Organisation statistics showed that approximately 536,000 girls and women die from pregnancyrelated causes globally, and Nigeria accounts for 14% of the global maternal deaths. Undeniably, this supports the claims that maternal mortality remains a challenge in Nigeria and can be exacerbated by internal displacement crises. Therefore, maternal mortality remains a critical impediment to the actualisation of the 3.1 SDG target. Owing to this, concerns arise about the quality of the policy in Nigeria's health sector. More specifically, this study is concerned with the maternal health care services displaced women receive in IDP camps in the three states affected by internal displacement in north-central Nigeria, an understudied area. The novelty of the study also lies in its comparative investigation of maternal healthcare service delivery in three different camp structures (faith-based, government, and informal IDP camps), a pattern that is absent in literature. Therefore, this study will investigate how the camp structures affect access to maternal health services in the study areas; analyse the successes and challenges in the delivery of maternal health care services to displaced women in the various camps; and recommendation and strategies for reducing maternal healthcare disparities/gaps across IDP camps in Nigeria (should they exist). It will adopt a mixed-method approach and multi-stage sampling technique. A total of 1,152 copies of the study questionnaire will be distributed to displaced pregnant and nursing mothers (PNM); nine focus group discussions will also be held with the displaced PNM; in-depth interviews will be conducted with humanitarian actors, policymakers, and health professionals. The quantitative and qualitative data will be analysed using Statistical Package for Social Science (SPSS) 21.0 and thematic analysis, respectively. The findings of the study will be used to develop a model of care that will address the fragmentations in Nigeria's healthcare system. The findings will also inform the development of best policies and practices in the maternal health of displaced women.

Keywords: forced displacement, internally displaced women, maternal healthcare, maternal mortality

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