

Assessing the Socioeconomic Impact of COVID-19 on Forcibly Displaced Populations

Thematic Brief No. 2: The case of Nigeria*

Key Insights

- Microdata originating from a socioeconomic impact assessment in Nigeria shows relatively high levels of awareness of COVID-19 and its symptoms among refugee households, which may be the result of information campaigns within their living environments.
- The challenges arising due to the COVID-19 pandemic are numerous in Nigeria, including restricted movement, rampant food insecurity and reduced access to basic services such as healthcare and education.
- The loss of jobs and therefore a household's source of income is considerable, and many face little choice but to revert to negative coping strategies including reduced food consumption.
- UNHCR's cash plus livelihoods approach ensures immediate and basic needs are met while building greater self-reliance.

The COVID-19 pandemic has inflicted devastating consequences across the globe. In developing countries, which host 86 percent of refugees, the pandemic has placed additional burdens on host governments and relevant stakeholders, complicating efforts to address what is today considered the worst forced displacement crisis since World War II.¹ While the virus itself does not discriminate, the measures to curb the pandemic are believed to disproportionately affect displaced populations due to their pre-existing vulnerabilities and often precarious circumstances. Recent studies by the Center for Global Development (CGD) and Norwegian Refugee Council (NRC) highlight how the consequences of the pandemic for displaced populations are likely exacerbated by their limited access to formal labour markets and social protection programmes in most countries, leading to a considerable loss of employment and income and as a result, an increase in poverty.²

The current crisis has underscored the fundamental need for timely socioeconomic data in displaced settings in order to fully understand the conditions of persons of concern to UNHCR (PoC³) and inform appropriate programmatic responses. The availability of data, however, that is both representative to

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¹ UNHCR (2020). "[Global Trends. Forced Displacement in 2019](#)".

² Dempster, H., et al. (2020). "[Locked Down and Left Behind: The Impact of COVID-19 on Refugees' Economic Inclusion](#)" and Gorevan, D. (2020). "[Downward Spiral: the economic impact of COVID-19 on refugees and displaced people](#)".

³ A PoC to UNHCR is a person whose protection and assistance needs are of interest to UNHCR. This includes refugees, asylum seekers, stateless people, internally displaced people and returnees.

the wider displaced population and comparable to nationals has long been a challenge. For Nigeria, a comprehensive source of data that is comparable to the wider national population is still lacking. Nonetheless, tailored assessments for specific purposes provide a basis by which to have an informed understanding of the situation of displaced populations.

This series of thematic briefs takes advantage of the available socioeconomic data originating from newly developed high-frequency phone surveys (HFPS)⁴ along with other relevant household surveys identified (see Box 1), to examine the impact of COVID-19 on forcibly displaced populations in a few key country cases. While not exhaustive, the aim is to provide evidence of how PoC are coping in this new reality in comparison to nationals and across time, focusing on relevant sectors identified as priorities by regional and country operational partners. In the case of Nigeria, we concentrate attention on how the livelihoods and wellbeing of refugees, internally displaced populations (IDPs), returnees and hosts have been affected by the outbreak of COVID-19. Considering that the underlying goal is to encourage a more evidence-based response, we begin with a stocktaking of relevant programmatic activities for PoC in Nigeria in order to contextualize the findings and feed into a more well-informed policy discussion.

Box 1: Data sources

The analysis presented in this thematic note primarily relies on household-level microdata from a socioeconomic impact assessment conducted by UNHCR between June and July 2020 in collaboration with local partners in Nigeria. The original study focused on nine states within the Northeast, South-south, Southeast, Southwest and North Central regions of Nigeria where the vast majority of UNHCR’s PoC are located. Importantly, various PoC sub-groups were covered in the survey such as refugees, IDPs, returnees and the host community (see Table 1). This varied group of PoC surveyed allows for disaggregation which is essential considering each group experiences the consequences of the COVID-19 pandemic in different ways. Ultimately the geographical zones and survey strata that reflect these various population groups were identified to inform the sampling strategy, and a stratified randomized sampling was used to cover a total of 5,135 households. Using UNHCR’s registration data and IOM’s DTM data as a sampling frame, the sample is representative of the refugee and IDP sub-groups. However it cannot be considered representative of the entire populations of host community members as well as refugee and IDP returnees, even though the considerable sample sizes for each provides a basis for an informed understanding.

Table 1 Sample size by PoC sub-group and host community

Refugee	IDP	Refugee returnee	IDP returnee	Host community
2,041	1,910	223	498	416

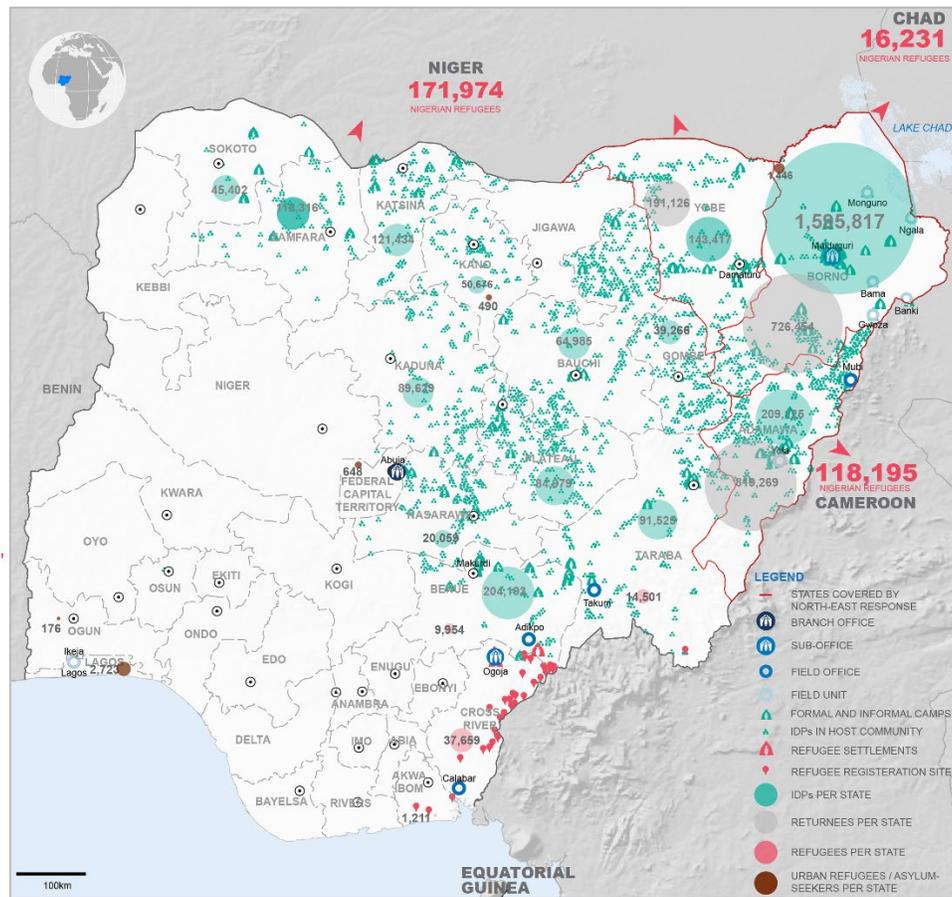
Note: original sample also included an additional sub-group of asylum-seekers which are excluded due to their small number.

⁴ World Bank (2020). “[High Frequency Mobile Phone Surveys of Households to Assess the Impacts of COVID-19: Overview \(English\)](#)”.

How has UNHCR responded to COVID-19 in Nigeria?

The operational context in Nigeria continues to be dominated by the protracted humanitarian crisis in the North-east, where over 2.1 million people are internally displaced.⁵ Now in its eleventh year, there are limited prospects for durable solutions for the IDP populations residing in the three states of Borno, Adamawa and Yobe with humanitarian needs mounting over time. Additionally, Nigeria hosts upwards of 68,000 refugees and asylum-seekers with the vast majority originating from Cameroon. Among this Cameroonian refugee population situated mostly along the Southeast border, just under half live in designated settlements while all others live integrated within the local community. Moreover, nearly 3,000 registered refugees and asylum-seekers reside in urban areas across the country including in Lagos, Abuja, Ogun, Kano, Damasak and other secondary cities.

Figure 1 Persons of Concern in Nigeria



Note: As of March 2021.

Like all countries, the COVID-19 pandemic has been a major challenge in Nigeria. Estimates show the country has had almost 150,000 cumulative confirmed cases since the start of the outbreak (~685 cases

⁵ The total of Internally Displaced People in all regions of Nigeria is 2.6 million.

per million people) and 1,700 confirmed deaths (~8 deaths per million people).⁶ And as a result of the pandemic, the Nigerian economy is expected to experience its deepest recession since the 1980s in large part because of lower oil prices, reduced foreign capital including remittances and widespread mobility restrictions.⁷ The government's response measures, while necessary to slow the spread of the virus, have exacerbated many of the pre-existing challenges displaced populations face including limited livelihood opportunities as well as access to services such as education and health. Moreover, host communities – which tend to be among the poorest in the country and typically located in lagging regions – are also believed to have been disproportionately impacted by the strict lockdown measures.

Since the onset of the pandemic, UNHCR has coordinated efforts with the Government of Nigeria and partner organizations to assist vulnerable persons of concern along with host communities. Much of the support has focused on emergency response for instance with respect to health, water, sanitation and hygiene services, and shelter. A door-to-door campaign among Cameroonian refugees reached 13,500 individuals about prevention measures and has contributed to no reported cases among that population since the onset of the pandemic.⁸ And as a result of a health policy that promotes the inclusion of refugees in national health systems, 25,000 refugees were estimated to be enrolled in health insurance in 2020 with the expectation of 30,000 to be enrolled by the end of 2021. Following UNHCR's active advocacy and campaign, it is important to note the generosity of the Federal Government of Nigeria for accepting to include refugees in the national vaccination plans. Additionally, UNHCR, in cooperation with partners, support refugee livelihoods and general socioeconomic wellbeing in a number of ways, including most notably through targeted livelihood support and cash-based interventions.

In Nigeria, livelihood support has been an increasingly prioritized area of intervention for IDP, refugee and host community populations residing in and around rural settlements as well as urban areas. Since the onset of the pandemic, the importance of sustainable income-generating activities has become even more apparent following losses in employment and therefore sources of income for entire households. Between March and December 2020, around 5,900 PoC benefited from livelihood support in the North-east region which included improving the inclusion of refugees into national development programmes, facilitating their access to financial services such as establishing bank accounts or requesting microcredits. Furthermore, UNHCR continued to provide technical support, mentoring and monitoring to beneficiaries of related interventions following the provision of start-up kits to support their businesses across 13 local government areas in the Northeastern states. In the South-east, more than 3,000 Cameroonian refugees and host community households received either agricultural inputs or startup kits to support a broad range of businesses such as tailoring, carpentry and soap-making, among others. Additionally, more than 500 refugees received vocational trainings in skills. Finally, UNHCR has held a tripartite meeting with NCFRMI and the National Social Safety Net Coordinating Office (NASSCO) to explore the possibilities for mutual cooperation. NASSCO is coordinating the implementation of the national social safety net programmes in Nigeria and building the National Social Register of poor and vulnerable households.

Different forms of cash-based assistance have also been prioritized as a direct response to the many challenges associated with COVID-19 across Nigeria. In 2020, a total of 38,000 refugees benefited from cash support to assist in meeting basic needs, representing a 31 percent increase in beneficiaries from the year prior. Various modalities of assistance depend on local circumstances, with some

⁶ Roser, M., et al. (2020). "[Coronavirus Pandemic \(COVID-19\)](#)". Retrieved on February 11, 2021. NB: Limited testing and challenges in the attribution of the cause of death means that the number of confirmed cases and deaths is likely lower than the true number of cases and deaths from COVID-19.

⁷ World Bank (2020). "[Rising to the Challenge: Nigeria's COVID Response](#)".

⁸ UNH UNHCR (2020). "[UNHCR Nigeria: Cameroon Refugees Situation Operational Update December 2020](#)".

recipients benefiting from cash for food, cash for shelter or cash to buffer the economic hardship due to the pandemic. In the case of the 28,000 camp-based Cameroonian refugees in Benue and Cross River, food assistance through cash-based interventions is a fundamental component of an overall multi-sectoral assistance strategy, helping to minimize food insecurity in a context where no other organization is providing food assistance. In March-April 2020, UNHCR provided in advance cash assistance for food for four months to ease the economic burden of refugees due to the movement restrictions. Furthermore, some 2,000 urban refugees received one time cash support for food and sanitation to cushion the negative effects of the pandemic. However, due to funding challenges, the cash assistance in the second half of 2020 continued to decrease and currently covers only 60% of the household food needs. Finally, the expansion of cash assistance to PoC has also contributed to an underlying goal of financial inclusion, with many refugees now having access to financial services throughout the country. As a result of UNHCR’s advocacy, 9,300 refugees (pre-) opened accounts by December 2020.⁹

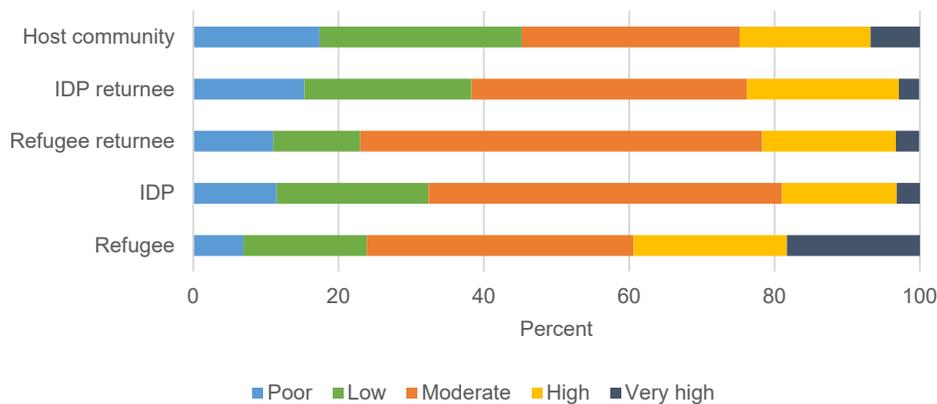
How has COVID-19 impacted PoC households in Nigeria?



Knowledge and access to services

Knowledge about the pandemic is nearly universal among the population sampled with little difference across the various PoC sub-groups and hosts, possibly due to the widespread media coverage of the pandemic. Still, Figure 2 portrays noticeable differences in the level of awareness across certain groups. In particular, a greater share of refugee respondents has a high or very high understanding of the virus in that they are able to cite at least four common symptoms such as cough, fever, sore throat, difficulty breathing, or tiredness. Conversely, among the host community, a relatively high share respondents are aware of only one or two of the common symptoms and therefore are indicated to have a poor or low level of awareness. The most common source of knowledge available about COVID-19 for all groups is the community or radio, however refugee respondents are also relatively more likely than others to say they receive information through the television indicating an opportunity for communicating important public messages and campaign information.

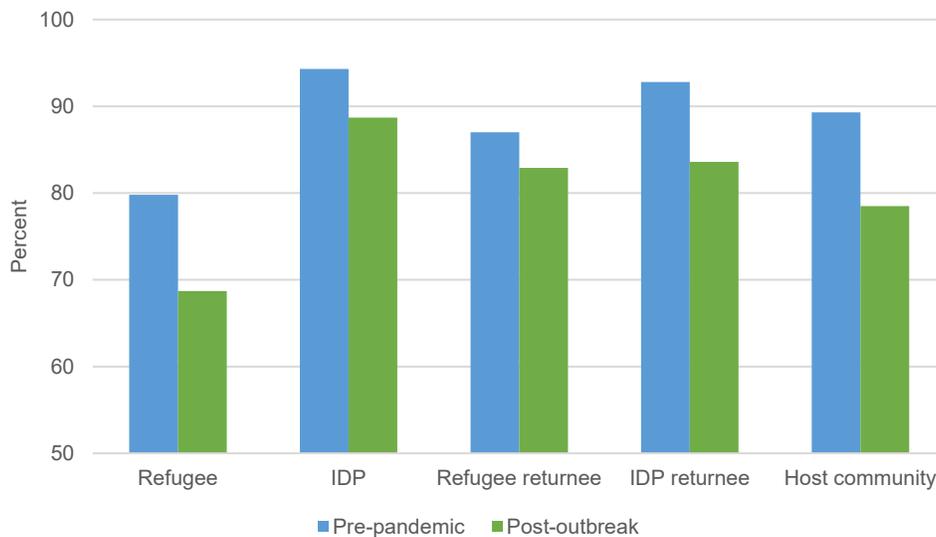
Figure 2 Level of awareness of COVID-19 symptoms



⁹ UNHCR (2020). “[UNHCR Nigeria: Cash and Economic Inclusion Update February 2021](#)”.

The challenges as a result of the COVID-19 pandemic are numerous in Nigeria. For one, restricted movement due to the pandemic is reported by a sizeable share of respondents across all groups, but especially by refugees (69 percent) and returned refugees (75 percent) who often live in designated settlements. The inability to move freely is likely to have a significant impact on their ability to maintain employment outside their immediate area as well as access basic services. Indeed, four out of five households across the entire sample reported reduced access to basic services. Figure 3 shows how access to health services declined from pre-pandemic levels across all groups, however most notably for refugee and host community households (11 percentage point difference each). Other basic services respondents highlighted as having reduced access to include education, markets and financial services which is perhaps to be expected considering the widespread closure of schools and restrictions to gather including in public marketplaces. Interestingly however, looking across the various PoC sub-groups and hosts, relatively fewer refugee households report having reduced access to education in comparison to all others, perhaps due to the lower levels of school attendance even prior to the pandemic. On the other hand, refugee households are also likely to have less resources to access distance learning tools, limiting their options for alternative education opportunities when physical schools are closed.

Figure 3 Access to health services



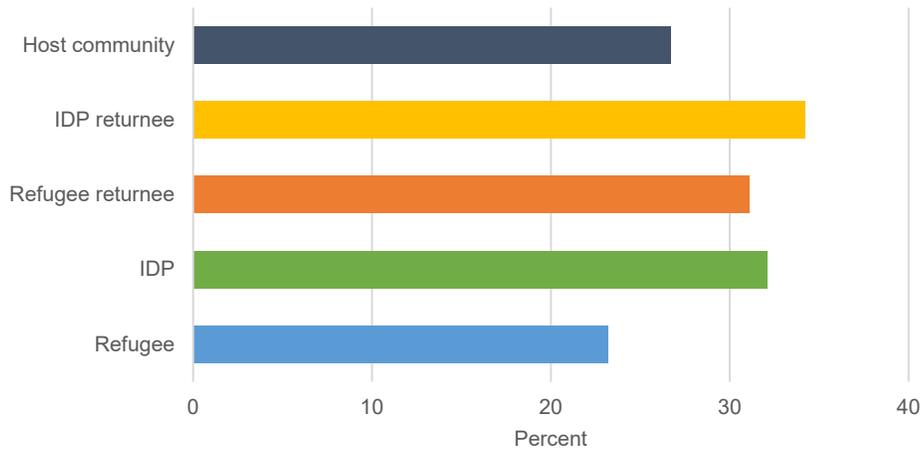
Livelihoods, coping strategies and food insecurity

Another clear challenge from the COVID-19 pandemic is the loss of jobs and income. Overall, the share of working-age Nigerians with a job is slightly lower than pre-pandemic levels, as 71 percent in September 2020 compared to 77 percent in mid-2018.¹⁰ Women and youth face particular obstacles, and the crisis may contribute to entrenching pre-existing inequalities for instance based on gender. Figure 4 illustrates how in the microdata from the socioeconomic impact assessment, the loss of employment due to COVID-19 is felt across all PoC sub-groups as well as hosts. Interestingly a relatively lower share of refugee respondents (23 percent) report job losses in their households compared to all others, however the percentage point difference is small and again likely due to low

¹⁰ World Bank (2020). “COVID-19 Impact Monitoring, Round 5, Sept 2020”.

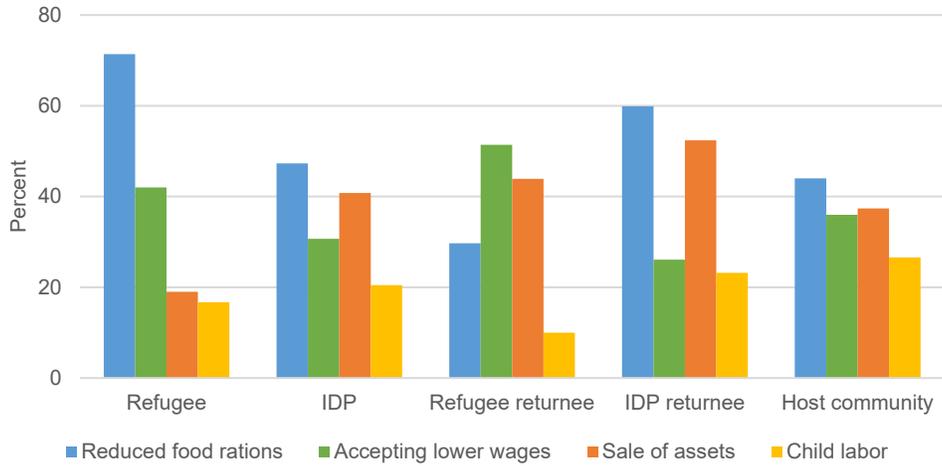
levels pre-pandemic.¹¹ On the other hand, refugee and IDP households are more likely to report reduced pay (44 percent and 40 percent respectively) compared to all other groups, and similarly indicate increased levels of stress and unstable working hours as a result of the pandemic.

Figure 4 Loss of employment by a family member due to COVID-19

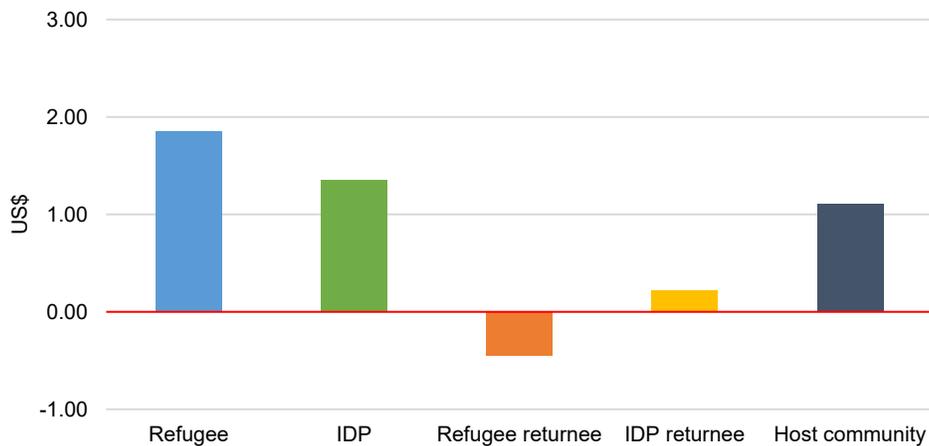


In response to the loss of jobs and income, many vulnerable households face little choice but to revert to negative coping strategies. Figure 5 highlights a few common mechanisms among the various sub-groups, showing refugee households, in particular, are much more likely to reduce food rations. Alternatively, the sale of assets is relatively less common among refugees, perhaps again reflecting their low levels of assets ownership prior to the pandemic. Moreover, around one in five households across the sample report child labor as a negative coping strategy, with the share the highest among host community households. This potentially indicates a devastating loss in human capital formation if it leads to permanent school drop-outs, and may result in associated protection risks such as SGBV and forced recruitment into armed groups.

¹¹ This results supports the need for consistent and granular data on labor market participation among refugees considering in other settings it is seen that they had lower levels of participation prior to COVID-19, meaning even though they may have experienced a lower rate of contraction, because there were fewer working age refugees employed prior to the pandemic the overall impact is effectively larger.

Figure 5 Coping strategies


Clearly there is the potential for heightened food insecurity when food consumption is reduced as a response to difficult times. Indeed, around four in five refugee households report a lack of food as an essential challenge due to COVID-19, whereas that share is closer to three in five for all other groups. Figure 6 illustrates the change in monthly food expenditure of a household from before the pandemic compared to after the outbreak, with refugee households spending on average nearly \$2.00 more per household member. This is likely a reflection of rising food prices since the beginning of the pandemic as increased expenditures on food are seen for all other groups as well albeit to a lesser extent, aside from refugee returnees. No doubt food assistance, in the form of CBI for refugees, has played an essential role in mitigating the risk of severe food insecurity. Among both refugee and IDP households, humanitarian actors are the main provider of food assistance with around half and three-quarters, respectively, reporting receipt since the outbreak of the pandemic. Alternatively, food assistance from the government is especially significant among both returnee groups as well as host community households.

Figure 6 Change in monthly food expenditure per capita (US\$)


Final reflections

The COVID-19 crisis has added a layer of complexity to an already complicated displacement-related situation in Nigeria. In the North-east region, the difficulties associated with insecurity and extensive internal displacement means the continued engagement of humanitarian and development partners is imperative. Similarly, the political situation in Cameroon and what is becoming a prolonged conflict calls for a multi-year vision in the search for sustainable solutions for Cameroonian refugees principally residing in settlements along Nigeria's southern border.

Nigeria's response measures to the pandemic has placed a significant burden on the entire population, including those persons of concern to UNHCR. The movement restrictions and closures enacted have contributed to a significant loss in economic well-being and reduced the resilience of already vulnerable groups including refugees, IDPs and returnees, among others. While UNHCR continues to transition away from in-kind support and towards cash-based assistance as well as medium-term livelihood support, the economic shock due to the pandemic leading to rising food prices and less jobs makes that transition more and more difficult. Nonetheless, the cash plus livelihoods approach is necessary to ensure immediate basic needs are met while building greater self-reliance.

Beyond the targeted responses by UNHCR and partners, the simple truth is that the situation around the world will remain precarious until the pandemic itself begins to subside. Therefore, any robust recovery strategy will need to include vaccinations across countries and for all parts of society. Currently, around 76 of the 130 countries UNHCR has a presence in has pledged to include displaced populations in their national vaccination plans. Increasing that number to ensure all of UNHCR's PoC have the option to receive a safe vaccine will help slow down the spread of the virus, and minimize the socioeconomic damage already inflicted on some of the world's most vulnerable. Similarly, greater efforts to systematically include refugees and other PoC groups into strengthened national social protection systems will help support vulnerable households during the ongoing COVID-19 pandemic, as well as future crises to come.