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Livelihood and Health Challenges of Internally Displaced Women in Fako Division, Cameroon

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Abstract

Internally displaced women are a vulnerable group due to the disruption of their lives caused by conflicts, natural disasters and/or other socio-political factors. This qualitative study explores the livelihood and health challenges faced by internally displaced women, using the political ecology theory, feminist theory and theory of social determinants of health. The study aims to uncover the political, social and environmental factors that contribute to internal displacement, the marginalisation and vulnerability experienced by internally displaced women, and thus bring out their livelihoods and health outcomes. Feminist theory is employed to understand the gendered nature of displacement and its implication for internally displaced women. By utilising the theory of social determinants of health, this paper examines the broader socio-economic and environmental factors that influence health outcomes of internally displaced women. A stratified but convenient sampling technique was used to identify respondents upon their availability. Guided by multiple theoretical framework approaches, the study utilises in-depth interviews and focus group discussions to collect the necessary data. The data collection process engages participants in sharing their experiences, perspectives and coping mechanisms, providing valuable insights to the various challenges they face. Findings showed that respondents' displacements were mostly due to the socio-political crisis and that the livelihood and health challenges faced were enormous. Though the sampling procedure does not permit for a region-wide generalisation of the findings, it does throws light on tendencies that can contribute to the development of targeted interventions and policies that address the specific needs of this vulnerable population and promoting more equitable outcomes.

Key words: Internally displaced women, livelihood, health, challenges, determinants, political ecology, gender

Introduction and Background

Internal displacement refers to the forced movement of individuals or groups within their own country due to conflict, natural disasters or other socio-political factors (Ajayi, 2020). Internally displaced women constitute a particularly vulnerable group confronting various hardships, that are differentiated from other population segments. It should be noted that internal displacement comes with a lot of challenges especially for women. As posited by Albert (2001), anywhere internally displaced persons (IDPs) find shelter, they are faced with various kinds of challenges ranging from physical, mental and reproductive health challenges and inadequate healthcare facilities, food, shelter, trauma, insecurity and various kinds of abuses especially on women and children. Those who find shelter in homes of friends or relations are seen to constitute burden on their host. Pursuant to the above mentioned challenges, women and girls experience displacement differently from men and boys, and face specific challenges that must be better understood to provide them with the support they need (UN Women, 2021). Women often face greater challenges than men in securing a decent livelihood in displacement, with repercussions on their ability to find shelter and security and to access to reproductive healthcare.

Displaced women often face increased risks of sexual and gender-based violence, including rape, forced marriage and exploitation. They may also encounter limited access to healthcare, education and basic services. The UNHCR (2019) notes that, though displacement has a challenging outcome for those affected irrespective of the sex and age, displaced women and girls tend to be at greater risk of deprivation, insecurity, abuse, neglect and a general deterioration of their wellbeing.

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Their sex also often impedes them from making their voices heard or participating in decisions on matters that affect them. The rights of women, including access to basic services such as healthcare, food, water and shelter are often ignored. The risk of gender-based violence (GBV) on women in displacement sites is also high. Destitution also forces displaced girls and young women to resort to survival sex which in some cases results in underage or unwanted pregnancies (NRC, 2015).

Social and cultural factors can further exacerbate the challenges faced by internally displaced women. Lack of income, gender inequalities and discriminatory norms restrict women's freedom, limit their decisionmaking power, and increase their vulnerability to violence and exploitation (IDMC, 2020). Traditional gender roles and expectations are also known to restrict women's ability to access resources and participate in decision-making processes within the community, and this becomes worse in situations of displacements. Displacement also has physical and psychological consequences on women. They sometimes suffer from trauma, depression, anxiety and other mental health issues as a result of the violence or loss they have experienced, and their reproductive health needs tend to be neglected in displacement situations.

Understanding the livelihood and health challenges of internally displaced women is essential for several reasons. Firstly, it helps to ensure the fulfilment of their fundamental human rights and promote social justice. Like all individuals, internally displaced women have the right to health and livelihood (MSF, 2014). Addressing the challenges of internally displaced women is also crucial for achieving gender equality as internal displacement often exacerbates already existing gender-based discrimination and violence. Such challenges must be understood and addressed to tackle the structural inequalities that perpetuate gender disparities (UN Women, 2016). Furthermore, women play a vital role in shaping sustainable development within their communities. By addressing their livelihood challenges, policy makers and organizations can support their economic empowerment and inclusion to overall development of their communities (UNDP, 2018).

Internal displacement has been on the rise in Cameroon for more than a decade now. Sitting at the cross roads of West and Central Africa, Cameroon is one of the most diverse and resource-rich countries in Africa and has prided itself for decades as a beacon of stability in a conflict prone region (Institute for Peace and Security Studies, 2020). In recent decades however, according to the Women's International League for Peace and Freedom (WILPF) 2020, Cameroon has witnessed growing political and social instability, fuelled by multiple crises which include the secessionist crisis in the two English speaking (North West and South West) regions popularly known as the Anglophone crisis, the Boko Haram insurgency in the Far North region, and the influx of refugee from Central African Republic in the Eastern region.

The Institute for Peace and Security Studies (IPSS, 2019) states that, the Anglophone crisis and terrorist insecurity in the Far North are currently the Cameroon's most challenging conflicts with implications for national and regional stability. The crisis in the Northwest and Southwest regions has given rise to more IDPs than any other crisis, majority of whom are women and children. These displaced persons face a grave humanitarian situation. Having fled with very little, their presence in host communities is straining food resources and already limited health, education, Water, Sanitation and Hygiene (WASH) facilities in these areas (OCHA, 2020). Women experience greater challenges as IDPs due to their sex, and there is a noticeable survival sex and prostitution amongst displaced women and girls, given their vulnerability and the difficult living conditions they face.

The experiences and challenges of women in conflict situations go beyond ideologies and spurs the need to research on the different ways they confront and cope with these challenges (Krause 2019). Rostami (2003) explored women's experiences within the context of the Afghanistan war and how they resorted to building networks and secret organizations to cope. The 2030 Agenda for Sustainable Development is the first international framework to acknowledge that internal displacement is a development as well as a humanitarian concern. Its goals will not be achieved by 2030 unless the phenomenon as a whole and the plight of displaced women and girls in particular receive greater attention (IDMC, 2020).

Statement of the Research Problem

In recent years there has been awareness that greater focus is needed on women who are displaced within the borders of their own countries. Women account for around half of the world's 33.2 million internally displaced persons (IOM, 2014:6). According to unher.org, in addition to the many general human rights violations faced by all IDPs, displaced women are often at greater risk than other affected populations. They don't only face loss of livelihoods and key documentation needed for daily life but multiple health challenges as well, notably, sexual and gender-based violence, rape, domestic violence, forced prostitution, trafficking and have specific health needs that often go unmet. Additionally, IOM (2014), noted that displaced women are often without the protection of family and communities they had before displacement. Consequently, women who have lost their husbands to conflict, face additional challenges and responsibilities as heads of households, and often have to rely on basic survival skills. Understanding the challenges of internally displaced women is crucial for preventing exploitation and vulnerability to exploitation like human trafficking, sexual violence and forced labour thereby enabling preventive strategies (UN Office for the Coordination of Humanitarian Affairs (OCHA). Effective humanitarian response is only possible in displacement situations when the specific needs and challenges of IDPs are well understood as the humanitarian response will be better tailored to meet specific needs (UNHCR, 2015). Identifying the specific livelihood and health challenges of internally displaced women in the Buea municipality will enable context-specific responses that will build resilience and promote their empowerment and help rebuild their lives and that of their families.

Research Questions

This paper investigates the following research questions.

- 1. What is the profile of internally displaced women in Fako Division?
- 2. What are the livelihood challenges of internally displaced women in Fako Division?
- 3. What are the health challenges faced of internally displaced women in Fako Division?
- 4. What are the coping strategies of internally displaced women in the Fako Division?

Literature Review

The Concept of Internal Displacement

Internal displacement, which refers to the forced movement of people within the country they live in, has become a very common phenomenon in recent times. This is due to a host of internal crises experienced by many nations. Persistent social, economic and environmental pressures are causing more people to leave their homes and livelihoods, seeking refuge in safer locations, temporarily or long term (Hampton 2013). Historically, the global crisis of internal displacement emerged on the global agenda in the late 1980s resulting from conflict, internal strife, systematic violations and natural factors (Cohen, 2004). According to António Guterres, Secretary General of the United Nations, the 21st century is "century of people on the move" because the world has experienced the highest movement of people ever since the beginning of the 21st century (UNGA, 2011). This has brought global attention and awareness to the plight of both refugees and internally displaced persons, and the issue of internal displacement now features regularly in international discourse, and not only in human rights and humanitarian circles but also in the debates of the UN Security Council (Cohen, 2004).

According to the United Nations Guiding Principles on Internal Displacement (unhcr.org>aboutinternal-displacement), Internally Displaced Persons (IDPs) are defined as: "Persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border". This definition therefore applies to a person who has been forced to leave their home but remain within the authority of the state regardless of being a citizen, non- citizen or stateless individual who habitually resides in the country. UNHCR (unhcr.org>idp-definition) thus explains that the term 'internal displacement' is merely descriptive of an individual's actual circumstance. That is, the term does not convey any special legal status since the displaced persons remain within the confines and jurisdiction of their country and are entitled to all the rights and privileges of a citizen and customary residents of that country.

The global situation of IDPs

An increasing number of displacement situations around the world remain protracted and complex, owing to the lack of political resolution of conflicts (issafrica.org). For example, in the Central African Republic, Syria, South Sudan, Somalia, Afghanistan and Yemen, the average length of time people have been in displacement is now more than 17 years. At the end of 2022, more than 108 million people worldwide were forcibly displaced as a result of persecution, conflict, generalized violence, or human rights violations (UNHCR, 2023), and this represents an increase of 19 million people compared to the end of 2021. This means that more than I in every 74 persons on Earth has been forced to flee. Among these are 71 million internally displaced persons with 44 million of them in sub-Saharan Africa alone, with more than half being women and girls. These displaced persons are said to "have fewer options and less support ever" (issafrica.org).

Livelihood challenges of internally displaced women

Women and girls make up more than half of internally displaced persons in sub-Saharan Africa and have different experiences, specific needs and challenges.

Generally, displacement leads to deterioration in living conditions for all however, displaced women do experiences some specific challenges especially in relation to livelihood and health. Internal displacement can cause women to loose assets and income because it results in the loss of homes, land and other livelihood assets like agricultural tools, livestock or business equipment ((Bamidele and Pikirayi, 2023). This loss severely impacts women's ability to generate income and support themselves and their families. Displacement also limits access to employment and opportunities as women in displacement often find it difficult to access formal employment opportunities due to factors such as lack of education, skills or discrimination. They often also face competition for limited jobs in host communities and overcrowded settings. A survey conducted by IDMC (2020:12) revealed that of 150 IDPs living in a settlement in the Oromia region in Ethiopia, 35% of women became unemployed as a result of their displacement, compared to 30% cent of men., while 40% of the women who had lost their job were still unemployed, compared with 20% of men. Only 9% per cent of men and 7% of women continued earning money in the same way they did before their flight. Among those able to find work, men reported an average monthly income of \$55 and women \$47.

The consequences of displacement can last for a lifetime, particularly when it interrupts education and limits future opportunities (OCHA, 2020). Displacement often aggravates gendered harmful social norms that discriminate and devalue girls' education, create major obstacles to learning and promotes early marriage and pregnancy. If current trends persist, only one in three girls in crisis-affected countries may have access to secondary education by 2030 (IDMC, 2020). According to a study conducted in Afghanistan by the Internal Displacement Monitoring Center (IDMC, 2020), 76% of internally displaced girls between the ages of 13 and 18 are not enrolled in education, compared with 57% of boys. For those aged 6 to 12, the figures are 68 and 57%. In Iraq, 25% of displaced girls and 19% of boys were not in school, compared with 12% of girls and 9% of boys among host community children.

In Cameroon, a report from the Child Protection Area of Responsibility (CPAoR, 2019) posits that, pregnancy rates among teenage girls is sharply rising and that school absenteeism could be identified as the primary cause of this augmentation. CPAoR (2019) recounts that child pregnancy has been an issue in the past for Cameroon, but the significant rise observed in the last years can only be understood as a direct consequence of conflict and internal displacement.

Conflict and displacement also changes gender roles. When war or conflict strike, women's lives and their familial roles are often turned upside down. Judy & Khadija (1998) explain that, displacement changes gender roles as families become separated, relatives are killed and homes are destroyed. When such events occur, women become heads of families and find themselves forced into unaccustomed roles and responsibilities for which they are ill prepared. The IDP camps in which women and children seek refuge present a lifestyle alien to their cultural values and in this unfamiliar social context gender roles change radically. Similarly, IOM (2014) reiterated that, women's vulnerability to sexual exploitation, domestic violence, and rape increases as gender roles shift. Before displacement, women usually have been responsible for the home and the family, with their husbands taking care of finances and practical matters outside the home, this reality changes radically if the man is killed, imprisoned, or severely wounded, leaving many women to flee their homes alone, assuming all responsibility for finances, security, health, and the future and well-being of their children (DRC, 2022).

Health challenges of internally displaced women

UNHCR (2019) states that, women and girls have specific health needs that can be more difficult to meet during displacement. This may be the result of several factors including the limited availability of services and facilities, stigma related to sexual and reproductive health, a lack of child-friendly and gender-sensitive information, and financial capacity. Reproductive health is very often a major challenge for internally displaced women as they often encounter barriers to accessing reproductive health services. These include prenatal care, safe delivery services and postnatal care. The lack or limited access to these services can result in higher rates of maternal and infant mortality, as well as complications during pregnancy and child birth (UNFPA, 2017). The challenges in accessing healthcare services are usually a result of limited availability, distance to health facilities, lack of transportation, cost barriers and cultural or language barriers. This lack of access can prevent timely diagnosis and treatment of illnesses and increase health risk.

Furthermore, displaced women are at an increased risk of sexual violence, including rape and sexual exploitation (Abdu & Shehu 2019). This places them at higher risk of sexually transmitted infections (STIs), including HIV/AIDS. Limited access to contraceptives and reproductive health information can also lead to unintended pregnancies and unsafe abortions.

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Displacement raises mental health concerns as it causes or exacerbates mental health issues among women, including anxiety, depression, post-traumatic stress disorder (PTSD), and other psychological distress. The trauma of loss of homes and loved ones, changing gender roles, living in insecure and overcrowded settings contribute to mental health challenges (Oduah, 2015). Also, with displacement comes malnutrition and food insecurity for many women as displaced women often experience inadequate access to nutritious food. As explained by Abdu & Shehu (2019), pregnant and lactating women, as well as young children are particularly vulnerable to the negative impacts of malnutrition,

Pregnant women and girls who have been displaced often receive less antenatal care and are more exposed to violence, malnutrition, poor hygiene conditions and communicable diseases than non-displaced women and girls (IDMC, 2020). This is particularly severe for adolescent girls who are under even greater risk of suffering from maternal mortality and morbidity. They may also be abandoned without healthcare or other support if they are unable to flee when the rest of their community leaves. As a result, their children may be born with complications or in poor health, heightening the risk of premature death.

Access to basic hygiene is usually another challenge faced by internally displaced women. According to DRC (2021), there is often minimal access to basic hygiene products such as bandages, tampons, and underwear on their escape routes and in displacement camps, meaning that, women are forced to use whatever they can find to help contain menstrual blood; leaves, dirty rags, or even pieces of old mattresses which often causes serious problems, including infections and associated complications. Internal displacement also heightens the risk of women and girls facing gender-based violence as it separates them from their communities and sometimes the families that might otherwise protect them. IDMC (2029) states that, displaced girls living in camps are particularly vulnerable to targeting by traffickers and other opportunists, and camps in general tend to be particularly hostile environments for women and girls.

In Colombia, IDMC (2020) reports that the most common type of violence displaced women reported facing was inflicted by their partners, including forced sex, forced abortions, control over contraception and physical violence during pregnancy. For example, more than half of displaced women in Colombia have experienced domestic violence, compared with 41% of their counterparts in the general population. Around two-thirds of displaced women surveyed in Afghanistan reported domestic violence, and 12 per cent said it had become more common since their displacement (IDMC, 2020:14). The perpetrators of these violence most often go unpunished. Judy & Khadija (1998) recount that, in displacement camps in Burundi, perpetrators of sexual violence and other exploitation went unpunished as no one stood up for the rights of the displaced women and there was no designated agency from which to seek protection in cases of rape and other violent acts. The women confessed that to survive, they had to be nice to the soldiers guarding the camp while exchanging sex for protection or food (Judy & Khadija, 1998).

Theoretical Frameworks

This paper is informed by the political ecology theory, feminist theory and the theory of social determinants of health. The political ecology theory helps situate the political, social and environmental factors that contribute to internal displacement and the marginalisation and vulnerability experienced by internally displaced women, and how this can play on their livelihoods and health situations. Feminist theory is employed to understand the gendered nature of displacement and its implication for internally displaced women while the theory of social determinants of health explores the broader socio-economic and environmental factors that influence health outcomes of internally displaced women. Through the integration of these three theoretical lenses, the paper provides an understanding of the intersecting factors that shape the livelihood and health challenges of internally displaced women.

Methods

Fako Division is one of the six divisions of the South West region in Cameroon which is one of the two English speaking regions plagued with socio-political crisis for over seven years. The division is named after Mount Fako also known as Mount Cameroon, which is the highest point in West and Central Africa. Fako Division has a diverse range of landscapes, including mountains, forests and coastal areas. The division is known for its rich biodiversity and is home to numerous species of plants and animals. It is a popular tourist destination, with visitors coming to climb Mount Fako and explore the rich cultural heritage. Fako Division is home to several ethnic groups including the Bakweri and Balong people who are indigenous to the area, with the main economic activities being agriculture, fishing and tourism. The division hosts the Cameroon Development Corporation (CDC), the second largest employer after the Cameroon government. Fako Division is made up of four main towns namely; Buea, Tiko, Limbe and Muyuka. Buea is a historic town that has been the capital of German Kamerun, capital of British Southern Cameroon, capital of West Cameroon and presently capital of the South West Region. Limbe a coastal town bordered by the Atlantic Ocean and is the capital of Fako division. Tiko is found along the creeks of the Atlantic Ocean while Muyuka is more inland. Apart from these four towns, Fako division has other smaller towns like Mutengene, Ekona, Idenau etc. Following the Anglophone crisis, a lot of people from the two regions have move over to Fako division which they believe is safer with the permanent presence of the military. The 437,000 internally displaced persons in Cameroon are spread all over the country with about one-fifth of them in Fako Division (UNHCR, 2019).

The study engaged internally displaced women in Fako division, where the level of internal displacement is high. Three (Buea, Tiko and Limbe) of the four main towns in Fako division were purposefully selected for study as the fourth town, Muyuka is practically deserted with almost all its inhabitants have fled due to the crisis. Being a purely qualitative study, selection was done upon availability and length of time in displacement. Respondents ought to have been displaced for at least three years to qualify for selection. The snowball and purposive sampling methods were used to select respondents, and saturation was used to discontinue data collection when it was realized that additional data was not leading to any new themes. Following the above criteria, ten (10) internally displaced women were selected from each town, giving a sample size of thirty. The instruments for data collection were semi structured interview guide and focus group discussions. Three focus group discussions were held, one in each town. The in-depth semi-structured interviews were conducted with individual participants to gather rich, detailed information about their experiences, livelihood and health challenges and some coping mechanisms. The interview guide was developed based on research questions and informed by the above mentioned theories. The focus group discussions were conducted to encourage participants share perspectives and engage in dialogue with others who have experienced similar challenges. Data collected from interviews and focus group was transcribed and analysed using thematic analysis; coding the data into categories and interpreting the underlying meaning of the themes. The analysis was guided by the three theoretical frameworks of political ecology theory, feminist theory and the theory of social determinants of health.

Ethical Considerations

Ethical approval for this study was received from the Faculty of Social and Management Sciences Institutional Review Board of the University of Buea. Informed consent was also obtained from all participants who were free to discontinue the conversation whenever they felt uncomfortable. There was total confidentiality in the interview process and in the decoding of the data.

Findings and Discussion

Profile of respondents

Respondents were mostly Christians, single (including separated, divorced, widowed) women who had some form of formal education and mostly young adults (below 50years). Some had large families, and they were mostly heads of household. Their occupation before and after displacement changed drastically with many being unemployed.

Table 1: Profile of Respondents

Marital status	n	%
Single (Never married)		10
Married	10	33.3
Separated	6	20
Divorced	2	6.6
Widowed	9	30
Total	30	100
Level of Education	50	100
None	3	10
Primary	6	20
Secondary	12	40
University	9	30
Total	<u> </u>	<u> </u>
	50	100
Age group	1	2.2
18 - 20	1	3.3
21 - 35	10	33.3
36 - 50	12	40
Above 50	7	23.3
Total	30	100
Number of dependent	-	
0-3	9	30
4-7	15	50
8 and above	6	20
Total	30	100
Head of Household		
Yes	24	80
No	6	20
Total	30	100
Occupation before II	DP stat	tus
Small business	6	20
Student	6	20
Teacher	4	36.6
Farmer	7	23.3
Total	30	100
Present Occupation		
House help	4	13.3
Teacher	2	6.7
Small business	10	33.3
Prostitution	3	10
Nothing	11	36.7
Total	30	100
Religious Affiliation	50	100
Christian	26	86.7
Muslim		13.3
	4	
Total	30	100

Table 1 above presents the profile of respondents of the study. It shows that only 33.3% of them are married while the rest are either single, separated, widowed or divorced. The emergence of single parents is a common occurrence during crisis and displacement. As reported by Yadar (2021), social crises and wars can significantly disrupt societal structures and norms including those related to marriage and family life. This is so because economic hardship, trauma and forced displacement is known to put increased stress on relationships and thus increase the rate of separation and divorce. Furthermore, only 10% of respondents do not have any formal education as the rest have either university education (30%), secondary education (40%) or primary education (20%). This ties with the UNESCO adult literacy rate for Cameroon which is 77.07% (male literacy 82.63%; female literacy 71.59%) (https://countryeconomy.com). The table further shows that almost all (96.6%) respondents are above 21 years of age and most (70%) of them had at least 4 dependents and above. It is also interesting to note that many respondents lost the occupation they had before the crisis. According to data on Table 1, all respondents were engaged in one activity or the other before the crisis (20% in small business, 20% students, 36.6% teachers, 23.3% farmers). However, as IDPs most of the respondents had lost their pre-IDP occupations and gotten into occupations like house help (13.3%), prostitution (10%), small business (33.3%), teaching (6.7%) and those with no occupation (36.7%).

Internal displacement often takes great negative toll on livelihood and displaced persons, especially women, as they often struggle for livelihood opportunities in host communities. IDMC (2020) confirms this and states that about a third of women become unemployed as a result of displacement and only a few continue earning decent livelihood in displacement. Another interesting demographic finding is that 80% of respondents were heads of their households. This shows that some of the married women were de facto heads of house. As seen before, war tends to break down patriarchal structures and women gain unintended freedom that comes with responsibility.

Division	Region	n	%
Fako	SW	3	10
Meme	SW	4	13.3
Manyu	SW	2	6.7
Kupe-Muanenguba	SW	2	6.7
Lebialem	SW	2	6.7
Boyo	NW	3	10
Bui	NW	5	16.7
Menchum	NW	4	13.3
Mezam	NW	5	16.7
Total		30	100

Table 2: Divisions of origin of Respondents

It is worth noting that the 30 women studied came from nine out of the 13 divisions that make up the South West and North West Regions of Cameroon. Data in Table 2 shows that while 10% are displaced within Fako division, the rest (90%) came from other divisions within the two regions plagued by the Anglophone crisis.

Reasons for Displacement

According to results of the interviews, respondents had diverse reasons for their displacement. The reasons included non-stop shooting, burnt houses, attack by separatists, attack by government soldiers, fear of kidnapping, death of husband or other family member(s), quest for education, hunger, poverty, loss of personal belongings. "The soldiers set fire on many houses in the village because they said we were hiding the separatists" revealed one respondent. "We all had to run to far away bushes for fear of being shot" she continued. "We lived in the bush for 5 weeks going back and forth before succeeding to come to Limbe and start all over". Another respondent narrated her ordeal before becoming an IDP. "Amba boys (Ambazonia or separatist fighters) were always attacking our village demanding for money, and even kidnapping people and taking them to the bush. My husband was kidnapped twice and even shot on the leg and my older son was also shot in across-fire between the amba boys and government soldiers and he died on the spot. My husband also never recovered from the gunshot wound. I had to run away with two of my children. We trekked for days in the bush before getting to Kumba. My sister in Buea later sent me some money and that is how I found myself in Buea. We lived in my sister's house for 18 months but he house is small so I had to move out with my children. Life has been very difficult but I thank God I have my two children with me".

The quest for education for children was another strong motive for displacement. "Schools had been shut down for over 2 years in the village and all my four children (16 years, 13 years 10 years and 7 years) have been out of school" reported one respondent. "I had to look for a way for my children to attend school and that is what pushed me to leave the village and come to Tiko". "My children had been out of school for a while and I was scared that the amba boys will pressure my son to join them so I had to take my children and run away from the village". Hunger and poverty also pushed respondents to leave their villages. "Amba boys had occupied all our farms and there was little or no food in the village" explained one woman. "We were dying of hunger and so many people started packing and leaving the village. I and my family also left the village". Some of the women reported that they had been displaced more than once and some even three times. "I have been moving from place to place hoping to find work or something to take care of myself and my family. The reasons advanced by respondents confirms Kallenberger (2009), president of the International Committee for the Red Cross (ICRC) who said that displacement is not only due to natural or development causes but also due to armed conflict and violence. Yigzaw and Abitew (2019) also confirm that conflict leads to loss of commodities, homes, income, land and other property and it is a major cause for displacement. Khatun et al. (2021) and Arseneault (2015) also confirm that movement and displacement are not only to search for new opportunities but also due to the inability to meet fundamental requirements of life.

Livelihood challenges

Pursuant with the political ecology theory which informs this study, it was important to understand the political, social and environmental factors that contribute to internal displacement and the marginalization and vulnerability experienced by internally displaced women and how this plays on their livelihoods. The challenges, as reported by the respondents of this study, are complex and numerous, and this affects their ability to maintain sustainable livelihood. The challenges include economic disempowerment resulting from loss of homes, assets and income, limited economic opportunities due to discrimination and barriers to formal employment in host communities, lack of education and skills, insecurity and gender-based violence including sexual harassment, assault and exploitation, limited access to resources, social marginalization and stigmatization and loss of social networks and support systems. Some of the responses from the interviews and focus group discussions included the following:

- "I have not been able to find a suitable home for my children and I. Houses are very expensive here in Buea and it is even very difficult to find one";
- "As a displaced person it is very difficult to find work. I have been going around looking for a job to no avail. People don't trust IDPs and that makes it very difficult for me to find a job";
- "I can't take care of myself, I can't take care of my family, I don't have money";
- "I am suffering with the children because I am jobless";
- "The main problem I have had in trying to look for help or employment is that, men want to touch me and also speak to me in an uncomfortable way. They seem to be more interested in my body than in what I am saying";
- I have had to dropped out of school due to lack of funds";
- "I was forced to start struggling to feed my home", "we now struggle for food because we live in a strange town";
- "Things seem more difficult as I take care of my children alone. I lost my house";
- "I was separated from my parents and siblings and some of my family members were attacked and killed"
- I have been looking for a small piece of land to farm but this is not possible in a town like Tiko. There are no farms here and we suffer hunger a lot";
- "Many people don't even want to see displaced persons. One lady told me that we are like wanderers and she is scared to employ me because I can disappear with her things and she won't know where to find me. This stigmatization makes it very difficult for us to be trusted";
- "I have lost all my friends and acquaintances and it is very difficult to start life all over. I pray God helps me".

The above responses support the view of Yigzaw and Abitew (2019) who posit that displacement leads to impoverishment and social isolation, breakdown of support structures and social roles. Furthermore, speaking at the Social Summit on refugees and returnees and IDPs in Uganda, the President of ICRC reiterated that just as in the case of Liberia, Guinea and Cote D'Ivoire, countless people lose their livelihood during displacement. Rufa-Cagoo (2013) also explains that women assume primary responsibility for family livelihood as men who are most often primary combatants in both state and non-state army abandon these responsibilities. Some respondents also reported that their kids do not go to school, and that they are barely being accepted by host communities now after almost two to three years of open discrimination against them.

All these are happening despite the provisions of the International Humanitarian law which states that IDPs must be treated humanely and should not be discriminated against. However, despite all these, many respondents acknowledged that some local and international organisations have been helping them with basic necessities from time to time.

Health challenges

The challenges faced by internally displaced women are interconnected with significant impact of their overall well-being. The health challenges raised by the respondents of this study include mental health issues caused by distress, the trauma of displacement, the loss of homes and exposure to violence. Almost all respondents complained of sleeplessness and night mares due to trauma and the amount of violence that they have had to witness. "I am traumatized beyond measure burying my father-in-law and my husband on the same day. Both killed by bullets" said a 45-year-old single mother. According to the 2014 International Women's Day Briefing Paper, women who have experienced conflict and displacement are often exposed to a range of traumas from witnessing or experiencing extreme violence (https://www.msf.org). The traumatic and violent experiences were almost the same for most of the women. Many others complained of having to self-medicate because of inadequate finance to pay medical bills or even go to a medical facility. "Even when I succeed to get medical attention for me or my children, it becomes very difficult to buy the prescribed medications" said one woman. This seemed to be the situation of many of the respondents. Some others complained of sexual exploitation as they have to sleep with men for survival. This confirms the report of Judy and Khadija (1998) who explained that in displaced women in Burundi confessed that they had to be nice to soldiers guarding the camp, exchanging sex for food and protection. Sometimes one has no choice but to accept the advances of men in order to take care of the family" reported one respondent in Buea. This also came up strongly during focus group discussions. Some women complained of having developed high blood pressure due to stress. Respondents also report of their children permanently having malaria and/or typhoid due to poor living conditions.

Coping Strategies

In relation to how internally displaced women in Fako Division cope with the livelihood and health challenges they face, most respondents reported that they have been lucky to receive some support from family and friends, the government of Cameroon and other humanitarian organisations. Others say they have been lucky to find small jobs around while others are involved in petit trading. Some others say that for their mental stability they try to get involved in church and other social activities. As explained by Zemo et al (2019), though many women find a means to cope on their own, many others do need support from family, friends and community to survive. Furthermore, according to OCHA (2020), humanitarian agencies normally respond to IDP emergencies by providing the basic or most urgent needs.

Conclusion

The women for this study were Christians, mostly single (never married, separated, widowed or divorced with 70% of them having at least secondary education. Almost all were above 21 years old, mostly heads of house with majority having at least 4 dependents. The reasons for their displacement was violent attacks, kidnappings and education for children. Their challenges living as displaced persons are mostly livelihood and health related. These include struggle for survival, lack of social and financial support, loss of livelihood, discrimination and stigmatisation. They are also faced with insecurity, gender-based violence, sexual exploitation and inability to get medical attention due to lack of finances. However, some of them tend to have some support from family, people of good will as well as from some local and international humanitarian organisations that help mitigate the effects of some of these challenges.

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