ADOLESCENT GIRLS IN CRISIS:
VOICES FROM THE LAKE CHAD BASIN

PLAN INTERNATIONAL

Girls living in a refugee camp in the Diffa region of Niger.
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DESPITE THE CHALLENGES THEY FACE, ADOLESCENT GIRLS IN THE LAKE CHAD BASIN DEMONSTRATE RESILIENCE, ENTREPRENEURIAL SKILLS, A COMMITMENT TO HARD WORK, A DESIRE TO HELP OTHERS, OPTIMISM FOR THE FUTURE AND INSIGHTFULNESS – ATTRIBUTES ESSENTIAL FOR ANY SOCIETY IF IT HOPES TO TRANSITION TOWARDS A PEACEFUL, PROSPEROUS AND SECURE FUTURE.

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ACRONYMS

CEFM	Child Early and Forced Marriage
CRSV	Conflict-Related Sexual Violence
CSO	Civil Society Organisation
FGD	Focus Group Discussion
GBV	Gender-Based Violence
KII	Key Informant Interview
NGO	Non-Government Organisation
MHM	Menstrual Hygiene Management
SRHR	Sexual and Reproductive Health and Rights
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNOCHA	United Nations Office for the Co-ordination of Humanitarian Affairs

PHOTOS

Photo captions with an * include names changed for child protection reasons.

EXECUTIVE SUMMARY

Women queue to register for relief aid in Mubi, Adamawa state, Nigeria.
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The crisis affecting the Lake Chad Basin is one of the most severe humanitarian emergencies in the world, having displaced more than 2.2 million people, half of whom are children. Most are refugees, but this number also includes internally-displaced people and returnees.

More than 10.8 million are in need of humanitarian assistance across North East Nigeria, Cameroon's Far North, Western Chad and South East Niger. While civilians face multiple forms of insecurity, adolescent girls are impacted by this protracted crisis in ways that are different from adolescent boys and from women, and in ways that are often overlooked.

Understanding the ways in which adolescent girls experience and navigate the crisis in the Lake Chad Basin provides opportunities for the humanitarian sector to partner with them in addressing their concerns and consolidating their capacities. This report seeks to highlight both the sites of insecurity for adolescent girls, as well as the ways in which they respond and continue to strive towards building safer communities for themselves and those around them.

This study explores the ways in which adolescent girls within two age brackets (aged 10 – 14 and 15 – 19) understand the unique impact the crisis has upon them. It seeks to amplify their voices and perceptions of the crisis and presents their views on how the international community might respond. Adolescent girls often do not see the crisis or their own situation in the same way as adults or sector professionals. The approach taken by this research encourages us to think beyond traditional thematic approaches and priorities and allows adolescent girls to express their experiences and needs themselves.

Drawing on data from research conducted with adolescent girls and their communities in multiple sites across Niger, Nigeria and Cameroon in March – May 2018, this research finds the following issues are core concerns for adolescent girls:

KEY FINDINGS

PHYSICAL VIOLENCE

Adolescent girls described a wide spectrum of violence including conflict-related violence, community violence and domestic violence that infiltrates and impacts almost every aspect of their lives. Across all research sites many adolescent girls reported feeling unsafe in their communities (particularly in Mubi, Nigeria, where most girls said they felt unsafe), and especially at night, fearing harassment and the presence of armed gangs. Feeling unsafe also permeated the home, particularly among the displaced. Violence is also widely prevalent, within and outside the home, with almost a quarter of all girls surveyed reporting having been physically assaulted over the last month. Deteriorating economic conditions were blamed for a recent increase in violence at home. Adolescents not living with their parents are particularly vulnerable to violence in the home.

SEXUAL VIOLENCE

Girls face sexual harassment and sexual violence from many different sources. While few respondents were willing to talk about conflict-related sexual violence (CRSV), some spoke of kidnapping and forced marriage perpetrated by armed groups. Others referred to the particular vulnerability of girls who work as domestic servants to sexual assault: adolescent girls who are separated from their parents are particularly likely to work outside the home and more likely to live and work in other households – their vulnerability to further insecurity and harm thus compounded. Many also spoke of the victimisation of survivors of sexual assault through stigmatisation or being forced to marry their attacker. Furthermore, almost a tenth of all girls surveyed (8%) reported having been sexually harassed in the last month, and many said they changed their behaviour and limited their movement in public spaces in response to harassment and abuse. In several research sites, some also spoke of girls being forced to have sexual relationships with men in order to survive in the current economic crisis.

CHILD EARLY AND FORCED MARRIAGE

Child early and forced marriage (CEFM) is commonplace across all research sites, with girls, as well as some parents and guardians, suggesting it is increasing as a result of the crisis, deteriorating economic conditions and rising food insecurity. CEFM is a threat to girls' current well-being and future prospects and a significant barrier to them accessing education, with girls forced to leave school to get married. CEFM also increases early pregnancy and, thus, associated health risks.

FOOD AND WATER INSECURITY

Food insecurity has significantly increased as a result of violence associated with armed groups destroying access to farming, both as an income generation activity and for subsistence purposes. This exposes adolescent girls to insecurity, not just in terms of hunger (with the majority – 62% – reporting going to bed hungry at some point over the last month), but also as a result of girls engaging in informal and unregulated labour to help meet the needs of the family. The research also showed that water scarcity similarly exposes girls to insecurity, principally because they are responsible for collecting water, as well as food and firewood, often over long distances, putting them at further risk of harassment and physical violence.

POOR HEALTH

Over half of all girls surveyed (53%) stated they have experienced a major injury or disease in the last year, most typically Malaria. HIV was also raised as a health issue for adolescent girls, although there was clearly significant stigma around the disease. While most girls do access healthcare (82%), across the Lake Chad Basin there remain barriers for adolescent girls in accessing appropriate health care, primarily associated with the cost of medicine and visiting a doctor. Additionally, there are significant barriers to accessing and realising sexual and reproductive health and rights (SRHR). A lack of available information, inaccessibility or inappropriateness of health services and financial barriers prevent adolescent girls from accessing information and services on contraception and sexual health in particular. The lack of access to SRHR for adolescent girls is a threat to their security, especially given the Lake Chad Basin has one of the highest ratios of maternal deaths anywhere in the world. At 773.4 maternal deaths for every 100,000 live births, the rate is high even compared to many other countries in protracted crisis in sub-Saharan Africa.[1]

FAMILY SEPARATION

Family separation, particularly amongst displaced adolescent girls, increases the likelihood of exposure to other harms and insecurities, including poverty, violence, limited livelihood opportunities and prospects, as well as feelings of hopelessness. It was also recognised as impacting adolescent girls' ability to attend school, as well as what age she would marry and whether she experienced abuse and mistreatment at home.

LIMITED ACCESS TO EDUCATION

Adolescent girls face significant barriers to education, particularly secondary education, principally because of the burden of household chores and the costs associated with school. Security conditions and the distance needed to travel to school are also significant barriers to education. Poverty and displacement are key factors which have led to many girls never having attended school. IDPs can face additional problems accessing school. CEFM is also a significant barrier to accessing education, with girls being forced to leave school to get married.

Aside from identifying these central security and well-being concerns, the research also highlighted ways in which adolescent girls in the Lake Chad Basin believe they have the capacity to navigate the crisis. In particular, the following were recurrent themes identified by respondents:

RESILIENCE, AGENCY AND ENTREPRENEURIALISM

While few girls believe they have the ability to shape their own lives, girls demonstrated agency, a desire to help others in their community and great entrepreneurial skills, all of which can help build their own capacity and that of their communities. Of particular note, although often overlooked, is that girls also demonstrated an understanding of and ability to articulate what would be required to improve their futures, which can be used to inform more responsive and, thus, effective programmatic interventions.

COMMUNITY ROLE MODELS, FEMALE LEADERS AND PEERS

Role models and female leaders in the community, as well as peer networks are a great source of support and inspiration for adolescent girls, helping to build the resilience of girls as they face compound threats and insecurities.

SAFE SPACES

Safe spaces contribute to girls' sense of well-being and improved security and are an invaluable source of support where many girls lack safety everywhere else in their everyday lives.

EDUCATION AND SKILLS NEEDED FOR WORK

While access to education is compromised, where it is accessed it contributes significantly to girls' resilience and their capacity to cope throughout the protracted crisis as well as in times of acute crisis. In particular, secondary and vocational education significantly improves well-being and optimism among girls.

CONCLUSION AND RECOMMENDATIONS

Based upon these findings, the following recommendations are made:

INCLUSION: Promote and resource efforts to encourage the systematic participation of adolescent girls in all decisions that affect their lives to ensure their diverse needs and fundamental human rights are met, recognising that adolescent girls are not a homogenous whole, but have a diversity of experiences, skills, hopes and needs.

SECURITY AND VIOLENCE: Improve security conditions for adolescent girls.

ECONOMIC INSECURITY: Take measures to mitigate the on-going effects of the economic and associated food and water crises on adolescent girls.

HEALTHCARE: Ensure the provision of accessible, affordable and adequate healthcare that is gender-responsive and meets the specific needs of adolescent girls.

EDUCATION: Facilitate access to education, which responds to the specific needs of adolescent girls, particularly at secondary school level and particularly those who are displaced, and deliver other education programmes and training which responds to their complex security needs.

AWARENESS-RAISING AND ADVOCACY: Promote knowledge, attitudes and behaviour changes for communities and duty-bearers regarding girls' rights, including access to education, freedom of movement and issues around marriage.

1. INTRODUCTION

Understanding the ways in which adolescent girls experience and navigate the crisis in the Lake Chad Basin provides a foundation for the humanitarian and development sectors to partner with them in addressing their concerns and enhancing their capacities. The following report seeks to highlight both the sites of insecurity for adolescent girls, but also the ways in which they respond and continue to strive towards building a more safe and secure environment for themselves and those around them.

Young woman carries relief aid home on her head in north-east Nigeria.
(©Plan International)

1.1 THE LAKE CHAD BASIN CONTEXT

The crisis affecting the Lake Chad Basin is one of the most severe humanitarian emergencies in the world. The crisis continues to affect North East Nigeria, Cameroon's Far North, Western Chad and South East Niger. More than 2.2 million people have been displaced, half of these children, and 10.8 million people are in need of humanitarian assistance.[2]

Prolonged years of conflict with Boko Haram and Islamic State-West Africa have perpetuated the humanitarian crisis throughout the four countries across the Lake Chad Basin. Escalating violence, including deliberate targeted attacks on civilians, has characterised the conflict, hindering humanitarian access and the delivery of assistance and restricting access to basic services for all the communities affected.

While the violence of insurgent groups, notably Boko Haram, triggered the current humanitarian crisis, which escalated in 2014, the roots of the crisis are more long-standing and pernicious. Widespread inequality, political marginalisation of various communities across the region, and competition over scarce resources, particularly water, among other developmental challenges, have contributed to the severity and complexity of the current crisis. This has been compounded by a number of environmental stressors, including prolonged drought which has intensified water and food insecurity. Competition over water and arable land has raised tensions and contributed to heightened levels of violence. Furthermore, lack of food and water, coupled with grievances borne of inequalities and marginalisation, also contribute to increased vulnerability of young people being recruited by Boko Haram or other insurgent groups in the region. Where state institutions are weak or lack legitimacy and public confidence, security is further compromised, especially where insurgent groups take advantage of fragility and limited state capacity.[3]

The Lake Chad Basin crisis can be categorised as a large-scale, complex and protracted humanitarian emergency with multiple and compounding factors contributing to the crisis. The ongoing conflict, environmental degradation and vulnerability caused by the effects of climate change combine to drive high levels of food insecurity and malnutrition, displacement and outbreaks of disease, leaving millions dependent on humanitarian assistance for survival. Protection of the civilian population is a significant concern with increasing evidence of violence, including abduction, forced marriage and forced recruitment into armed groups.

Women and girls have been particularly affected by the violence and ensuing humanitarian crisis. Women, particularly girls – and in fact all children have been more frequently displaced. In December 2016, IOM-collected data showed that 53% of those displaced in Chad, Cameroon and Nigeria, for instance, were women and girls, while 62% of those displaced were children (32% girls and 30% boys).[4] Women and girls have also suffered sexual and gender-based violence (GBV) across the Lake Chad region, not just at the hands of Boko Haram and other insurgent groups, but also state armed forces. Boko Haram have kidnapped many hundreds of women and girls for sexual abuse as well as forced marriage and labour.[5] State security forces, notably in Nigeria, have also abused women and girls in exchange for food and assistance.[6] Those who are displaced and without the support of family and community networks, or are otherwise vulnerable, are particularly exposed to the threat of GBV.

1.1.1 Conflict, displacement and violations

Ongoing insurgent attacks as well as counter-insurgency efforts by state militaries and vigilante groups[7] continue to drive displacement throughout the region, both within the boundaries of countries and across borders. Violence metred out by Boko Haram began in Nigeria in 2009 and extended to other countries in the Lake Chad Basin. When violence was at its peak in 2014 Nigerians were, thus, initially the most affected and many fled to neighbouring countries. As violence extended to Chad, Niger and Cameroon many hundreds of thousands also became forcibly displaced, with the vast majority internally displaced; in December 2016, IOM-collected data showed that 93% of all displaced people in the region were IDPs.[8]

It is important to note that while the vast majority of people who are displaced in the region are so because of insurgent activities, some also fled violence resulting from clashes over scarce resources (land and water) between herdsmen and other groups, and some also fled natural disasters. In December 2016 IOM data showed that 92.9% of those displaced in Cameroon, Chad and Nigeria were fleeing insurgents, principally Boko Haram, while 5.5% were fleeing violent clashes between herdsmen and farmers (notably in Nigeria) and 1.5% fleeing natural disasters (principally flooding in Cameroon).[9]

Civilians, including those in camps for displaced persons, continue to bear the brunt of the hostilities. The conflict has been categorised by rampant levels of GBV and violence against children, with forced recruitment a significant concern. Most of those displaced are residing in communities or informal settlements, with very poor living conditions, minimal support and little chance of returning to their homes.

1.1.2 Severe food insecurity and malnutrition

The cyclical crisis of food insecurity in the largely arid Lake Chad Basin has been exacerbated by the ongoing conflict. Livelihood and agricultural activities have been disrupted by insecurity, displacement and the closure of markets, contributing further to economic insecurity and food shortages. According to the regional Humanitarian Needs and Requirements Overview[10] approximately 4.5 million people are currently food insecure, with 5.8 million projected to face severe food insecurity throughout the 2018 lean season. Malnutrition in the worst affected areas has surpassed emergency levels.

1.1.3 Research Contexts

Cameroon (Far North)

Insecurity in Cameroon is concentrated in the far north of the country. The crisis is characterised by rampant insecurity and violence, extreme food insecurity and malnutrition, and displacement. Almost 180,000 people are severely food insecure, with more than 240,000 Cameroonians displaced throughout the region. In addition, the region currently hosts almost 90,000 Nigerian refugees fleeing the conflict and insecurity in their homeland. The far northern region of Cameroon is arid and regularly affected by both seasonal floods and droughts.[11]

Niger (South East)

In Niger conflict, adverse climate conditions, development challenges and poverty fuel the protracted crisis. In 2018, 2.3 million people are in need of humanitarian assistance as a result of the crisis; 1.4 million of whom need food assistance and 1.7 million need urgent nutrition support.[12] In Niger, 2.7 million people are affected by food insecurity, 500,000 of whom are severely affected, and malnutrition rates remain above the alert threshold of the World Health Organization (WHO).[13]

The population of Niger's south-eastern, conflict-hit Diffa region have been particularly badly affected by the crisis, with global acute malnutrition rates having reached 14 per cent, above the 10 per cent WHO alert threshold.[14] The conflict has heightened food insecurity, in Diffa as well as Tahoua and Tillaberi in the west, having constrained farming and fishing, curtailed freedom of movement and forced the closure of food markets.[15] These insecurities have also led to the forced displacement of many hundreds of thousands of people, including 252,000 people in the Diffa region, many of whom were Nigerian refugees, or Niger nationals having returned from Nigeria.[16]

Nigeria (North East)

Nigeria has suffered from almost a decade-long conflict between state military forces and Boko Haram and other insurgent groups, and humanitarian crisis. North East Nigeria has been the most significantly affected, with almost 7.7 million people in need of assistance and 1.7 million displaced.[17] More than half of those displaced are now in their third year away from their homes; their precarious situations marked by a lack of access to basic services. Ongoing insecurity in North East Nigeria threatens crop production during the peak agricultural season and, according to the Famine Early Warning Systems Network, as at May 2018, Crisis (IPC 3) and Emergency (IPC 4) levels of acute food insecurity will continue to affect most of Borno state and parts of Adamawa and Yobe.[18]

Please note that research focussed only on certain regions of these countries (Far North Cameroon, South East Niger and North East Nigiera), but have been referred to in the report with the country name for the sake of brevity.

LAKE CHAD RESEARCH LOCATIONS

1.2 RESEARCH QUESTIONS AND GOALS

This report focuses upon the experiences, voices and opportunities of adolescent girls experiencing the protracted crisis in the Lake Chad Basin. Designed to understand how the humanitarian sector can better listen to, learn from and partner with adolescent girls who face inter-connected insecurities in protracted crises, this report seeks to answer three questions:

01 How do adolescent girls understand and experience insecurity?

02 How do adolescent girls navigate insecurity?

03 What are their needs and what opportunities exist to support adolescent girls in protracted crisis situations?

Following from these three questions, the goal of this research is to amplify the voices of adolescent girls. It seeks to present findings on the issues of significance to them, to better understand the negative and positive coping mechanisms they deploy in response to the crisis, to identify how their capacities support their community, and to understand their priorities for their short and long-term futures. Finally, the report also translates the research findings into recommendations for donors, policymakers and practitioners.

1.3 RESEARCH HYPOTHESES

This research project tests several interconnected hypotheses, which have been developed based upon existing desk research and comparable case studies:

- First, the research hypothesises that adolescent girls experience crises in unique ways.
- Second, it suggests that adolescent girls develop coping mechanisms, strategies and capacities that can positively shape their own security and contribute to their communities. In this sense the research is seeking to test a claim that adolescent girls have agency (i.e. knowledge, capacities and skills) to shape their lives and surroundings.
- Third, the research seeks to understand how and in what ways adolescent girls influence the understanding and priorities of the humanitarian sector.

1.4 METHODOLOGY

In order to test these hypotheses the project places the voices of adolescent girls at the centre of its methodology. To achieve this, the methodology adopted in this research has five features (see Figure 1). First, it uses a grounded theory approach, which draws upon the voices and experiences of adolescent girls to establish the knowledge base for this project. Second, this project adopts a feminist methodology, which positions the advancement of the rights and empowerment of girls as central to the research process. Third, it is adolescent-centred in its efforts to amplify and legitimise the knowledge of young people. Fourth, where the data permits, the research adopts an intersectional approach that recognises diversity in the adolescent experience of crisis. In so doing, it identifies where experiences are consistent across adolescent girls, and where and why some experiences may vary. Finally, this research adopts a rights-based approach with a focus upon the rights of the child. In particular, this report highlights Article 12 of the *UN Convention on the Rights of the Child (1989)* that speaks of children's right to have their voices heard in decisions regarding them.

FIGURE 1: FIVE INFLUENCES ON THE RESEARCH METHODOLOGY
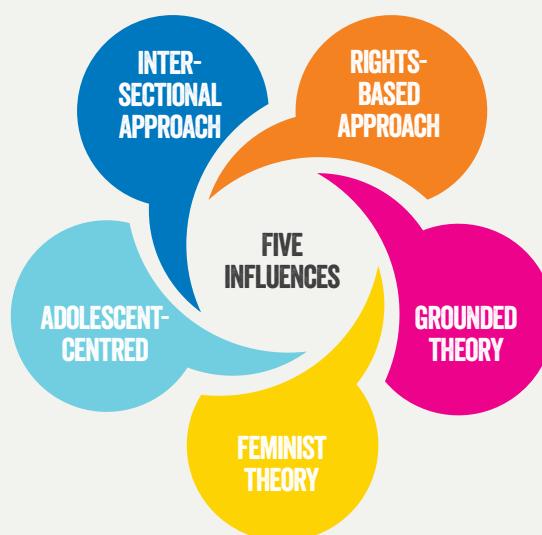
This approach allows adolescent girls both a blank slate and a safe space to speak about their lives in a peer community. In doing so, it also renders adolescents authoritative in discussions regarding their own welfare and in understanding their social, political and economic contexts. It therefore seeks to place adolescent girls as both the source of knowledge *and* primary analyst of their life journeys.

Woman pumps water from a well in Adamawa State, Nigeria.
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1.5 DATA COLLECTION

This report uses data collected in March and April 2018 in sites across three countries in the Lake Chad Basin (Cameroon, Niger and Nigeria) (see Table 1).

Plan International country offices deployed enumerators to collect data in these sites. The geographic locations were selected in order to access a greater intersectional sample of adolescent girls and test the importance of location in shaping adolescent girls' experiences of crisis. As demonstrated throughout the report, location and in particular experience of displacement plays a significant role in determining access to resources and the humanitarian sector, likelihood of family separation and experience of physical security. Consequently a variation in the types of sites chosen was sought to ensure girls with different experiences were included in the research. Comparative analysis between the three country contexts included in the research, as well as significant variances amongst research sites, are identified throughout the report. Similarly, the diverse locations included in data collection allow for an examination of shared experiences and the gendered dimensions of adolescent experiences across the region.

During data collection and analysis, adolescent girls and adolescent boys were divided into two age brackets: 10-14 and 15-19 years of age. The purpose of this was to further analyse the intersection of age and gender in the experiences of adolescents. This is particularly important for issues such as child early and forced marriage (CEFM), access to education, and adolescent pregnancy, where the experiences of each age bracket may be significantly different and age dependent.

1.5.1 Quantitative Research

Data collection adopted a mixed method approach, including a quantitative household survey with adolescent girls. Surveys were conducted across the three countries with a total of 449 respondents, including 150 respondents in Cameroon, 150 in Nigeria and 149 in Niger. The findings of this survey are reflected in the quantitative data presented in this report.

1.5.2 Qualitative Research

A total of 46 single sex focus group discussions (FGDs) of five to ten participants were conducted with adolescent girls and boys, and a further 22 FGDs were conducted with male and female parents and guardians in the research sites across the three countries (see Table 1). The purpose of these discussions was to provide greater contextual depth, allow open-ended questions and answers, and free-flowing discussions. The FGDs allowed consensus-building around responses to certain issues or, alternatively, highlighted differences of views and experiences.

The inclusion of single-sex FGDs with adolescent boys had three purposes: to cross-reference responses with accounts of the experiences of adolescent girls; to determine similarities and differences in the experiences of girls and boys; and as part of an inclusive, community approach to data collection. Beyond this the FGDs allowed for the research to examine some of the attitudes and behaviour of adolescent boys towards adolescent girls in the various research sites.

A total of 57 key informant interviews (KIIs) were conducted with adolescent girls, adolescent boys, community leaders, local authorities, members of civil society organisations (CSOs) and non-governmental organisations (NGOs). These interviews produced greater contextual depth, allowed follow-up questions to be asked, and provided opportunities for respondents to speak freely.

TABLE 1. NUMBER OF KEY INFORMANT INTERVIEWS AND FOCUS GROUP DISCUSSIONS BY LOCATION

SITE	AGIRLS 10-14	AGIRLS 15-19	ABOYS 10-14	ABOYS 15-19	P&G	C/NGO	COMMUNITY LEADER	LOCAL AUTHORITY
Cameroon								
Blablin	KII (2)	KII (2)						
Goulfey centre		KII (1)						
Koza Mazi	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD (2)			
Krouang	FGD (1)		FGD (1)					
Makari					FGD (2)			
Maroua						KII (4)		
Mijec						KII (1)		
Minawao Camp	FGD (1) KII (3)	FGD (1) KII(3)	FGD (1)	FGD (1)	FGD (2)		KII (3)	KII (1)
Mora	KII (3)	KII (3)					KII (2)	KII (1)
Mozogo	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD (2)			
Ngouma		FGD (1)		FGD (1)				
Total	**FGD (4) KII (8)**	**FGD (4) KII (9)**	**FGD (4)**	**FGD (4)**	**FGD (8)**	**KII (5)**	**KII (7)**	**KII (3)**

In addition, the survey was conducted in: Blablin, Gadala, Gazawa, Koza Mazi, Krouang, Madokonai, Meme 2, Meme 3, Minawao Camp, Mokolo, Roua Centre, Tokombere, Zamai.

SITE	AGIRLS 10-14	AGIRLS 15-19	ABOYS 10-14	ABOYS 15-19	P&G	C/NGO	COMMUNITY LEADER	LOCAL AUTHORITY
Nigeria								
Bahuli					FGD (1)			
Garaha			KII (1)					KII (1)
Kaleri	KII (3)	KII (3)					KII (3)	
Misheri	KII (3)	KII (3)					KII (3)	
Ndollori	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD – Female (1) FGD – Male (1)			
Njimtillo	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD – Female (1) FGD – Male (1)			
Zarmari	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD – Female (1) FGD – Male (1)			
Total	**FGD (3) KII (6)**	**FGD (3) KII (6)**	**FGD (3) KII (1)**	**FGD (3)**	**FGD (6)**		**KII (6)**	**KII (1)**

In addition, the survey was conducted in: Abbaganaram, Ajari, Auno, Giwi, Gulak, Gwandang, Lambu 1, Maimusari, Muffa, Ndollori, Ngamdu, PHC Mainok, Wassaram, Zarmari

SITE	AGIRLS 10-14	AGIRLS 15-19	ABOYS 10-14	ABOYS 15-19	P&G	C/NGO	COMMUNITY LEADER	LOCAL AUTHORITY
Niger								
Abounga (Tam)	FGD (1)			FGD (1)				
Dalawako	KII (3)	KII (3)						
Djalori	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD (2)			
Garin Wanzam	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD (2)			
Kilakam	KII (3)	KII (3)						
N'gourtouwa	FGD (1)	FGD (1)	FGD (1)	FGD (1)	FGD (2)			
	FGD (1)	FGD (1)						
Sayam Camp	KII (3)	KII(3)	FGD (1)	FGD (1)	FGD (2)		KII (2)	KII (1)
	FGD (5)	**FGD (4)**						
Total	**KII (9)**	**KII (9)**	**FGD (4)**	**FGD (5)**	**FGD (8)**		**KII (6)**	**KII (3)**

In addition, the survey was conducted in Abounga (Tam), Ari Malari, Assaga, Chetima Wangou, Chetimari, Djajeri Canada, Dubai, Gadjame, Goudoumaria, Issari Bagara, Issari Brim, Kandilwa Youra, Ngarwa Koura, N'gourtouwa, Sayam Camp

	AGIRLS 10-14	AGIRLS 15-19	ABOYS 10-14	ABOYS 15-19	P&G	C/NGO	COMMUNITY LEADER	LOCAL AUTHORITY
	FGD (12)	**FGD (11)**	**FGD (11)**					
Grand Total	**KII (23)**	**KII (24)**	**KII (1)**	**FGD (12)**	**FGD (22)**	**KII (5)**	**KII (19)**	**KII (7)**

AGirls 10-14/15-19: Adolescent girls, aged 10-14; ABoys 10-14/15-19: Adolescent boys, aged 15-19; P&G: Parents and guardians; C/NGO: Community or non-governmental organisations

1.5.3 Sample Questions

The survey consisted of six modules, which covered the following topics:

01 DEMOGRAPHIC INFORMATION

02 EXPERIENCE, AGENCY AND CAPACITY

03 EDUCATION

04 HEALTH

05 ECONOMIC AND FOOD SECURITY

06 CHILD PROTECTION AND WELL-BEING

The questions and topics of the KIIs and FGDs were shaped to reflect the respondent group. Questions to adolescents sought to encourage responses regarding their own experiences and the experiences of their peer group on topics including education, household and family experiences, engagement with the humanitarian community, experiences of violence, and economic and food security. Girls were encouraged to speak openly and freely about their fears and hopes for the present and the future, and what changes they wanted to see in their community. Adult respondents were asked about their knowledge of the experiences of adolescent girls and asked to describe their attitudes towards issues such as CEFM, girls' education and roles in the household. This data provided important context on community attitudes towards adolescent girls and views of their needs, and helped to corroborate or challenge the views of adolescents.

Mother and child at a relief aid distribution point in Mubi, Nigeria.
(©Plan International)

1.6 DATA ANALYSIS

Data analysis was undertaken by a research team based at Monash University's Gender, Peace and Security research centre (Monash GPS). This team worked in partnership with Plan International Headquaters, Plan International Australia, Plan International Lake Chad Programme, and Plan offices in Niger, Nigeria and Cameroon to design the research questions, methodology and hypotheses. Following data collection, the researchers analysed the information and prepared the research findings and report.

It is important to note that this research project is not designed to establish prevalence with regards to any particular issue or to provide either a quantitative-based or objective account of adolescent girls' experiences. Consistent with the methodology, the goal of the data analysis has been to draw out and amplify the voices of adolescent girls in the research findings. Consequently, the findings in this project are subjective and, moreover, underscore the fact that adolescent girls are not a homogenous whole and do not have a single view or set of experiences in crisis contexts. However, the project does highlight areas of commonalty and difference, which provides a rich understanding of how adolescent girls experience crisis. In this sense, the project uses the quantitative survey findings to provide an account of the broad experiences of adolescent girls. It further uses the qualitative research to contextualise the issues raised in the survey in the lives and experiences of adolescent girls.

1.7 RESEARCH ETHICS

Attention was given to the ethical concerns of working with adolescent girls. Local permission was obtained to conduct the research. Safe spaces for adolescent girls were created for focus group discussions. Particularly with regards to engagement with adolescent girls, there was a strong emphasis for data collectors to be young and female to generate a sense of comfort and understanding. Data collectors were attentive to issues that may trigger distress and the data collection tools were designed to limit the likelihood of exposing girls to discomfort. Referral mechanisms were in place for those that experienced distress and required follow-up support. The relevant ethical protocols for both Plan International and Monash University were followed. All data collectors were working under Plan International's Child Safeguarding Policy and the research scope and data analysis had the approval of the Monash University's Human Research Ethics Committee. Principles of confidentiality, anonymity and informed consent were applied, and for girls and boys under 18, parents or guardians were asked for consent for girls' participation and girls were subsequently asked for their assent.

1.8 LIMITATIONS OF THE DATA

Given the ongoing security risks in the area, sites were selected to avoid exposing enumerators to high levels of insecurity and risks of attack.

Beyond this, as the majority of adolescent girls have limited interaction with humanitarian services, accessing respondents, particularly the most marginalised adolescent girls, was challenging in some research sites. Efforts were made to include a diverse cross-section of adolescent girls, recognising the unique experiences of married adolescent girls, divorced adolescent girls, adolescent girls with disabilities, unaccompanied and separated adolescent girls, and young mothers. However, this was not always possible and so the research may not fully capture the experiences of the most marginalised girls in the most at risk areas.

In addition, all data collection tools were designed in English and then translated into French for Cameroon and Niger. Then, data collection was conducted in the varying local languages of each site and findings translated back into French and English before analysis, which creates opportunities for both questions and responses to lose some nuance or meaning.

1.9 LITERATURE REVIEW

This report seeks to bridge knowledge gaps in our understanding of the impact of protracted crises on civilians by linking together the protracted crisis context and an understanding of the unique experiences of adolescent girls. In doing so, it draws upon a body of research within the sector that examines the role of gender and age upon the security and well-being of those living in crisis contexts.

1.9.1 A focus upon adolescent girls

There is widespread recognition of the role that gender plays in determining the experiences of those impacted by crisis.[19] Increasingly, there have been efforts across the breadth of international humanitarian action to disaggregate data and findings by sex, and – importantly – to deploy that data for the purposes of gender-sensitive programming.[20] To this end, the United Nations Office for the Co-ordination of Humanitarian Affairs (UNOCHA) encourages both a "meaningful gender analysis, including the collection of sex and age disaggregated data" and "gender responsive information products that capture the differential impacts [of crisis] on women and men of all ages and backgrounds".[21]

Consequently, there is an emerging body of research and programming analysis which examines the gendered experiences of crisis.[22] This reporting brings to the fore gendered experiences of vulnerability, violence and access to survival resources in times of crisis for women.

In addition, there has been an emerging consideration of age. This is particularly highlighted in child protection, though it is yet to proliferate across most humanitarian standards. Efforts to mainstream an age-based analysis brings into focus the unique experiences and inflated vulnerability of the very young and very old in crisis contexts.[23] For example, in the case of young people, it highlights their over-representation among communities displaced by conflict and crisis.[24] The United Nations High Commissioner for Refugees (UNHCR) notes that over half of the 65.6 million forcibly displaced people worldwide are under the age of 18, placing stress upon their access to education and healthcare and increasing their vulnerability to trafficking and other forms of violence.[25] In doing so, this draws upon the work performed by child-focused agencies and recognises the relational experiences of civilian populations in crises.

It should also be noted that there is emerging research within the sector that focuses specifically upon adolescent girls. In particular, the Women's Refugee Commission (WRC) has undertaken initiatives to influence programming for adolescent girls around issues including displacement, CEFM, sexual and reproductive health rights (SRHR) and disability.[26] Similarly, the Population Council has undertaken reporting and thematic reviews focusing on adolescent girls, though this is not specific to the crisis context.[27] The United Nations Population Fund (UNFPA) has similarly produced a number of reports examining adolescent marriage, pregnancy and motherhood[28] as well as the impact of disaster and conflict upon adolescent girls.[29] IRC has also undertaken research on adolescent girls in humanitarian crisis contexts.[30] The UK Department for International Development (DFID) funds and the Overseas Development Institute (ODI) manages the Gender and Adolescence: Global Evidence (GAGE) longitudinal research programme on adolescent girls across diverse contexts; Africa (Ethiopia, Rwanda), Asia (Bangladesh, Nepal) and the Middle East (Jordan, Lebanon).[31] ODI has also undertaken research on violence against women and girls in Chad.[32] Finally, Plan International has undertaken numerous studies which focus upon young people and, particularly, adolescent girls. These include studies on adolescent girls in disaster and climate change, safety in urban

centres, sexual and reproductive health rights and adolescent girls' needs in humanitarian settings.[33] The growth in focus upon adolescent girls builds an evidence base around the unique vulnerabilities and issues that adolescent girls face, as well as providing the sector with a layered and deeper understanding of the impact of crisis upon civilian populations.

However, while we are seeing a focus upon age and gender – and encouragingly some focused research on adolescent girls themselves – the sector still has some way to go in ensuring comprehensive engagement with the experiences of adolescent girls.[34] While the rhetoric is often in place, the attending methodology, analysis and findings remain superficial.[35] In general crisis reporting, where sex-disaggregated data and analysis exists, it often conflates 'women and girls' or 'young people' together. For example, the aforementioned 2018 *Humanitarian Needs and Requirement Overview: Lake Chad Basin Emergency*[36] presents findings regarding women, children and 'women and children' broadly. Similarly, age disaggregated data may speak broadly of children, adolescents or youth, but may not be disaggregated by sex. While these broad categorisations may serve different needs, this can obscure the sometimes stark variations in experience and capacity that both age and gender bring to different civilian constituencies. Therefore, there remain opportunities to further examine the intersections between gender and age, particularly in the crisis context. With this in mind, the report's focus upon adolescent girls in protracted crisis contexts – in particular in the Lake Chad Basin – is a nascent area of focus for the humanitarian sector and remains under-researched.

1.9.2 Reporting on Adolescent Girls in the Lake Chad Basin

There has been much written in the last couple of years on the challenges facing those caught up in the Lake Chad Basin crisis, including the effects of conflict,[37] security threats posed by Boko Haram,[38] food insecurity,[39] the effects of the economic crisis[40], environmental degradation,[41] gender-based violence,[42] displacement,[43] and humanitarian needs.[44] There has also been much written on the specific effects on different demographic groups but, as indicated above, very little on adolescent girls. The effect of the crisis on children (and their physical and mental well-being), women and girls (particularly in respect of gender-based violence and maternal health/fatalities), and displaced persons (with respect to their heightened insecurities) has been explored and

documented.[45] As yet, however, there has been little research undertaken on the specific threats faced by adolescent girls, their specific needs, or the specific capacities they have to contribute to building peace and prosperity in the Lake Chad Basin. There has been some recent research on adolescent girls in the region and GBV[46] and reproductive healthcare.[47] However, until now, there has not been comprehensive research and analysis of the intersecting ways in which the protracted crisis in Lake Chad impacts adolescent girls and their related needs and capacities.

Salima*, 21, is a survivor of Boko Haram violence.
(©Hartmut Schwarzbach / argus)

1.10 THE PROTRACTED CRISIS CONTEXT

The protracted crisis context is one where multiple crises layer upon, and interconnect with one another over a sustained period of time. The longevity of crises often reflect and reinforce poor governance and public administration structures, degraded or unsustainable livelihood systems, and intervention (or lack thereof) by external actors including states, international organisations and the humanitarian sector.[48]

The protracted crisis context uniquely impacts adolescent girls in a number of ways.

01 Firstly, for adolescent girls, the crisis can last throughout their formative years. Ongoing disruption to nutrition, education, or knowledge-building around issues such as sexual and reproductive health can have life-long effects.[49]

02 Secondly, the longevity of the crisis increases their vulnerabilities in unique ways. For instance, protracted economic insecurity can make girls especially vulnerable to trafficking, sexual exploitation and child early and forced marriage.[50]

03 Thirdly, the layering of multiple crises requires an understanding of the exacerbating and intersectional effects that uniquely impact adolescent girls. For instance, there are clear connections between food insecurity, CEFM and disruptions to the right to education.[51] These patterns need to be identified and understood in programmatic responses.

Large scale displacement almost inevitably accompanies protracted crisis, with large sections of the civilian population displaced both within and across borders. The experience of displacement most often substantially increases the risks for adolescent girls, both during flight as well as in camps and informal settlements. The experience of displacement is distinctly gendered – additional restrictions are often placed on the freedom of movement for women and girls in displacement contexts due to fear of sexual violence and the ensuring stigma and social blame. The role of women and girls in community life is often curbed in the name of protection in contexts of displacement, either mirroring or further exacerbating the influence of the crisis itself.

A laughing young woman at a relief aid distribution point in Nigeria.
(©Plan International)

Large scale displacement and the breakdown of social and family protection structures, such as access to schooling and proximity to neighbours and extended kin, as well as the potential for family separation, all place adolescent girls at risk of violence and abuse, including trafficking, domestic violence and sexual exploitation.[52] While populations in camp contexts may in some instances have greater access to humanitarian assistance, unaccompanied and separated adolescent girls, including adolescent girl-headed households, often face significant barriers to accessing services, both practically and as a result of community expectations and norms.

In host communities, female refugees and IDPs, including adolescent girls, may face legal barriers preventing them from gaining employment and constraining entrepreneurship. The World Bank reports that the 15 largest refugee-hosting countries in 2014 had, in all, 170 women-only legal restrictions on seeking employment.[53] Constrained in their livelihood options, women may in extreme cases resort to adverse coping strategies, such as transactional sex, to support themselves and their families.

Displacement and migration can also have a longer-term substantial impact on gender roles, challenging how families are structured and the role of individuals, including adolescent girls within the household. The economic role of adolescent girls, and how they participate in society may change over time. These effects of displacement can open up new options for women and in particular adolescent girls, creating opportunities for re-negotiating gender roles.

Soueba, 14, plays a game with her friends at a child friendly space in the Diffa region of Niger.
(©Plan International)

As outlined in the methodology section above, this report does not only examine the issues facing adolescent girls in the Lake Chad crisis, it explicitly seeks their views and understanding of their situations. Such an approach enables the narrative of the crisis to be constructed primarily by adolescent girls themselves. Adolescent girls often do not see the crisis or their own situation in the same way as adults or sector professionals. This methodology encourages us to think beyond traditional thematic approaches and priorities and allows adolescent girls to express their experiences and needs themselves. This provides an entry point to re-shape power relations between adolescent girls and the humanitarian sector. As such, this approach allows actors in the humanitarian sector to position themselves as supporters rather than prescribers of girls' needs, recognising their demonstrated capacities and resilience in crisis contexts, and reinforcing rights-based approaches to humanitarian response.

2. RESEARCH FINDINGS

This section of the report presents the research findings and is structured around the three research questions outlined in section 1.2. To reiterate:

1. How do adolescent girls understand and experience insecurity?

2. How do adolescent girls navigate insecurity?

3. What are their needs, and what opportunities exist to support adolescent girls in protracted crisis situations?

An adolescent girl at a relief aid distribution point in Mubi, Nigeria.
(©Plan International)

First, the report details the core sites of insecurity that have been identified by adolescent girls in the Lake Chad Basin. Second, a cross-sectional analysis of these issues is undertaken to identify the sites and themes of resilience shown by adolescent girls. In particular, this section looks at the positive strategies they have adopted as they navigate their way through the current crisis. It also highlights the capacities they have developed to shape their own security and well-being and that of their communities. The report then details some of the negative coping mechanisms these girls have adopted in response to the challenges they face. These research findings then provide the basis for the recommendations and conclusions drawn in the final section.

2.1 SITES OF INSECURITY

Adolescent girls affected by the crisis throughout the Lake Chad Basin identified and described a number of sites of insecurity in their lives and those of their communities. As further detailed below, they report threats in their home and public lives that compromise both their security, well-being and hopes for the future.

For adolescent girls, these concerns often intersect with – and shape – one another. They move seamlessly between their home life and experiences in the community. They impact their relationships with family, their access to peer networks and their access to safe spaces.

For instance, adolescent girls recognise that their family context (particularly the presence of their parents in their lives) will likely shape their prospects of physical and economic security, as well as their future opportunities. It will, therefore, impact not just their home life but the experience and treatment they receive in the community.

In addition, adolescent girls describe how the impact of conflict-related violence is felt within their homes and how it affects their whole lives. Those displaced across the region (both IDPs and refugees) are particularly likely to fear physical violence, have limited access to education and feel less optimistic about their futures.

2.1.1 Experience and Perceptions of Violence

Adolescent girls described a broad spectrum of violence including conflict-related violence, community violence and domestic violence that infiltrates and impacts almost every aspect of their lives.

Across all countries, adolescent girls report fearing harassment, most commonly from adolescent boys and young men, and as a result, they change their behaviour and restrict the way they access public spaces. Adolescent girls particularly reported feeling unsafe in their communities at night, with many highlighting the crisis and the presence of armed gangs as driving an increase in insecurity. In several research sites, adolescent girls spoke of how their movements and access to public spaces has decreased as a result of the impact of the crisis. This level of insecurity felt by adolescent girls is highlighted in Figure 2, below.

The presence of peers, family members and known community members had a significant impact on how safe adolescent girls felt in their communities during the day as well as the locations where they felt safe. Adolescent girls in Nigeria reported greater feelings of insecurity travelling to and from school, while they otherwise largely felt safe in their community during the day. Across all research sites in Cameroon, the visible presence of security forces or police positively impacted whether girls felt safe in their communities both at night and during the day.

When asked if they feel safe at home, many adolescent girls highlighted how the crisis infiltrates their homes and impacts their feeling of security. This is partly to do with external threats but also the stress of the crisis increases the likelihood of violent outbursts in the home or domestic violence. Over a fifth of all girls surveyed (95 out of 449 or 21.21%) said that they had experienced hitting or beating in the last month, with 60% of these incidents occurring within the household. In about a half of all cases, a relative was the perpetrator – the mother, father and brother the most likely perpetrator by far (mentioned in 47 of all cases involving hitting or beating in the last month, with a few cases involving more than one family member). Adolescents in Gahara and Misheri in Nigeria and across the research sites in Cameroon spoke of previous experiences of violence at the hands of Boko Haram and how this has led to them feeling unsafe at home. Across the research sites in Nigeria, Cameroon and Niger, 34.67% of girls reported feeling unsafe at home, with feelings of safety decreasing among those that were displaced. Within Nigeria there was a difference between research sites, with adolescent girls in Mubi feeling substantially less safe at home than those in other research sites. Younger adolescents in both research sites in Nigeria also reported feeling less safe at home than their older peers. Displaced adolescent girls in Sayam Camp, N'gourtouwa and Garin Wanzam in Niger detailed how they flee their homes due to fighting, spend the night hiding out in the bush and return when they can no longer hear the shooting.

The impact of the deteriorating economic situation and ongoing food crisis was also a factor highlighted in the increase in violence and mistreatment for adolescent girls. Community leaders detailed how frustration related to household economics led some parents to abuse and mistreat their children. It's also important to note that, aside from mothers, fathers and brothers being cited as the perpetrators of beatings that girls had suffered in the last month, adolescent boys and teachers were also mentioned as being the perpetrator by a number of girls (18.1% and 10.48%, respectively).

Adolescent girls not residing with their parents were more likely to report experiencing mistreatment and abuse at home, with extended family, in particular aunties, uncles and step mothers, the primary perpetrators. There is also an increased vulnerability to violence experienced by adolescent girls not living with either their parents or extended family members, with respondents highlighting extreme cases of abuse against adolescent girls in their communities who were working as house help or in domestic servitude.

FIGURE 2. PERCEPTION OF SAFETY IN THE COMMUNITY BY ADOLESCENT GIRLS (N=449)
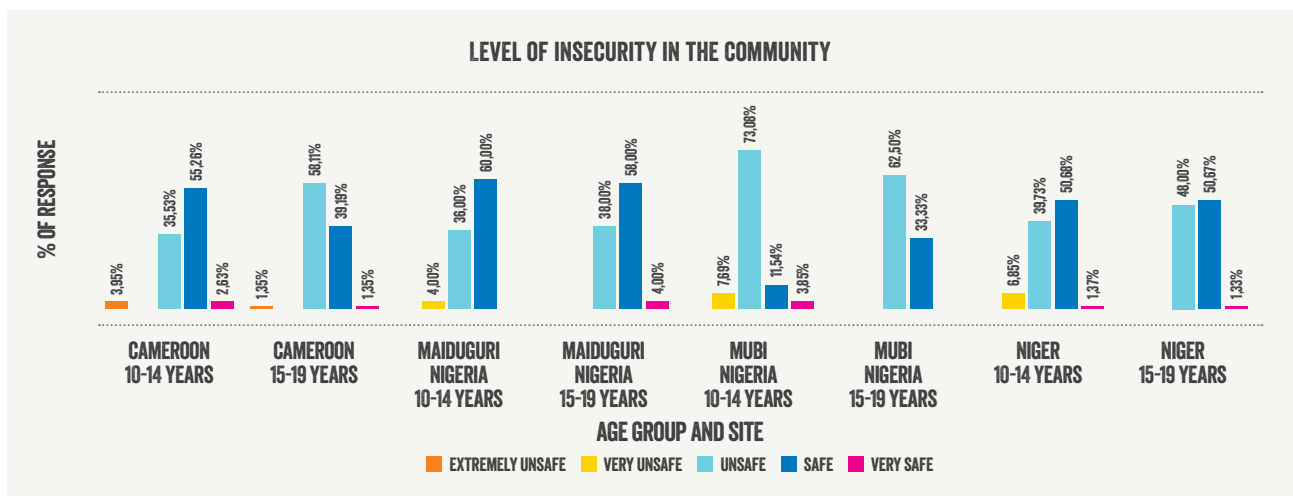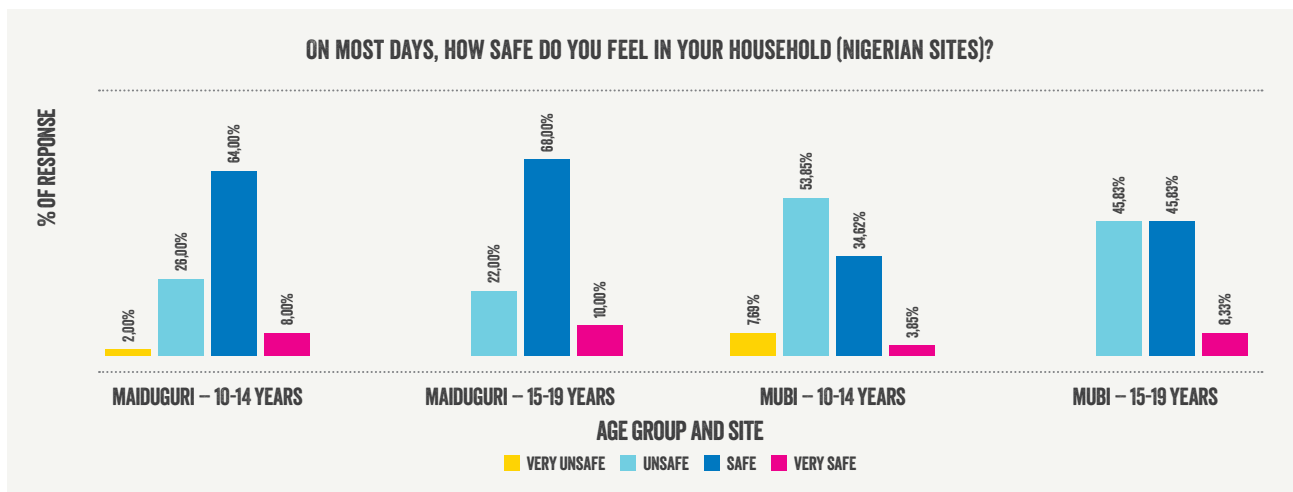

LEVEL OF INSECURITY IN THE COMMUNITY

FIGURE 3: PERCEPTIONS OF SAFETY WITHIN HOUSEHOLD BY ADOLESCENT GIRLS: NIGERIA (N=150)

ON MOST DAYS, HOW SAFE DO YOU FEEL IN YOUR HOUSEHOLD (NIGERIAN SITES)?

Girls' movements are restricted for their safety. Only girls are kidnapped.
MOTHER, NDOLLORI, NIGERIA

My parents died and I was maltreated in the house all the time.
ADOLESCENT GIRL, 13 YEARS, ZARMARI, NIGERIA

They beat me all the time and they will not give me food most times.
ADOLESCENT GIRL, 13 YEARS, ZARMARI, NIGERIA

Even if I do not go out at night the gangsters can get to my house at night.
ADOLESCENT GIRL, 19 YEARS, BLABLIN, CAMEROON

2.1.1.1 Sexual Violence

Supporting the fear detailed by adolescent girls of harassment by adolescent boys and young men, 8.48% of survey respondents (or 38 out of 449 adolescent girls surveyed) reported receiving unwanted touching and kissing in the last month. In 83.80% of these cases the perpetrator was an adolescent boy. Almost half (45.95%) of these incidents occurred outside on the road and almost a quarter (24.32%) occurred at school, showing that for adolescent girls there are few areas of their lives untouched by violence and abuse. Adolescent girls in Mubi in Nigeria were the most likely to report unwanted touching and kissing, with a higher proportion of incidents occurring at school. Adolescent girls detailed how they changed their behaviour and limited their movement in public spaces in response to this harassment and abuse.

Some adolescent boys also spoke of the pervasiveness of violence and abuse against adolescent girls, describing how adolescent girls don't feel safe "because boys go out to look for women at night" (Adolescent boy, 15 years, Koza Mazi, Cameroon). This represents a double threat for adolescent girls, for those who are survivors of sexual assault often face stigma as well as further victimisation from their families and communities. Adolescent girls describe how survivors are forced into marriage with the perpetrators of their assaults and one local authority representative detailed an act of genital mutilation by parents in response to their daughter being out at night with boys.

CSOs in Maroua, Cameroon described how adolescent girls had suffered sexual assaults alongside other physical attacks and injury as a result of the ongoing crisis. While respondents were largely unwilling to talk about conflict-related sexual violence (CRSV), some adolescent girls and their community members spoke of the threat of kidnapping and forced marriage perpetrated by armed groups.

Several adolescent girls detailed the vulnerability of girls in domestic roles, describing how they knew of girls working as servants who were repeatedly raped by men in the household. This area of vulnerability was also clearly linked to family separation, as adolescent girls separated from their parents are more likely to work outside the home and more likely to live and work in other households.

Adolescent girls in several research sites in Nigeria and in Goulfey and Blablin in Cameroon knew of girls their age who were forced to have relationships with men in order to survive. It was described by some as a negative coping mechanism in response to the insecurity and economic crisis, whilst others spoke of persistent poverty prior to the crisis driving survival sex.

Salima*, 21, (on right) and her sister Jessica*, 17, (on left) are survivors of Boko Haram violence.
(©Hartmut Schwarzbach / argus)

(I have heard of) rape, sexual harassment by neighbours, passers-by, boys in the community. Nothing was done.
ADOLESCENT GIRL, 17 YEARS, NDOLLORI, NIGERIA

We need more security men in my community so that the boys will stop flogging the girls at night.
ADOLESCENT GIRL, 14 YEARS, GAHARA, NIGERIA

The boys might rape you and also collect whatever that is valuable to you that you are holding.
ADOLESCENT GIRL, 13 YEARS, GAHARA, NIGERIA

My neighbour who put burning fire wood in the private part of her daughter, saying the girl was gisting outside with boys at night.
LOCAL AUTHORITY, GAHARA, NIGERIA

I know victims as far as servants working with rich people are concerned. These girls are often raped by their master or by their boyfriends so as to have money.
ADOLESCENT GIRL, 16 YEARS, MORA, CAMEROON

(Do girls feel safe walking around your community at night?) No, because boys go out to look for women at night.
ADOLESCENT BOY, 15 YEARS, KOZA MAZI, CAMEROON

Because the men don't leave us alone at night.
ADOLESCENT GIRL, 12 YEARS, N'GOURTOUWA, NIGER

We don't feel safe at night as boys take advantage of the darkness to bother us.
ADOLESCENT GIRL, 16 YEARS, SAYAM CAMP, NIGER

2.1.1.2 Child Early and Forced Marriage

The majority of adolescent girls engaged in this study are clear that CEFM is a threat to their current well-being and future prospects. Adolescent girls, as well as adolescent boys, parents and community leaders agree that CEFM is common across all research sites, reporting an increase as a result of the crisis.

When asked about decision-making for marriage, adolescent girls overwhelmingly said parents, and predominantly fathers, held the decision-making power. Some parents suggested community leaders and religious leaders also influenced decision-making regarding the age of marriage, encouraging early marriage and restricting adolescent girls' access to schooling. Community expectations and attitudes are further reinforced by practical drivers of marriage. The cost of school fees and materials, closure of schools as well as the perception by some parents that marriage acts as a protective mechanism against the physical threat posed by armed groups, and the need for adolescent girls to provide household and care labour were all highlighted as driving rates of CEFM.
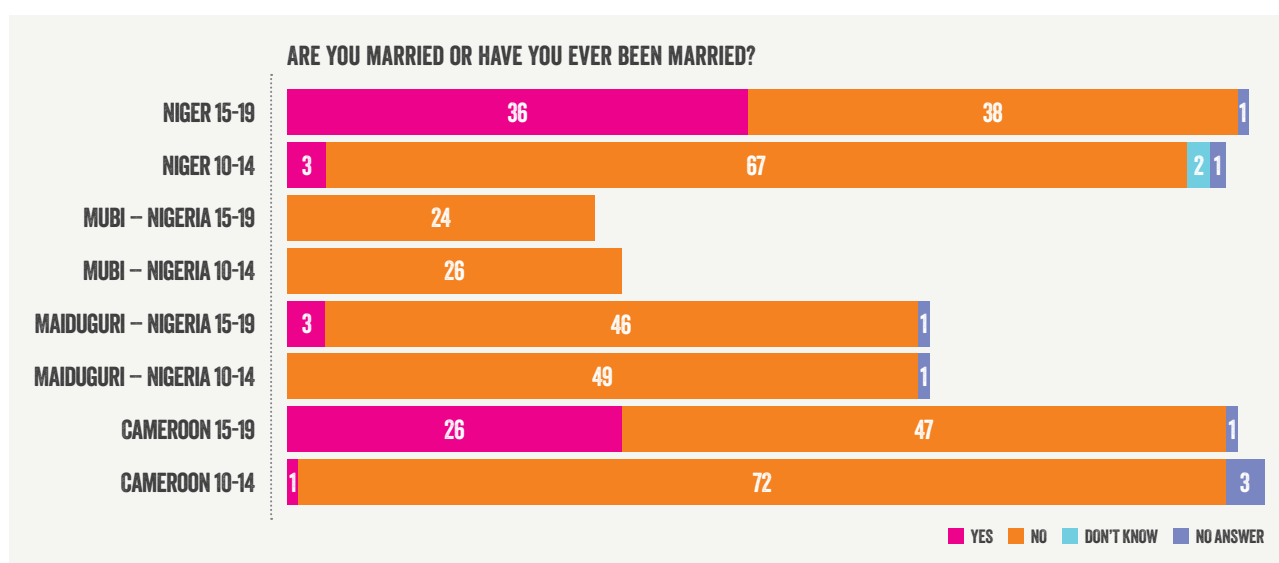
Adolescent boys strongly recognised the intrinsic link between CEFM and how it can be utilised as a negative coping mechanism by families in response to economic hardship. They described the need for greater livelihood and economic opportunities as well as community sensitisation to ensure girls were able to stay in school. Community leaders further supported the view that the related food and economic crises were driving rates of CEFM, with the practice of bride price providing a space for CEFM to be deployed as a negative coping mechanism by families struggling to access food.

As outlined further in section 2.1.4 below and explored in other sources (such as the 2017 State of the World's Children Report[54]), the link between limited access to education and the prevalence of child marriage is particularly evident across the Lake Chad Basin. In Niger in particular, 81% of women aged 20-24 with no education and 63% with only primary education were married or in union by the age of 18, compared to only 17% of women who completed secondary education or higher. Niger has the highest rate of child marriage in the world, with 3 in 4 girls marrying before their 18th birthday. In the region of Niger most affected by the crisis, the rates are even higher – in Diffa 89% of girls marry as children.[55]

Both adolescent girls and their parents acknowledged the risks associated with early pregnancy stemming from early marriage. The extremely high rates of early pregnancy and lack of access to SRHR information and services (outlined in section 2.1.8.3 below) put adolescent girls at greater risk of contracting sexually transmitted diseases (STIs), including HIV, and of maternal mortality, which is at substantially high rates throughout the Lake Chad Basin.[56]

Just over 15% of adolescent girls across all research sites were currently or had previously been married, with adolescent girls in Niger far more likely to be married (48% of those surveyed aged 15-19 were currently or previously married). Adolescent girls aged 10-14 years were far less likely than older adolescents in all locations to be married, with only 1.3% in Cameroon and 4.1% in Niger reporting they were or had previously been married, and none in Nigeria (see Figure 4).

FIGURE 4: GIRLS' MARITAL STATUS (N=449)

ARE YOU MARRIED OR HAVE YOU EVER BEEN MARRIED?

	YES	NO	DON'T KNOW	NO ANSWER
NIGER 15-19	36	38		1
NIGER 10-14	3	67	2	1
MUBI – NIGERIA 15-19		24		
MUBI – NIGERIA 10-14		26		
MAIDUGURI – NIGERIA 15-19	3	46		1
MAIDUGURI – NIGERIA 10-14		49		1
CAMEROON 15-19	26	47		1
CAMEROON 10-14	1	72		3

Of those surveyed that are currently married, 57.4% were married at the age of 14 or 15 years, indicating that vulnerability to CEFM coincides with the end of primary education (at approximately 12-14 years). This clearly contradicted the age the girls themselves nominated as the ideal age for a girl to get married, with the majority nominating somewhere between 18-21 years of age (31.93%).

Of those adolescent girls that weren't yet married, 66.5% said it would be either their father's or mother's decision when and to whom they married, with less than 20% of girls surveyed stating it would be their decision. Adolescent girls in Ngouma, Cameroon, stated that they had married at 14 years, because to reach 15 years in their community and be unmarried they would be considered 'an old maid' (Adolescent girl, 16 years, Ngouma, Cameroon).

In some locations, CEFM was described as a protective mechanism, with parents and community leaders detailing how adolescent girls and their guardians are fearful of kidnappings as well as mentioning girls who have been kidnapped and forced to marry. Adolescent girls in Njimtillo and Zarmari, Nigeria also described how the community and parents forced adolescent girls to marry the perpetrators of sexual assaults.

They married her out to the rapist.
ADOLESCENT GIRL, 17 YEARS NJIMTILLO, NIGERIA

They married her out to the person that molested her. Only the parents do not like the person.
ADOLESCENT GIRL, 18 YEARS, ZARMARI, NIGERIA

Parents forcefully marry out girls as tradition here.
ADOLESCENT GIRL, 17 YEARS, ZARMARI, NIGERIA

Early marriage is a result of insurgency, because parents cannot afford to take care of the children.
FEMALE PARENT/ GUARDIAN, ZARMARI, NIGERIA

Some adolescent girls are forced to (be in a relationship with a man) in order to survive.
FEMALE PARENT/ GUARDIAN, ZARMARI, NIGERIA

Mostly fathers decide for his daughter to get married. Yes, the father has the final say.
COMMUNITY LEADER, KALERI, NIGERIA

The girls want to get married early because they are afraid of being kidnaped.
FEMALE PARENT/ GUARDIAN, BAHULI, NIGERIA

The major problem I observe is that some of the girls got married not because they wanted to marry. They got married because of the insurgency and some were kidnapped. Some were forced to get married. The insurgency caused it.
COMMUNITY LEADER, GAHARA, NIGERIA

2.1.2 Freedom of movement

The restriction placed on adolescent girls' movement as a result of the crisis was described by adolescent girls themselves as well as their communities in all three country contexts. However, those that had experienced displacement or were living in camp contexts often had greater restrictions on their movement outside of the household.

Parents and guardians stated that adolescent girls should not move about at night-time because of the fear of violence and conflict, but also because of the risk from what they regarded as immorality or involvement with boys.

A fear of kidnapping at night-time was highlighted by both adolescent girls and community members. This was referred to as distinctly gendered, with parents and guardians saying it was only girls who were at risk of kidnapping. Street lights and increased presence of security forces were mentioned by adolescent girls as mechanisms to support increased freedom of movement. However, it should be emphasised that the increased presence of security forces does not always allay fears; in some places (such as Diffa, Niger) their presence increases fears. Moreover, the physical threat to girls does not simply exist outside communities and camps, but within them too, as mentioned above. Furthermore, it should also be borne in mind that limitations on freedom of movement because of physical threat does not just affect girls; boys often face violence, kidnapping and forced recruitment to armed groups (for instance, in Diffa, Nigeria).

In Bahuli, Nigeria, respondents highlighted both the impact of insecurity and a recently imposed curfew. While they emphasised that freedom of movement was most limited at night-time, there were also some restrictions experienced by adolescent girls during the day.

... because it's dark and it's dangerous at night, there might be bad people around who can hurt me.
ADOLESCENT GIRL, 14 YEARS, MISHERI, NIGERIA

Before I went to farm anywhere, even beyond this village. But now, I can't because I am afraid.
ADOLESCENT GIRL, 13 YEARS, GAHARA, NIGERIA

The Government should help provide us with street lights.
ADOLESCENT GIRLS, 17 YEARS, NDOLLORI, NIGERIA

A girl is not allowed to walk at night because it's not safe for girls.
ADOLESCENT GIRL, 17 YEARS, KALERI, NIGERIA

There is no age requirement to enter into marriage, even a foetus can receive a marriage proposal.
CSO, MINEDUB MAROUA, CAMEROON

Children from a rural town in Adamawa State, Nigeria.
(©Plan International)

2.1.3 Family Separation

Family separation, either as a result of separation during displacement or due to death of one or both parents, particularly among displaced adolescent girls, was highlighted as a strong, negative influence on safety, security, well-being and hopes for the future. It was recognised as impacting an adolescent girl's ability to attend school, as well as what age she would marry and whether she experienced abuse and mistreatment at home. These harms are clearly gendered: girls are more likely to marry younger (with the associated risks associated with early pregnancy), more likely to suffer GBV, and be engaged in the type of work that exposes them to further risk (e.g. working as a servant in another home).

The presence of fathers was listed as a key factor in instilling a sense of safety by adolescent girls. This was particularly mentioned by respondents in Nigeria, although this research site had the lowest rate of family separation across all research sites. Across all sites 67.94% of adolescent girls were not living with their fathers, whilst 30.56% were separated from both parents. Cameroon had the highest rate of family separation with 37.59% of adolescent girls surveyed separated from both parents, with siblings, grandparents and other relatives as the primary alternative carers for adolescent girls. Several respondents highlighted that adolescent girls who were separated from their parents were more likely to engage in small scale livelihood activities such as trading, sewing and working as house-help to earn money to sustain themselves. Others related stories of adolescent girls abused and mistreated in situations of domestic servitude.

Overall, family separation was linked to an experience of poverty and insecurity for adolescent girls, with limited or no access to education, limited livelihood opportunities and feelings of hopelessness. Clearly there are, consequently, implications for physical security, well-being and mental health.

Plenty of [unaccompanied and separated] vulnerable girls are here in my community and it is as a result of the crisis. They cope by being house girls to wash plates and tidy other people's house to earn [money] in return. Some live in camps and others at other people's houses.
COMMUNITY LEADER, MISHERI, NIGERIA

It is as a result of the conflict/crisis. They sometimes stay on their own or with uncles, aunties etc. They manage life as it is. No help from local authority.
LOCAL AUTHORITY, GAHARA, NIGERIA

They tend to cope through engaging themselves with little trading such as cap knitting, sewing and working as house helps to sustain themselves.
COMMUNITY LEADER, KALERI, NIGERIA

I suffer because my father is dead and I'm always at home.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

It is difficult to live like before since my parents aren't around anymore.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

They are beaten and raped and given very difficult tasks. Most of the time it is the child's uncle, neighbour or stepmother. It happens because the girl no longer has their parents to protect them.
**ADOLESCENT GIRL, 17 YEARS, SAYAM CAMP, NIGER**

2.1.4 Barriers to accessing education

Adolescent girls in the Lake Chad region value education and, despite significant barriers, largely want to continue attending school either through secondary education or vocational education programmes.

The transition from primary school or junior secondary school, which is often more accessible and more likely to be government-subsidised, to secondary education is a potential risk factor for adolescent girls. Adolescent girls are far less likely to attend secondary school in almost all locations, with Mubi in Nigeria the only research si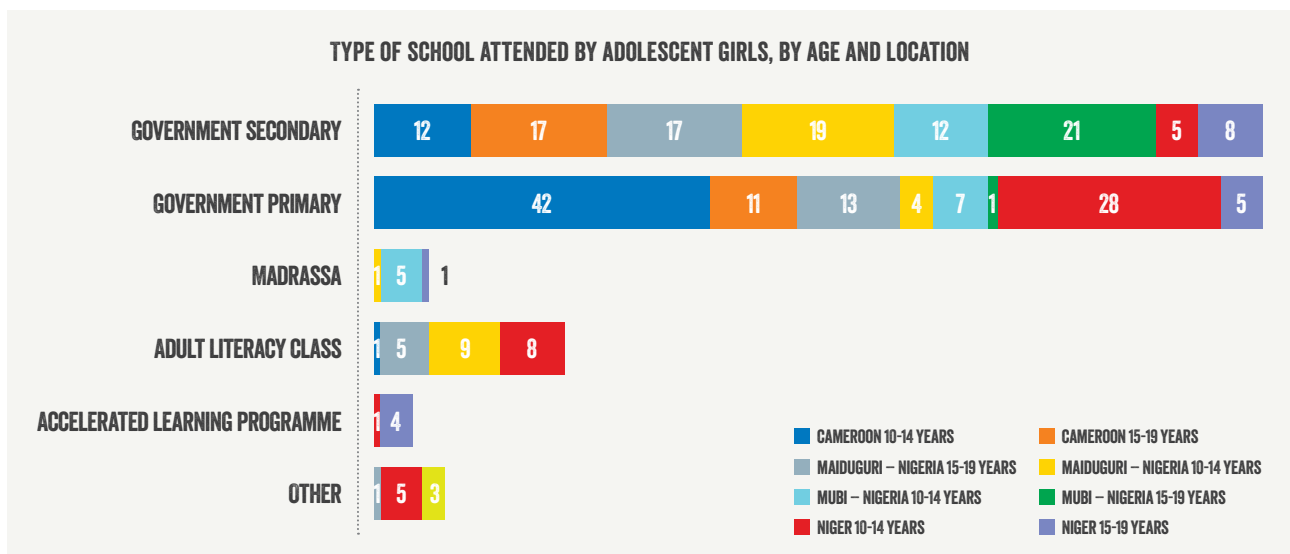te where adolescent girls continued on to secondary education at the same rate of attendance as primary school. The research sites in Niger saw the biggest divergence with 65.75% of girls surveyed aged 10 -14 years attending school, and just 29.33% percent of those aged 15-19 years attending school, coinciding with high rates of CEFM. Cameroon also saw a significant decrease in access to education, from 73.68% attendance rates in those surveyed aged 10-14 years to 37.84% in those aged 15-19 years. This could partly be explained by compulsory attendance at primary level and the subsidisation of primary education by the Cameroonian government (see Figure 5).

FIGURE 5. ATTENDANCE AT SCHOOL BY AGE AND LOCATION (N=449)
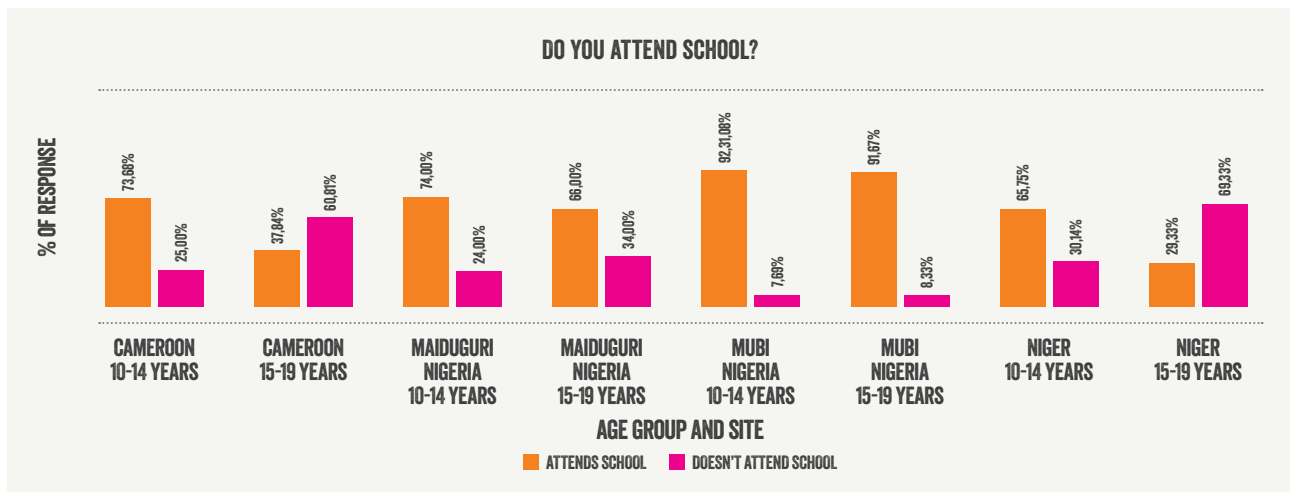
Of those girls who did attend school, the majority attended state and non-state primary and secondary, but a number also attended Madrassa (24 girls), accelerated learning programmes (9), adult literacy classes (5), private schools (4) and Islamic schools (3) (see Figure 6).

FIGURE 6. TYPE OF SCHOOL ATTENDED, BY AGE AND LOCATION (N=267)

Halima teaches children at her school in Maiduguri, Nigeria.
(©Plan International)

(School) is not important because they will end up getting married and stay at home.
FEMALE PARENT, ZARMARI, NIGERIA

If there is money we further their education but if there is none then we marry them out after their secondary school.
COMMUNITY LEADER, KALERI, NIGERIA

Not all girls complete school here; some usually leave at JSS level to get married.
ADOLESCENT GIRL, 18 YEARS, MISHERI, NIGERIA

Our school was attacked.
ADOLESCENT GIRL, 10 YEARS, BAHULI, NIGERIA

Even going to school, we do that in fear.
ADOLESCENT GIRL, 16 YEARS, BAHULI, NIGERIA

The most common reason given for not attending school across all those surveyed was the burden of household responsibilities, with 25% of those who are not attending school stating this was because of housework and duties at home. Beyond this, the cost of education was raised as a significant barrier with 20.83% of those not attending school stating they were unable to afford it. These two drivers are intrinsically linked, with many adolescent girls describing how their household labour and care supports the coping capacity of the household and engagement of other family members in livelihood activities.

Livelihood opportunities for parents and guardians were seen as key to the continuing education of adolescent girls. Adolescent girls across all research sites, along with parents and community members in Zarmari and Ndollori, Nigeria, linked the economic situation of parents with girls' access to all levels of education, acknowledging the particular impact on secondary education. This situation is distinctly gendered with some parents and guardians stating that they did want their adolescent girl children to attend school. However, with their limited economic situation they preferred to send boys as they would one day be the heads of households.

Some respondents in Ndollori, Nigeria, described how their schools had been burnt down, while others in Ndollori aged between 13 and 14 expressed a desire to go to school but stated the inability of their parents to afford the fees. "[Before the crisis] we went to school, but now there is no money to pay for school fees" (Adolescent girl, 13 years Ndollori, Nigeria). Beyond just the financial restrictions of paying school fees, other adolescent girls highlighted the cost of transport, a lack of writing materials and a lack of uniform as a barrier to attendance.

Beyond economic barriers, the distance required to travel to school, a lack of transport, schools being closed as a result of the conflict and the fear of attack by armed groups were all highlighted by adolescent girls as reasons they were unable to access education. Adolescent girls in Bahuli in Nigeria expressed a fear of attack and of kidnapping, stating "even going to school, we do that in fear" (Adolescent girl, 16 years, Bahuli, Nigeria). This underscores the issue of school safety, and security risks faced in endeavouring to attend school, which can pose an effective barrier to education as well as further contribute to psychological distress and other forms of insecurity. Adolescent girls in Gahara, Nigeria, also highlighted a need for more teachers to enable them to attend school and to raise the quality of the education they receive. Internally displaced adolescent girls in Niger also described how missing and lost identity papers prevented them from attending school after fleeing their home villages.

As highlighted in section 2.1.1 above, adolescent girls reported that CEFM was also a significant threat to continuing education. This view was supported by adolescent boys who stated that many girls are forced to leave school to get married or leave school to marry for economic reasons.

Beyond the continuity of education, there are also barriers that mean some girls never enter school in the first place. Of those adolescent girls surveyed that are not currently attending school, almost a third (29.39%) said they had never attended school, while only 8.18% said that they had attended school for 7 years or more. While some respondents highlighted accelerated learning programmes, access to this wasn't widely or significantly available. Poverty and displacement were the main reasons given for girls never beginning school.

Adolescent boys were strong advocates for girls' access to education, highlighting the need for equal opportunity and the benefits of education for girls. One adolescent boy also highlighted how continued education for boys can change behaviour and reduce violence against women and girls. Another adolescent boy said "we need sensitization on the effect of violence against girls" (Adolescent boy, 14 years, Zarmari, Nigeria). Nonetheless, some of the data gathered has revealed that gendered norms negatively impact girls' education, with assumptions that a girl's education is less important than a boy's because a girl will eventually get married and stay at home rather than enter the formal employment sector. Such attitudes were not widely prevalent or, at least, articulated; the main barrier to education for girls remains practical barriers, such as the cost associated with going to school, rather than cultural barriers.

Most of the girls end their education in secondary levels, because of the lack of financial support.
ADOLESCENT BOY, 13 YEARS, ZARMARI, NIGERIA

[What can be done to make it easier for you to go to school here?] Provision of uniform, sandals, books. Even food and also tell our parents that school is important.
ADOLESCENT GIRL, 13 YEARS, KALERI, NIGERIA

Most people want their girls to be in school but might be hindered by lack of money.
ADOLESCENT GIRL, 17 YEARS, BAHULI, NIGERIA

We see the closure of schools in affected areas while non-affected areas are effectively over-crowded. Moreover, the young girl has been stigmatised as she is being used as a kamikaze.
CSO, MINEDUB MAROUA, CAMEROON

80% of the girls do not go to school for several reasons: marriage, lack of means and the environment itself is not encouraging.
CSO, MAROUA, CAMEROON

I was registered for school before the crisis, what changed is that I'm scared all the time.
ADOLESCENT GIRL, 16 YEARS, MORA, CAMEROON

Not all girls finish their education. Girls stop to get married, because of pregnancy or because of rape.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

Now they give themselves to men for money to pay for school and other things.
ADOLESCENT BOY, 16 YEARS, KOZA MAZI, CAMEROON

Before the crisis everyone went to school, because there was stability; everything was good.
ADOLESCENT GIRL, 12 YEARS, N'GOURTOUWA, NIGER

Justina, who fled to Cameroon from Nigeria, is now a successful seamstress.
(©Plan International)

2.1.5 Economic Insecurity and Livelihoods

There are limited opportunities for both formal and informal livelihoods available across the Lake Chad Basin. The deteriorating economic situation, as a result of the protracted conflict and environmental disaster, is only further constricting these opportunities. For adolescent girls who have limited access to the formal employment sector, opportunities are ever decreasing.

Adolescent girls clearly linked both their own and their parents' economic prospects with their ability to make decisions about their lives. For instance, there was a clear positive link between household economic stability and livelihood opportunities for parents, and whether adolescent girls had continued access to education; with those households facing severe economic hardships often resulting in girls leaving school and helping to contribute to the household income. They also drew a link between household economic stability and the risk of CEFM, although some also saw marriage as a means to secure greater economic stability.

When asked about the biggest change in their lives, adolescent girls in Ndollori highlighted the high and increasing cost of living and the widespread impact this has on their lives, including limited access to food and proper nutrition. Adolescent girls in Njimtillo and Ndollori in Nigeria highlighted that they had also engaged in small scale livelihood activities before the crisis to assist their families. They stated that the big change is that now there are no longer any formal jobs.

Older adolescent girls across all research sites were more likely to speak about the limits they saw on their own economic participation and access to livelihoods, while younger adolescent girls were more likely to describe the impact of limited economic opportunities for their parents and the impact this has on their lives. Older adolescent girls in Nigeria were more likely than adolescent girls in other parts of the Lake Chad Basin to work outside the home either in formal employment or informal livelihood activities with 62.50% of 15-19 year-olds working outside the home. For girls in Njimtillo, Nigeria, sewing clothes, selling food and running errands were listed as the main sources of income.

Parents and guardians also described how a lack of economic opportunities have a significant impact on family cohesion and relationships within the household, highlighting how children, including adolescent girls, may be mistreated or abused as a result. As mentioned earlier, interviewees, including the girls themselves, said that frustration related to household economics caused stress which sometimes led to violence and abuse in the home.

Before the crisis we had a shop but now we cannot afford it since Boko Haram started.
ADOLESCENT GIRL, 13 YEARS, NDOLLORI, NIGERIA

We live at the mercy of people's assistance because we can't afford our bills.
ADOLESCENT GIRL, 14 YEARS, NDOLLORI, NIGERIA

Their parents send them to hawk in order to assist the family.
ADOLESCENT BOY, 11 YEARS, NJIMTILLO, NIGER

Everyone is hustling to survive.
ADOLESCENT GIRL, 18 YEARS, NJIMTILLO, NIGERIA

Children are forced into child labour because their elderly parent cannot work.
FEMALE PARENT/GUARDIAN, ZARMARI, NIGERIA

There is no sufficient work opportunity for girls here in Kaleri.
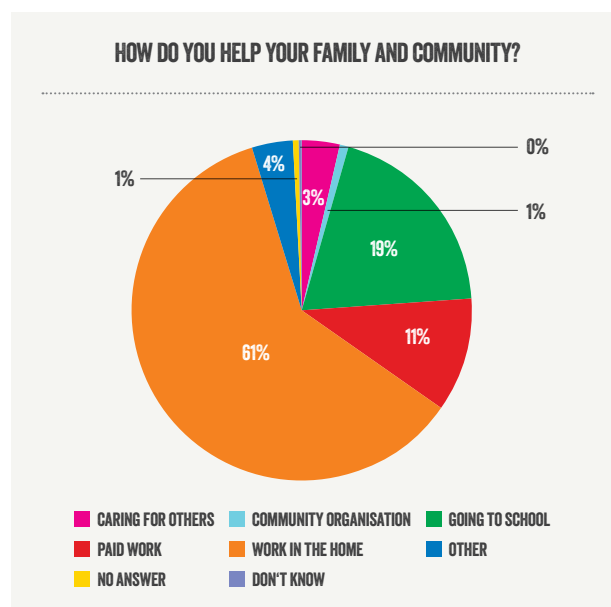**COMMUNITY LEADER, KALERI, NIGERIA**

Due to the poverty that my parents are facing I can't make any decisions.
ADOLESCENT GIRL, 17 YEARS KALERI, NIGERIA

2.1.6 Household and care labour

The burden of household and care labour is an area that adolescent girls describe as impacting their ability to cope: limiting their access to potential sources of resilience and protection in their lives such as education and paid employment. They detail how their commitments to household labour limits their ability to access education, to engage with peer networks and to engage in livelihood activities. Adolescent girls across all research sites are responsible for similar activities in the household, namely cleaning, cooking and fetching water and firewood. 61% of all girls surveyed said that they helped their families and communities by working in the home (see Figure 7). Of the 4% who said they helped their family and communities in other ways, most referred to collecting water and wood, doing the laundry, and doing other forms of work to bring money into the home (principally rural work and hawking).

FIGURE 7: HOW DO YOU HELP YOUR FAMILY AND COMMUNITY? (N=449)

HOW DO YOU HELP YOUR FAMILY AND COMMUNITY?

- 0%
- 1%
- 19%
- 11%
- 61%
- 1%
- 3%
- 4%

Legend:
- CARING FOR OTHERS
- COMMUNITY ORGANISATION
- GOING TO SCHOOL
- PAID WORK
- WORK IN THE HOME
- OTHER
- NO ANSWER
- DON'T KNOW

Adolescent girls in Njimtillo, Ndollori and Zarmari in Nigeria were typically charged with caring for younger siblings in addition to household chores such as collecting water, cooking food, cleaning and washing clothes. The role of boys in these communities was more closely linked to running errands, farming and engaging in livelihood activities. This gendered division of labour was also associated with food insecurity (as outlined in the following section 2.1.7) with adolescent boys having access to income through livelihood activities and, as a result, able to supplement the food they receive at home.

Adolescent girls, in Zarmari in particular, highlighted the challenges of water scarcity associated with their role in collecting water for the household and linked this to their physical safety and well-being. The need to travel significant distances to collect firewood and water was also highlighted as putting girls at risk of harassment and physical violence. Adolescent girls in Ngouma, Cameroon also described their role in caring for elderly family members.

While adolescent girls clearly contribute to the coping capacity of families in times of crisis, this contribution in the form of household and care labour was significantly undervalued by parents and community members compared to male adolescents' engagement in paid employment and livelihood activities.

Girls help their mothers in the community. This has changed because we are no longer allowed to go to the bush for any activity.
ADOLESCENT GIRL, 18 YEARS, ZARMARI, NIGERIA

I wash clothes for my mother and my younger ones. I fetch water, hawk and take care of my younger ones.
ADOLESCENT GIRL, 13 YEARS, KALERI, NIGERIA

Yes, I do most of the house chores e.g. cooking, sweeping and washing and it is different from the boys.
ADOLESCENT GIRL, 13 YEARS, GAHARA, NIGERIA

2.1.7 Food security and Nutrition

Adolescent girls and their communities detailed how the violence associated with armed groups has destroyed their access to farming, both as an income generation activity and for subsistence purposes and how they are now forced to use their limited resources to purchase their food at the market.

Food insecurity is having a substantial impact on the whole community throughout the Lake Chad Basin. However, adolescent girls are affected in different ways and deploy distinct coping mechanisms in response to the crisis. Adolescent girls are more likely than adolescent boys to be shut out of formal employment opportunities and therefore to engage in informal and unregulated labour. They are also more likely to carry the burden of collecting and selling food.

62% of all the girls surveyed had at some point in the last four weeks gone to bed hungry due to a lack of food (see Figure 8), and 68.3% had worried that their household did not have enough food. When asked about the biggest change

in their lives since the crisis, adolescent girls in Bahuli, Nigeria highlighted hunger and malnutrition as their main concern.

FIGURE 8: IN THE PAST FOUR WEEKS, DID YOU GO TO SLEEP FEELING HUNGRY BECAUSE THERE WAS NOT ENOUGH FOOD TO EAT? (N=449)
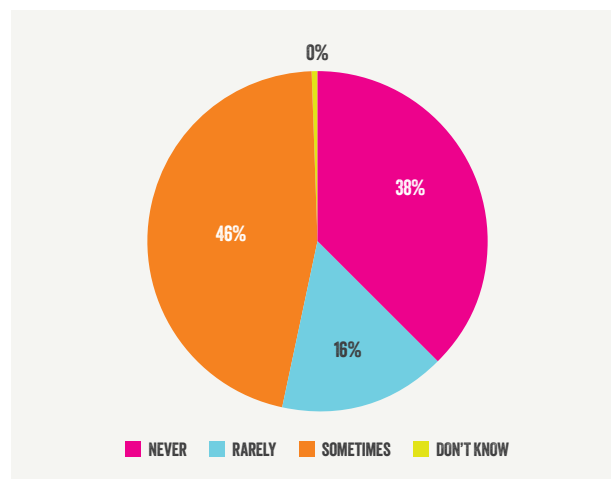
Adolescent boys in Ndollori in Nigeria highlighted how scarcity of food was impacting the whole household. However, they also mentioned that an ability to engage in livelihoods and earn some money meant adolescent boys are able to go outside the household for meals, as mentioned under 2.1.5. Adolescent boys' greater access to formal employment opportunities allows them greater earning capacity and greater purchasing capacity for food.

Older adolescent girls detailed a greater impact of the high levels of food insecurity than younger adolescents, with respondents in Ndollori, Zarmari and Njimtillo in Nigeria in particular highlighting how they cope with limited food by allowing younger children to eat first, with older adolescents and adults eating only what remains. Adolescent girls in Zarmari report eating only one or two meals a day and that they almost always go to sleep hungry. They described drinking water to fill their stomachs and going to bed as the mechanism for coping with the lack of food.

[We eat] beans from market since our farms are already burnt by the Boko Haram, whenever we have money.
FEMALE PARENT, NDOLLORI, NIGERIA

Sometimes we go to bed hungry.
ADOLESCENT GIRL, 18 YEARS, NJIMTILLO, NIGERIA

Younger ones eat, older ones drink water and go to bed.
ADOLESCENT GIRL, 18 YEARS, NJIMTILLO, NIGERIA

Lack of a livelihood has made parents send their daughters into trade in order to get food for the house.
MALE GUARDIAN, NJIMTILLO, NIGERIA

Not everyone has access to food in the household because we cannot go to the farm due to the insurgency.
MALE GUARDIAN, NJIMTILLO

I want (an NGO) to help my parents with a business so they can earn money and be able to buy us enough food to eat.
ADOLESCENT GIRL, 13 YEARS, KALERI, NIGERIA

... children eat while older ones like us may stay hungry and drink water.
ADOLESCENT GIRL, 18 YEARS, KALERI, NIGERIA

When I was in Damboa we had enough to eat and care for ourselves but now it has changed due to the insurgency.
ADOLESCENT GIRL, 14 YEARS, MISHERI, NIGERIA

I just drink water and go to sleep or eat the remnants in the pot.
ADOLESCENT GIRL, 14, MISHERI, NIGERIA

... because the food is limited... it's only given to my younger ones. My elder sister and I will just be patient and stay without eating.
ADOLESCENT GIRL, 18 YEARS, MISHERI, NIGERIA

Women at a relief aid distribution point in Nigeria.
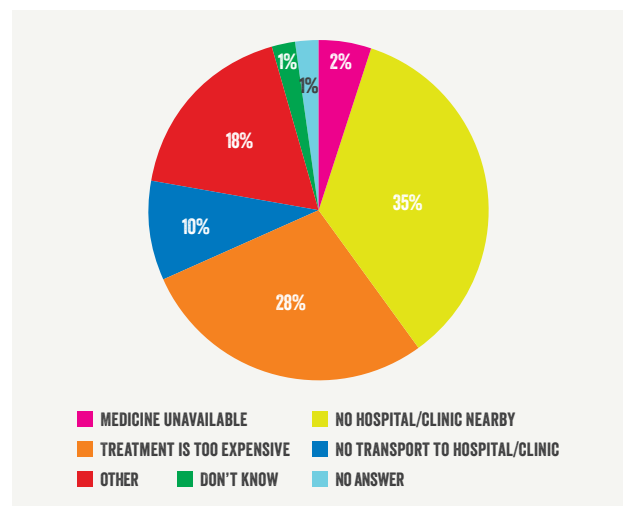(©Plan International)

2.1.8 Access to healthcare

2.1.8.1. Physical Health

Across the Lake Chad Basin there remain barriers for adolescent girls in accessing appropriate health care. The majority of girls surveyed (82.37%) have accessed health care, though often the cost of visiting a doctor and the cost of medicine limits this access.

For those unable to access healthcare at all, the primary reasons were that there was no health centre or hospital nearby and that treatment is too expensive (see Figure 9). This varied significantly by research site, however; eight of the ten girls (80%) in Mubi, Nigeria who do not access health care are prevented from doing so because there is no health centre or hospital in their location. The most common reason for not accessing healthcare in Cameroon is that the treatment would be too expensive, with 16 or 36 adolescent girls (44%) who do not access healthcare in Cameroon giving this reason. Other reasons given for not accessing health care were that medicines were not available, insurgent groups such as Boko Haram resulted in medical services leaving the area, and lack of transport to get to the health centre or hospital.

Despite this, 52.68% of adolescent girls stated they had experienced a major injury or disease in the last year. The most commonly reported disease by adolescent girls was Malaria. HIV was also raised as a health issue for adolescent girls, although there was clearly significant stigma around the disease and community leaders often linked it to promiscuity and sex outside of marriage.

FIGURE 9: IF YOU DON'T ACCESS HEALTHCARE, WHY NOT? (N = 95)

- **MEDICINE UNAVAILABLE** — 2%
- **TREATMENT IS TOO EXPENSIVE** — 28%
- **OTHER** — 18%
- **NO HOSPITAL/CLINIC NEARBY** — 35%
- **NO TRANSPORT TO HOSPITAL/CLINIC** — 10%
- **DON'T KNOW** — 1%
- **NO ANSWER** — 1%

We go to general hospital in town. We don't see doctors because it is very difficult to see them and we don't have money.
ADOLESCENT GIRL, 13 YEARS, NDOLLORI, NIGERIA

It's hard; my dad doesn't have money so we can't afford drugs.
ADOLESCENT GIRL, 15 YEARS, KALERI, NIGERIA

It's hard because we don't have money to settle the hospital bills.
MALE PARENT, NJIMTILLO, NIGERIA

There are no free medical centres in the community. We do go to a far place to get free medical assistance in case that the condition is critical.
MALE GUARDIAN, ZARMARI, NIGERIA

I buy paracetamol from the pharmacy, or feldin when I have cramps, because going to hospital is expensive.
ADOLESCENT GIRL, 18 YEARS, KALERI, NIGERIA

It's difficult (to access healthcare) because we must go very early because it's always crowded.
**ADOLESCENT GIRL, 10 YEARS, ABOUNGA (TAM), NIGER**

2.1.8.2 Mental Health

Adolescent girls and their communities highlighted the impact the ongoing conflict and food crisis is having on their mental health. Of those surveyed, 24.33% stated they felt sad on most days, with a further 39.73% stating they felt 'okay'. While adolescent girls broadly did not report accessing mental health services, some community members did highlight the availability of services such as 'listening centres' and social workers.

Adolescent girls were more likely to list their family and peers as mechanisms for coping with their challenges and mental health concerns, with limited help-seeking behaviour displayed for mental health issues.

FIGURE 10: ON MOST DAYS HOW DO YOU FEEL? (N=449)

HAPPY 33% SAD 24% OK 40% OTHER 3%
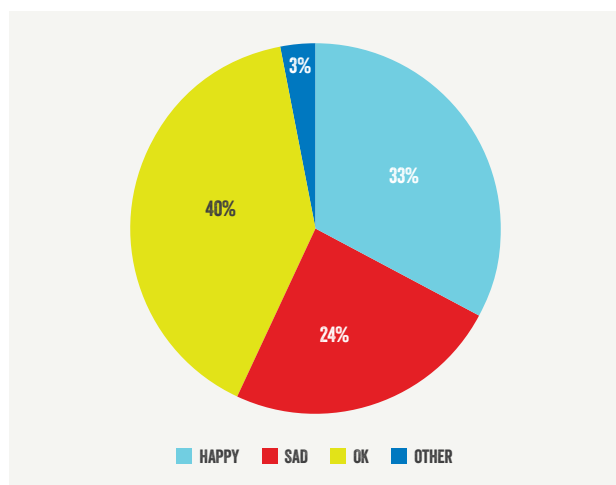
2.1.8.3 Sexual and Reproductive Health and Rights (SRHR)

Significant barriers to accessing and realising their sexual and reproductive health and rights (SRHR) remain in place for adolescent girls. A lack of availability of information, inaccessibility or inappropriateness of health services, and financial barriers prevent adolescent girls from accessing information and services on contraception and sexual health in particular. While adolescent girls were reluctant to speak about the topic, or to discuss how much they knew about SRHR, across all research sites, they requested access to more information on SRHR highlighting CSOs and health professionals as their preferred source from which to receive the information.

10.94% of those surveyed had been pregnant, with Niger having the highest rate at 18.24% overall and increasing to 36% for older adolescents (aged 15-19 years). Of those that had been pregnant, 15 and 16 years was the most common age for first pregnancy across all research sites, again reinforcing what adolescent girls tell us about limited access to secondary education and the link between this, CEFM and early pregnancy. The 2013 Nigerian DHS survey further supports these figures, with the rate at 23 percent nation-wide of 15-19 years who have begun child-bearing with higher rates in the North West (36 %) and North East (32%).[57]

Adolescent girls in Goulfey and Blablin in Cameroon, as well as in all research sites across Niger, described how girls found out about sexual and reproductive health from their husbands after they were married and that husbands remained the main source of information on contraception.

Lack of SRHR also leads to other harmful practices for adolescent girls. For instance, early or unwanted pregnancy was also linked to the practice of CEFM, with adolescent boys in Krouang in Cameroon describing how fathers married their daughters early as a protective mechanism for fear of early pregnancy and the stigma of being pregnant outside of wedlock.

The lack of access to SRHR for adolescent girls is a particular threat to their security, with the Lake Chad Basin having one of the highest ratios of maternal deaths anywhere in the world. At 773.4 maternal deaths for every 100,000 live birth, the rate is high even compared to many other countries in protracted crisis in sub-Saharan Africa.[58]

Niger has the world's highest fertility rate, with an average of 7 children per woman based on 2017 figures. The Lake Chad Basin countries overall have the lowest contraceptive prevalence, averaging about 12 per cent, compared with 24

per cent for other countries suffering a protracted crisis. The fertility rate of adolescent girls in the countries of the Lake Chad Basin is on average 133 live births per 1,000 adolescent girls, which when combined with barriers to accessing health services, the high rates of displacement and low levels of birth attendance, is a critical threat to the lives of adolescent girls in the region. [56]

When a girl reaches the age of 14 and above, she will have a boyfriend. It is very easy for the girls to get pregnant because she does not have enough knowledge about sex and her menstrual cycle.
ADOLESCENT GIRL, 16 YEARS, GAHARA, NIGERIA

Difficulty in child birth because of our age.
ADOLESCENT GIRL, 17 YEARS, NJIMTILLO, NIGERIA

Main health problems that girls have since the crisis began – they got pregnant, some even got diseases. It all happened because of the crises.
ADOLESCENT GIRL, 16 YEARS, GAHARA, NIGERIA

We don't have work, giving birth is a problem because we don't have hospitals in the community.
MALE GUARDIAN, NJIMTILLO, NIGERIA

Early sexuality which results in early pregnancy, AIDS, STDs.
CSO, MINJEC, CAMEROON

I think they find out about it during their relations with their husband.
ADOLESCENT GIRL, 19 YEARS, BLABLIN, CAMEROON

We find out from our male friends and also in marriage.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

The father [makes the decision about marriage] because they refuse the girl to be pregnant at home.
ADOLESCENT BOY, 11 YEARS, KROUANG, CAMEROON

2.1.8.4 Menstrual Hygiene Management

Economic barriers were the main reported limitation on access to menstrual hygiene products, with adolescent girls in Ndollori in Nigeria highlighting how the deteriorating economic situation and impact of the crisis has further limited their access to appropriate menstrual hygiene management.

Adolescent girls in Garin Wanzam in Niger detailed how they withdraw from their communities and don't engage in regular activities whilst they are menstruating. Others in Cameroon spoke of the challenges of accessing school whilst menstruating and a limited access to appropriate sanitation facilities.

Information about menstrual hygiene management was largely gained from mothers, aunties and older siblings with adolescent girls expressing a desire for more information from CSO and health professionals.

We sometimes hide while we are menstruating to avoid being frowned upon.
ADOLESCENT GIRL, 16 YEARS, GARIN WANZAM, NIGER

I cannot always access sanitary items; before I could always buy it. Now, no money.
ADOLESCENT GIRL, 15 YEARS, KALERI, NIGERIA

... there's no money to buy sanitary pads.
ADOLESCENT GIRL, 14 YEARS, MISHERI, NIGERIA

Amatou*, 14, was sexually assaulted after she arrived in Cameroon as a refugee from Nigeria.
(©Plan International)

DIFFERENCES BETWEEN RESEARCH SITES

As a regional crisis impacting four countries, the Lake Chad Basin crisis has had a significant impact upon the lives of adolescent girls in the affected areas. While there are a number of areas of insecurity that impact adolescent girls across the region, there are of course distinct contexts in each country. These contexts vary as a result of differing social, economic, cultural and legislative factors as well as the various manifestations of the crisis that impact how adolescent girls experience insecurity and the way in which they navigate threats. Of course, all interventions and engagements need to be context-specific as well as responsive to the particular needs of those affected. This section, therefore, further draws out some of the core differences between Nigeria, Niger and Cameroon.

NIGERIA

Adolescent girls in Nigeria were more likely to report harassment and abuse, as well as negative coping mechanisms such as survival sex:

Within Nigeria there was a difference between sites, with adolescent girls in Mubi feeling substantially less safe at home than those in other sites. Younger adolescents in both sites in Nigeria also reported feeling less safe at home than their older peers.

Survival sex was more commonly reported by adolescent girls and community members in Nigeria, who outlined adolescent girls engaging in relationships and swapping sex for food, money and other items.

Adolescent girls in Nigeria reported greater access to decision-making about their own lives and influence on family and community decisions:

Adolescent girls in Maiduguri in Nigeria reported greater involvement in decisions about their lives than in all other locations. Across Nigeria adolescent girls also reported greater influence on decision making in the family and community with 54.67% of all those surveyed stating they could at least sometimes influence decision-making, compared with 36.61% across all other sites.

Adolescent girls in Nigeria were more likely to report experiencing school-related GBV and to fear violence and harassment related to accessing education:

Adolescent girls in Mubi in Nigeria were the most likely to report unwanted touching and kissing, with a higher proportion of incidents occurring at school. Adolescent girls detailed how they changed their behaviour and limited their movement in public spaces in response to this harassment and abuse.

The fear of kidnapping and attacks linked to accessing education was most prevalent among adolescent girls in Bahuli in Nigeria, with one girl, for example, stating "even going to school, we do that in fear" (Adolescent girl, 16 years).

Adolescent girls in Nigeria were the most likely to be engaged in work outside the home:

Older adolescent girls in Nigeria were more likely than adolescent girls in other parts of the Lake Chad Basin to work outside the home, either in formal employment or informal livelihood activities with 62.50% of 15-19-year-olds working outside the home.

NIGER

Adolescent girls in Niger are more likely to marry young, to have limited influence on decision making about when and who they will marry, and more likely to experience early pregnancy:

In Niger, adolescent girls were less likely to attend any form of education and more likely to be married before the age of 18.

Adolescent girls in Niger are far more likely to be married – compared to 15% of all girls surveyed across the three countries who are married, 48% of those surveyed in Niger aged 15-19 were currently or previously married (and 4% of those aged 10-14 were or had been married).

Adolescent girls in Niger reported less influence in decisions on when and who they will marry than girls in all other locations, with only 12.9% stating they would make the decision. Most girls said their parents would make the decision about who they would marry; 43% stated their father would make this decision, and 30.11% said it would be their mother.

Compared to all other locations, Niger had the highest rate of early pregnancy at 18.24% overall and increasing to 36% for older adolescents (aged 15-19 years).

Adolescent girls in Niger describe the importance of peer support and peer leadership:

Adolescent girls in camps for displaced persons in Niger were the only adolescent girls interviewed that described having peer leaders who would take their concerns to community leaders and try and resolve conflict. They stated that this was useful for them, and that they went to these peer leaders when they were feeling negative about aspects of their lives.

Adolescent Girls in Niger had the lowest rate of school attendance and continuity in education:

The sites in Niger saw the biggest divergence in school attendance between younger and older adolescent girls with 65.75% of girls aged 10-14 years attending school, and just 29.33% of those aged 15-19 years attending school, coinciding with high rates of CEFM.

While high rates of displacement were reported by those surveyed across all research sites, adolescent girls in Niger reported the highest levels of displacement, with 58.11% having been displaced in the last 5 years.

CAMEROON

Adolescent girls felt the least empowered on decision making in Cameroon:

Adolescent girls in Cameroon reported less influences in decision-making about their own lives than their counterparts in other locations, while 68% also reported never having influence on decisions in their families or communities

Adolescent girls in Cameroon were more likely than in other locations to have experienced a serious illness or injury in the last year, but the least likely of all locations to have accessed healthcare:

The most common reason for not accessing healthcare in Cameroon is the cost that would be incurred, with 44% of respondents across Cameroon saying economic factors are the most significant barrier to healthcare.

Adolescent girls in Cameroon were more likely than in other areas to experience family separation:

Cameroon had the highest rate of family separation, with siblings, grandparents and other relatives the primary alternative carers for adolescent girls.

OTHER INFLUENCING FACTORS

In addition to differences in experiences across locations it should also be recognised that adolescent girls are not a homogenous group and experiences varied significantly depending on a number of factors such as age, experience of family separation, experience of displacement, and disability, among others.

YOUNGER ADOLESCENT GIRLS:

- Younger adolescents in the age group 10-14 years typically felt less safe at home than older adolescent girls aged 15-19 years.
- Adolescent girls aged 10-14 years were far less likely than older adolescents in all locations to be married, with only 1.3% in Cameroon and 4.1% in Niger reporting they were or had previously been married, and none in Nigeria. This corresponds with national rates of early and forced marriage which show a significant increase in marriage rates amongst older adolescent girls (28% of girls in Niger are married before 15, increasing to 78% for girls married before they are 18).
- Younger adolescents in both sites in Nigeria also reported feeling less safe at home than their older peers. Displaced adolescent girls in Sayam Camp, N'gourtouwa and Garin Wanzam in Niger detailed how they flee their homes due to fighting, spend the night hiding out in the bush and return when they can no longer hear the shooting.

OLDER ADOLESCENT GIRLS:

Older adolescent girls detailed a greater impact from the high levels of food insecurity than younger adolescents, with respondents in Ndollori, Zarmari and Njimtillo in Nigeria in particular highlighting how they cope with limited food by allowing younger children to eat first, with older adolescents and adults eating only what remains. Adolescent girls in Zarmari report eating only 1 or 2 meals a day and that they almost always go to sleep hungry. They described drinking water to fill their stomachs and going to bed as the mechanism for coping with the lack of food.

EXPERIENCE OF FAMILY SEPARATION:

The presence of fathers was listed as a key factor in instilling a sense of safety by adolescent girls. This was particularly mentioned by respondents in Nigeria, while, interestingly, this site had the lowest rate of family separation across all sites.

EXPERIENCE OF DISPLACEMENT:

Adolescent girls experiencing displacement across the Lake Chad region are particularly likely to fear physical violence, have limited access to education and feel less optimistic about their futures.

DISABILITY:

While the research participants did not discuss the specific challenges faced, it is known that disability further compounds the vulnerabilities and insecurities that adolescent girls suffer, particularly in places where there are negative attitudes towards those who are disabled.

An adolescent girl from Niger.
(©Vincent Tremeau)
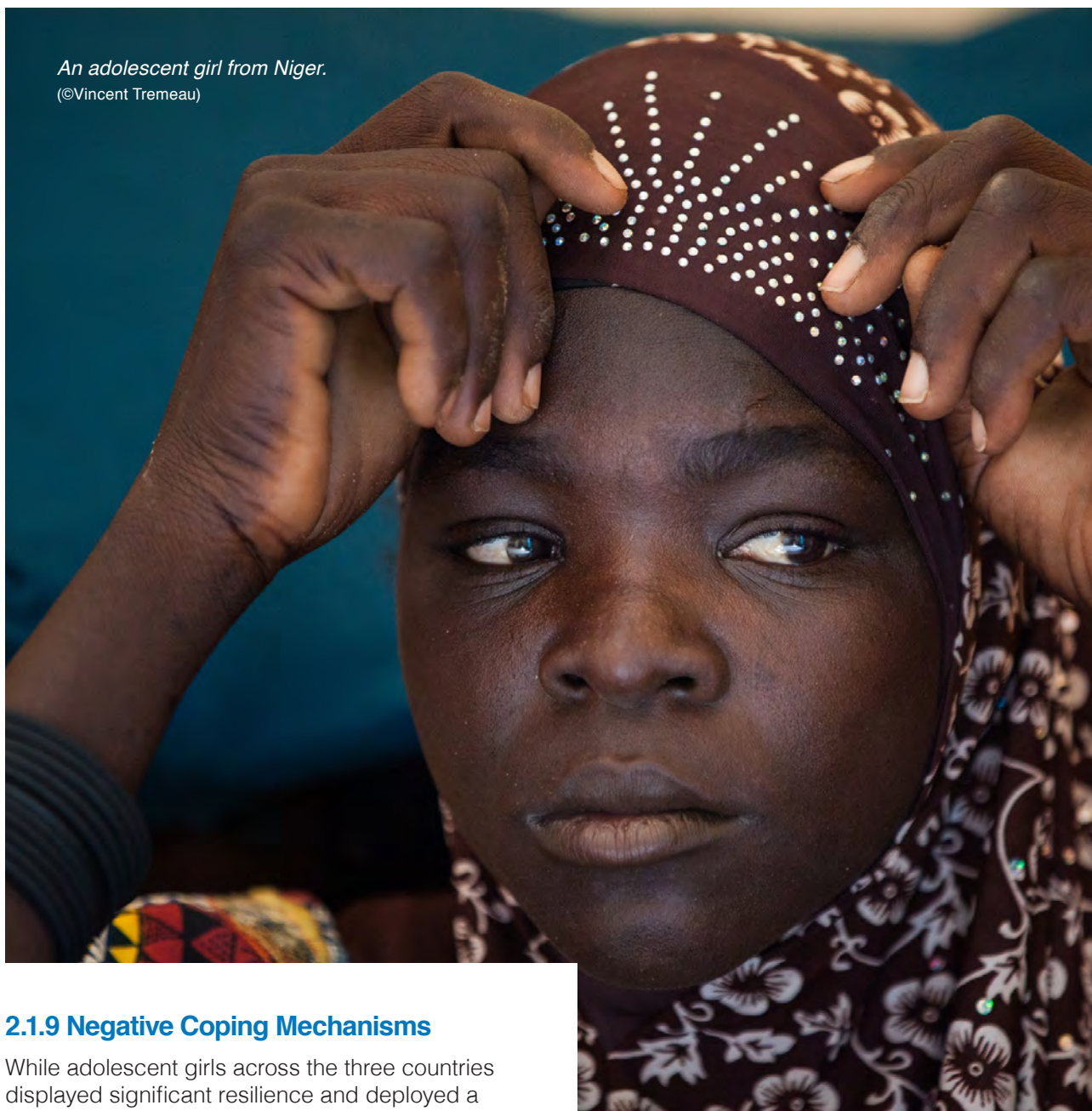
2.1.9 Negative Coping Mechanisms

While adolescent girls across the three countries displayed significant resilience and deployed a number of positive coping mechanisms in the face of the protracted crisis, as outlined below, there was some evidence that at times they are also forced to resort to negative coping mechanisms. Few girls were willing to speak openly about negative coping mechanisms, although some highlighted the practice of survival sex, limiting food intake and CEFM within their communities. In several sites in Nigeria and in Goulfey and Blablin in Cameroon, respondents mentioned girls being forced to have sexual relationships with men in order to survive, while others referred to girls being forced to marry in order to respond to the current economic and food crisis. Respondents also referred to letting younger members of the family eat before they did, given food shortages, as mentioned earlier.

Parents and community leaders, along with adolescent girls, outlined a deteriorating economic situation which was seemingly driving the need of some adolescent girls to resort to these negative coping mechanisms. When access to education and livelihood opportunities are closed to them there is a substantial risk of further resorting to these negative coping mechanisms. These concerns are pressing and require swift, comprehensive action to address both the sources of insecurity and the results. It is also important that programmatic interventions also recognise and utilise girls' agency, knowledge and skills, alongside the constructive mechanisms they have developed to cope with the challenges they face.

2.2. SITES OF RESILIENCE

Adolescent girls face substantial and multiple forms of insecurity. However, they can also be resilient, and have developed coping mechanisms and strategies which have helped them to navigate the challenges of the developing crisis, as outlined below. Significantly, adolescent girls have agency and have not only developed mechanisms and strategies to help themselves in this crisis but have also helped others. The experience and skills adolescent girls in Lake Chad have acquired, as a result of their experience and their efforts to navigate the crisis and help others, could be utilised to inform more impactful programmatic interventions, and efforts to build security and stability in the region.

2.2.1 Peer Networks, Community Structures and Safe Spaces

2.2.1.1 Peer support networks

Adolescent girls highlighted the support they receive from their peers as key to their capacity to cope and to remain positive about the future. Although across the research sites adolescent girls feared harassment and abuse from adolescent boys, they listed their siblings and other adolescent girls as largely positive influences on their lives.

Adolescent girls in camps for displaced persons in Niger described having peer leaders who would take their concerns to community leaders and try and resolve conflict. They stated that this was useful for them, and that they went to these peer leaders when they were feeling negative about aspects of their lives. Where such structures don't exist, there is scope in investigating how they, or the support they can provide, can be replicated.

2.2.1.2 Role Models and Female Leaders within the community

Role models and female leaders within their own communities provide inspiration for adolescent girls, acting as a source of resilience. Adolescent girls described females in their lives, such as older sisters engaging in formal employment, aunties with leadership roles in the community and others, as a source of hope in their lives.

While adolescent girls were often unable to provide examples of their own leadership, they were ambitious and strived to be leaders in many spheres of their lives. They highlighted attainment in education as well as livelihood activities as areas that they were proud of their achievements.

2.2.1.3 Safe Spaces

Some of the adolescent girls were able to access formal safe spaces facilitated by CSOs and clearly highlighted these as mechanisms that contributed to their sense of well-being and formed part of their safety net in response to the ongoing crisis. When asked where they would go to address concerns they had, several adolescent girls highlighted safe spaces and similar initiatives in their areas.

The lack of a safe space available to many adolescent girls in their everyday lives, with violence permeating their homes and schools, has meant that formal safe spaces and the positive influence of peer networks are particularly important support mechanisms for adolescent girls.

Further to this, the desire expressed by adolescent girls to learn more about SRHR, attend vocational and skills-based education programmes, and receive additional livelihood support from NGOs, places formal safe spaces at the centre of the humanitarian support for adolescent girls.

2.2.2 Agency and Influence

Over half of all girls surveyed (51.79%) stated they were never able to make decisions about their own lives. Adolescent girls felt the least empowered on decision-making in Cameroon, with those in Maiduguri in Nigeria reporting greater involvement in decisions about their lives. Although with some exceptions, adolescent girls were largely shut out of family and community decision making and had little recourse for making their voices heard.

However, some girls did feel they could influence decisions about their own life. Many also displayed agency in their hopes and attitudes for their futures. Some adolescent girls spoke of their achievements and feelings of agency and influence in the ways they sought to assist younger children and peers. Adolescent girls in some instances displayed leadership in speaking out and seeking to combat CEFM:

"I helped a girl in an early marriage as she was only 14 years old."
ADOLESCENT GIRL, 18 YEARS, GARIN WANZAM, NIGER

Others reported mistreatment and child abuse to community leaders:

"I helped a mistreated child by taking him to the village chief."
ADOLESCENT GIRL, 15 YEARS, GARIN WANZAM, NIGER

Although limited, some community members did recognise and support the agency of adolescent girls, highlighting their role as peace-builders and the opportunities for leadership among peers. For instance, one community member in a focus group discussion said:

"The advice I can give to organisations is to increase and improve efforts to tackle health issues of girls because they are the promoters of peace in the society."
COMMUNITY MEMBER, MISHERI, NIGERIA

2.2.3 Optimism

Many girls demonstrated great fortitude and optimism, perhaps surprising given the challenges and sustained insecurities they faced. Displaced adolescent girls across the varying contexts often expressed an optimism and desire to go back to their home villages. Although many recognised the security situation at the present moment didn't allow this, they expressed a hope for the future that they would return.

Optimism for the future and their sense of security in their prospects was predominantly tied up in two aspects of their lives for adolescent girls; their ability to earn an adequate livelihood and their marriage prospects. Adolescent girls generally regarded an adequate livelihood as an informal livelihood or engagement in small business, rather than a professional career or educational attainment.

2.2.4 Livelihood Activities

When asked about achievements they were proud of, many adolescent girls pointed to their involvement in small scale livelihoods and their contribution to their households through these activities, such as selling items in the market. Of course, many of these accomplishments were valued because of the direct, positive value they were to the family, often in dire need of food and income. Beyond this, however, girls very often noted their caring responsibilities, for younger siblings or other members of the family, as their greatest achievements. It is interesting to note that caring responsibilities are framed both as an impediment and source of resilience for girls. This eagerness to help others and the sense of attainment it can bring is a source of resilience for families and communities, as well as the girls themselves. Boys also noted their contribution to household income, although often through different activities such as building work and carpentry, and caring for family members among their most notable achievements.

Although adolescent girls have limited access to formal livelihood opportunities, they displayed a desire and aptitude for entrepreneurial activities. They outlined ideas for small businesses, demonstrated knowledge of business practices and expressed a desire to learn more. Adolescent girls requested support for business capital and small loans, alongside technical training and skills on running a business.

This thirst for knowledge, desire to contribute to their families and communities, and aptitude for entrepreneurship – as well as optimism for the future, as mentioned above – not only contributes to building the girls' own resilience, but also has the potential to significantly and positively impact their communities. Moreover, these skills and aptitudes could be utilised through programmatic interventions to build the resilience of communities and pave the way towards a more secure and prosperous future.

2.2.5 Education

Education, both past attendance and achievements as well as ongoing access, were highlighted by adolescent girls as contributing significantly to their resilience and capacity to cope both throughout the protracted crisis as well as in times of acute crisis. Across all research sites, adolescent girls highlighted continuing education, whether secondary education or vocational education, as core to their future well-being.

Significantly, the ability to engage in either secondary or vocational education was also substantially linked to feelings of optimism adolescent girls had for their futures.

[My biggest achievement is] doing well in school and going to higher grades.
ADOLESCENT GIRL, 13 YEARS, BLABLIN, CAMEROON

[My biggest achievement is] taking care of my younger brothers and my grandparents.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

My father gave me a plot of land and I grew beans and I got a bag that I sold and I bought myself lots of things.
ADOLESCENT GIRL, 14 YEARS, MORA, CAMEROON

I am proud of being enrolled in school here in Kaleri. It's one thing I am always happy and proud of.
ADOLESCENT GIRL, 18 YEARS, KALERI, NIGERIA

What makes me proud of myself is having been able to help my parents to be able to flee during the attacks and continue to come here.
ADOLESCENT GIRL, 18 YEARS, MINAWAO CAMP, CAMEROON

I gave my sister a gift and she was so happy and thanked me, it makes me proud.
ADOLESCENT GIRL, 14 YEARS, MISHERI, NIGERIA

I'm proud when I sell a lot and I have money to help my mother.
ADOLESCENT GIRL, 13 YEARS, MINAWAO CAMP, CAMEROON

I'm proud of having helped my little brother to grow up when my mother died.
ADOLESCENT GIRL, 13 YEARS, MINAWAO CAMP, CAMEROON

2.4 ENGAGEMENTS WITH THE HUMANITARIAN COMMUNITY

The top areas that adolescent girls highlighted they would like greater support from humanitarian actors was in access to education, school fees as well as support for uniforms, books, and school materials. Some girls also highlighted the challenge of distance in attending school and spoke of the need for support for schools closer to them or for transport. Girls also highlighted food as a key area requiring support from humanitarian actors.

As well as support to attend formal primary and secondary education, there was also the request for vocational skills and adult education programmes linked to livelihoods. Adolescent girls highlighted the value of activities such as soap making, sewing and tailoring as well as the provision of loans and support for starting a business. Several of the adolescent girls in Nigeria also outlined how they were engaged by the humanitarian community as volunteers and enumerators. Across all research sites, adolescent girls and their communities were unaware of any organisations focusing on girls with disabilities, although more than half of the girls surveyed had experienced a major injury or illness in the last month.

The majority of adolescent girls across all research sites stated that they had not been consulted by the humanitarian community on their needs. Those that had were most commonly consulted as a household, with their parents speaking about their needs. Adolescent girls in camp contexts were more likely than other adolescent girls to interact with the humanitarian community, to be consulted on their needs and to engage in activities such as learning programmes, safe spaces, and receive food and other support.

Reflecting the sense of insecurity and the threat of physical violence and GBV to adolescent girls, they also expressed to the international community a desire for greater physical safety, including security services provision and protection for freedom of movement.

Girls living in refugee camp in Diffa region of Niger.
(©Plan International)

Younger adolescent girls in particular also recognised the need for support for their parents and the prospective impact of this on their own well-being. In particular, they spoke of the need for livelihood opportunities and vocational training for their parents that would then enable them to afford to send them to school.

Community leaders in Misheri linked the prospects of adolescent girls to the well-being of their entire communities. They highlighted the need for the humanitarian community to support the health and well-being of girls, saying that humanitarian actors should "improve efforts to tackle health issues of girls because they are the promoters of peace in the society," (Community leader, Misheri, Nigeria).

A girl skips at a Plan International child friendly space in Adamawa State, Nigeria.
(Hartmut Schwarzbach / argus)

[To support girls like me, humanitarian organisations could] provide us with soaps and detergent, information on how to stay healthy, enough drugs and good foods.
ADOLESCENT GIRL, 13 YEARS, MISHERI, NIGERIA

... give us sewing machines [and…] notebooks and books to learn to read.
ADOLESCENT GIRL, 14 YEARS, BLABLIN, CAMEROON

... invest in small trade, pay for our studies, give out machines to those who know how to sew.
ADOLESCENT GIRL, 16 YEARS, MORA, CAMEROON

... train those who no longer go to school to do something else and encourage young people to study by helping their parents to undertake other small jobs.
ADOLESCENT GIRL, 18 YEARS, MORA, CAMEROON

... give us work and food to eat.
ADOLESCENT GIRL, 18 YEARS, MOZOGO, CAMEROON

... help people, especially orphans and widows. Give them something to do or learn, like a trade.
ADOLESCENT GIRL, 19 YEARS, GAHARA, NIGERIA

They must help us go to school and to find a little money.
ADOLESCENT GIRL, 13 YEARS, CAMP MINAWAO, CAMEROON

They should teach us some handiwork like soap making, knitting and tailoring. We should be educated on sex and its dangers.
ADOLESCENT GIRL, 16 YEARS, GAHARA, NIGERIA

We'd love to keep going to school.
ADOLESCENT GIRL, 17 YEARS, NGOUMA, CAMEROON

For girls my age, people must help us by giving us school supplies and teaching us about girl things.
ADOLESCENT GIRL, 14 YEARS, MORA, CAMEROON

We need people who will teach us how to read and we need books in our school and more teachers.
ADOLESCENT GIRL, 14 YEARS, GAHARA, NIGERIA

Enrol us in schools, provide skills acquisition, provide basic amenities (hospitals, electricity, water) so as to help us live our lives better and easier.
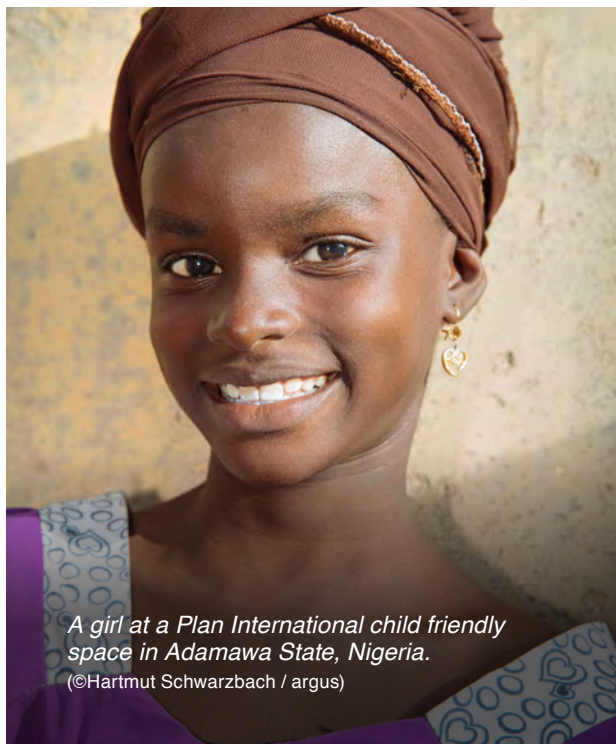**ADOLESCENT GIRL, 13 YEARS, MISHERI, NIGERIA**

I need soap, detergent, money to buy clothes so as to make going to school easy for me.
ADOLESCENT GIRL, 13 YEARS, KALERI, NIGERIA

3. CONCLUSION AND RECOMMENDATIONS

An adolescent girl from Niger.
(©Vincent Tremeau)

A girl at a Plan International child friendly space in Adamawa State, Nigeria.
(©Hartmut Schwarzbach / argus)

3.1 CONCLUDING COMMENTS

The protracted crisis in Lake Chad presents adolescent girls with numerous challenges. Not least among these are the various and extensive forms of violence they are subject to in all areas of their life, within and outside the home, as well as heightened levels of harassment and other forms of insecurity. The economic crisis, and associated food and water crises, have exacerbated the further insecurities that girls face, including sexual violence, CEFM (and the health risks associated with early pregnancy), being forced to withdraw from school, and the burden of additional household chores. Certain groups of girls are particularly vulnerable to these threats, including those separated from their parents.

Nonetheless, this research has also shown that these girls have great resilience, not least in withstanding these threats and insecurities. They also continue to hope for a brighter future, continue to want to help their community, and continue to aspire to better themselves through education and valued employment. This research has shown, however, that often the unique vulnerabilities of adolescent girls and their ability to affect change is overlooked. Oftentimes girls (particularly girls outside camps) are not consulted about their needs and experiences by the humanitarian community, and even less frequently called upon to inform programmatic interventions or provide insights into their broader communities and the possible road ahead.

Girls also continue to hope for a brighter future, continue to want to help their community, and continue to aspire to better themselves through education and valued employment

This report has adopted a grounded, feminist, rights-based, intersectional and adolescent-centric methodology to construct an understanding of the current crisis facing adolescent girls in the Lake Chad Basin. Consequently, this report has attempted to narrate the crisis from the perspectives of adolescent girls. It has not sought to impose the priorities of the humanitarian sector onto adolescent girls, nor has it sought an explicitly quantitative account of the experiences of adolescent girls. Rather, it has sought to amplify the diverse voices of adolescent girls in response to questions regarding what challenges they face, how they cope with these challenges, and what their hopes are for the future.

The research has found that despite the enormity of security challenges facing adolescent girls, they have developed coping mechanisms, strategies and capacities to help them navigate the on-going crisis, and potentially benefit the lives of their families and communities. Adolescent girls demonstrate great resilience, entrepreneurial skills, a commitment to hard work, a desire to help others, optimism for the future, insightfulness, and fortitude – all skills and attributes which are essential for any society if it hopes to transition towards a peaceful, prosperous and secure future. It is, therefore, essential to the security and well-being of adolescent girls in the Lake Chad Basin that the specific security challenges they face and the specific needs they have are addressed, and that their capacity, knowledge and experiences inform policy and programmatic interventions. This will not only enhance the effectiveness of these programmes in meeting the needs of adolescent girls, it will also enable the girls to better contribute to a brighter future for their own families and communities.

The recommendations that follow respond to the need to both address the vulnerabilities of adolescent girls as well as recognise and respond to the capacity and agency that they possess. The recommendations intend to highlight the priorities identified by girls and incorporate their suggestions for change.

3.2 RECOMMENDATIONS

Based upon these findings, the following recommendations are made:

RECOMMENDATIONS

INCLUSION

Promote and resource efforts to encourage the systematic participation of adolescent girls in all decisions that affect their lives to ensure their diverse needs and fundamental human rights are met, recognising that adolescent girls are not a homogenous whole, but have a diversity of experiences, skills, hopes and needs:

- Invest in and deliver specific programmes targeting the unique needs of adolescent girls, with integrated support models (e.g. protection, education, sexual and reproductive health, economic empowerment) to address the often complex issues affecting adolescents girls.

- Every attempt should be made to integrate the views of adolescent girls to inform programme design, implementation and evaluation processes:

  - Conduct gender and power analyses for all areas of programming that incorporates differentials for adolescent girls and listens to first-hand accounts and the voices and perspectives of adolescent girls.

  - Recognise that capacity building alone won't enable adolescent girls' participation in programme design, implementation and evaluation processes, address the structural barriers to participation and integrate interventions into programmes which address the patriarchal norms and traditional generational relationships of 'power over' which limit and exclude young women and men.

  - Ensure programmes respond to the needs of the more vulnerable displaced adolescent girls, including disabled girls, those who have serious illnesses, pregnant girls, mothers, unaccompanied minors, divorcees and child brides.

  - Ensure accountability mechanisms are accessible to adolescent girls.

  - Be aware that consultation methods may vary depending on the age range of the adolescent girls or other intersecting characteristics such as restrictions on

Girls at school in Niger.
(©Vincent Tremeau)

mobility and marital status – and so ensure those who have limited freedom of movement, for instance, are reached out to in order to ensure their specific concerns are addressed.

  - Ensure humanitarian interventions set clear targets and include specific indicators in programme monitoring and evaluation frameworks that assess the outcome of the programme for adolescent girls.

  - Incorporate mechanisms across all investments to assess and understand the impact on adolescent girls.

- Support adolescent girls' enhanced participation in decision-making, including at all stages of humanitarian interventions, by building leadership skills among girls and enabling supportive initiatives within communities.

- Recognise the unique skills, knowledge and experiences that adolescent girls have, and utilise this as well as their desire to help their communities in developing more inclusive, responsive and innovative programmes.

RECOMMENDATIONS

PHYSICAL SECURITY

Improve the security conditions for adolescent girls:

- Impress upon appropriate governmental authorities the importance of responding to the needs of adolescent girls as a particularly vulnerable community, including demanding compliance with international obligations under international human rights law, attending to concerns around child labour, and providing security and other essential services, including access to education, healthcare (including SRHR) and means of sustenance.

- Build the capacity of civil society – including CSOs, the media, think tanks and educational establishments – to advocate for the needs of adolescent girls, particularly the most vulnerable among them, not least to help address their pressing security concerns and to help realise their human rights, including access to education.

- Improve security conditions in communities, particularly routes taken regularly by girls (travelling to school or collecting food, water and firewood) including the simple installation of street lights in places and the visible presence of security service providers, such as the police, which enjoy the trust and confidence of community members, including the girls themselves.

- Support peer leaders in camps who help adolescent girls by taking concerns to community leaders and helping to resolve conflict, and support the development of peer leader programmes where they don't exist.

- Introduce or expand programmes which are focussed on promoting gender equality and reducing GBV, sexual harassment and domestic violence, including programmes targeted specifically at adolescent boys, given high levels of harassment reported, and programmes to mitigate the stress factors often caused by economic deprivation which can be causally related to domestic violence.

- In recognition of the impact that family separation, particularly among displaced adolescent girls, can have on well-being

Girls play in a child friendly space built by Plan International in Minawao camp, Cameroon.
(©Plan International)

and security, ensure all programmes work with families and unaccompanied minors to minimise these risks.

- Provide further funding for specialised protection programmes for adolescent girls that include access to age-appropriate 'safe spaces' – recognising they provide security for girls, access to a social/ peer network, a sense of well-being and thus build girls' resilience and, moreover, can be a space where additional education and training occurs, including on SRHR as well as vocational and skills-based education. Ensure such safe spaces meet the needs of girls and are accessible.

- Prioritise funding for initiatives that address the multiple and overlapping drivers of CEFM, which should address the immediate drivers of CEFM and put in place longer term prevention and mitigation measures.

- Take measures to address causes of survival sex, principally economic deprivation, and provide support to vulnerable, at risk and traumatised girls.

- Fund and deliver age-sensitive, longer-term programming that addresses harmful practices (including negative coping mechanisms girls are forced to undertake) and seeks to positively shape gender equality in humanitarian settings.

- Regularly conduct safety audits with the girls to identify their concerns, share information about security conditions, and advise on safety measures that can be taken, for instance encouraging them to travel in groups along safer routes (to travel to school and to collect food, water and firewood), and link safety audits with advocacy measures.

RECOMMENDATIONS

ECONOMIC SECURITY

Take measures to mitigate the ongoing effects of the economic and associated food and water crises on adolescent girls:

- Deliver and support programmes which provide potable water to communities, reducing the distance needed to travel, often by adolescent girls, to fetch water.

- Deliver and support programmes which provide food and the means of securing sustainable food sources to families and communities, not least to lift the burden placed upon adolescent girls to provide for their families, which often incurs leaving school, CEFM and survival sex.

- Ensure food distribution programmes especially target the needs of adolescent girls, particularly pregnant girls and those who are unaccompanied or not living with their immediate family – ensuring they have adequate access to food and that food distribution programmes consider the safety of adolescent girls (with respect to the location of collection points and collection times).

- Deliver and support programmes which provide greater livelihood and economic opportunities for older girls and their families, thus reducing the need for girls to engage in informal and unregulated labour, marry early or prematurely leave school – this is particularly important given the deteriorating economic situation as a result of the protracted conflict and environmental disaster, and the negative impact on economic opportunities and other forms of insecurity.

- Support programmes designed to sustainably address economic insecurity – and, thus, food insecurity, access to education and access to healthcare – by influencing policy which limits economic and livelihood opportunities, as well as by funding skills development programmes.

- Develop and deliver micro-enterprise programmes which target older adolescent girls and include the provision of small loans and development of business-related skills, responding to girls' entrepreneurialism and eagerness to engage in education and training.

- Develop and deliver public outreach and communication campaigns which raise awareness of the household chores and care work undertaken by adolescent girls and the impact this can have on their resilience, as well as access to education and paid employment, in an effort to reduce the burden and minimise risks.

Adolescent girls in Niger share a joke with each other.
(©Plan International)

RECOMMENDATIONS

HEALTHCARE

Ensure the provision of accessible, affordable and adequate healthcare that is gender-responsive and meets the specific needs of adolescent girls:

- Remove barriers to healthcare (cost, lack of information, limited accessibility), ensuring healthcare facilities are in reach of those in need and are affordable, including through the provision of mobile healthcare for instance.

- Prioritise funding for the provision of affordable and accessible, adolescent girl-friendly sexual and reproductive healthcare services, in response to the wish expressed by adolescent girls to learn more, particularly from CSOs and healthcare professionals, and in response to heightened exposure to risk as a result of CEFM and early pregnancy.

- Support healthcare services to provide effective care and treatment for pregnant adolescents and young mothers.

- Remove economic barriers to menstrual hygiene products for girls, thus enabling girls continue participating in daily activities, including attending school, and ensure menstrual products are locally appropriate.

Adolescent girls on their way to school in Niger.
(©Vincent Tremeau)

EDUCATION

Facilitate access to education which responds to the specific needs of adolescent girls, particularly at secondary school level and particularly those who are displaced, and deliver other education programmes and training which responds to their complex security needs:

- Ensure adolescent girls can access education, particularly beyond primary education, whether secondary education or vocational education programmes, including by:
  - Adjusting humanitarian interventions so they create an enabling environment for girls to uptake education opportunities.
  - Securing means of helping with associated costs (school fees, transport to and from school, writing materials and books, school uniform).
  - Addressing security barriers to education, including through setting up schools in safer areas that don't require long-distance travel or travel through insecure areas, or that are mobile facilities.
  - Prioritising training of teaching staff, including female teachers who provide a support system for adolescent girls.
  - Ensuring there are adequate sanitation facilities for girls, not least to ensure their privacy and security.
  - Responding to the demand from girls for vocational training, and ensuring it is developed based upon the girls' articulated needs.

- Support the delivery of education programmes for displaced communities, including accelerated programmes and school readiness programmes for those who have never attended school.

- Deliver programmes for adolescent girls – particularly those with limited access to the formal economy – which respond to declining livelihood opportunities and provide girls with a means of sustaining themselves and their families in the future, which can help mitigate security risks.

- Deliver programmes which respond to declining livelihood opportunities for family members of adolescent girls, recognising that the security of adolescent girls (in terms of well-being, food and nutrition, access to education, physical safety and likelihood of CEFM) is often dependent upon household economic security.

RECOMMENDATIONS

AWARENESS-RAISING AND ADVOCACY

Promote knowledge, attitudes and behaviour changes for communities and duty-bearers regarding girls' rights, including access to education, freedom of movement and issues around marriage:

- Ensure girls' voices inform awareness-raising and advocacy efforts.

- Advocate for the mainstreaming of gender and age across policies and campaigns, including by setting targets for outcomes for adolescent girls.

- Deliver programming which aims to prevent GBV, including awareness-raising activities for communities on GBV and on the rights of women and girls, including the right to education.

- Sensitise communities to the importance of girls accessing education, for their own well-being and future prosperity and security, as well as that of their families and communities.

- Advocate to governments and other duty-bearers on the importance of girls accessing education to help create an enabling environment for girls to uptake education opportunities.

- Given high prevalence of CEFM and related high prevalence of maternal death, support programmes which educate communities on the risks associated with CEFM and early pregnancy, while addressing the risks that lead families and communities into identifying CEFM as a viable option.

- Utilise the provision of education to sensitise boys about gender issues, including violence against women and girls, gender equality, and the rights of women and girls, including the right to education.

- Deliver awareness-raising programmes on sexual and reproductive health rights (SRHR).

- Ensure adolescent girls are aware of mental health and psychosocial support programmes and facilities which are available to them, and which may help them deal with the trauma the crisis has caused.

ENDNOTES

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An adolescent girl from Niger.
(©Vincent Tremeau)

No photographs were taken during the course of this research. Girls featured in images in the report are not the same as those that participated in the research. Names of some girls in images have been changed to protect their identity.

Plan International in Lake Chad

The Lake Chad Programme is a joint initiative from Plan International's Country Offices in Cameroon, Niger and Nigeria as well as the West and Central Africa Regional Office. It was established in 2016 in order to address the crisis in the Lake Chad Basin through an integrated and regional programme approach, which will be extended to Chad, taking into account the regional dimension of the crisis and its interdependence while ensuring country-contextualised programming, which will be extended to Chad. Our work is focused on the sectors of education in emergencies, protection (child protection and gender-based violence) and livelihoods to enable protection and youth economic empowerment. We are committed to analyse, understand and address the unique needs of and risks faced by girls, and working with girls themselves and their communities to address root causes of gender inequality and promote girls' rights in the Lake Chad region.

About Plan International

We strive to advance children's rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it's girls who are most affected. As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children. We support children's rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 80 years we have been building powerful partnerships for children, and we are active in over 75 countries.

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