COUNSELING INTERVENTION FOR INTERNALLY DISPLACED PERSONS IN GANDI CAMP, SOKOTO STATE, NIGERIA

BY
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Abstract
Internally displaced persons are usually exposed to various vulnerabilities which make them at risk of problems such as inadequate food supply, disruption in Educational career of their children, lack of free hand marital interaction with their spouses, sexual violence, living in unhygienic environment and acute malnutrition; conditions which deserve urgent interventions through provision of services within and outside the camps. This study assessed the counselling interventions offered by governmental and non-governmental organizations to internally displaced persons in Gandi for social inclusion. It employed descriptive survey research design and a sample size of 104 respondents were selected to represent the population of 278 IDPs. Self-developed questionnaire with validity and reliability indexes 0.76 and 0.87 respectively were used. The data were collected and analysed using frequencies and percentages with the help of Special Package for Social Sciences (SPSS) version 20. The result indicated that only group counselling was adequately utilized, individual and other forms of counselling were not applied. It further revealed that humanitarian aids were not reaching the real people in need. Part of the recommendations government and NGOs should deploy more professionally trained counsellors to work with IDPs in Gandi camp to help them overcome their challenges and go on with normal life.

Keywords: Internally displaced persons, Counselling Interventions and Education

Introduction
Being in displacement may in one way or the other have a negative and harmful effect to different aspect of human life ranging from social, emotional, physical, spiritual and emotional well-being of an individual. The displaced people often leave their shelter and means of livelihood, they loss their love ones, they abandon their farmlands and found themselves in new dimension of life which may be full of sadness, sorrow and grief. They often experience the number of life obstacles including disruption in Educational career of their children, lack of free hand marital interaction with their spouses, living in unhygienic environment and acute malnutrition. According to UNHCR 2004, Sub-Saharan Africa has over four million displaced persons, the largest number in the world. In an attempt to reduce problems of displaced persons, the United Nations Refugee Agency in 1995 called for concerted interventions and provided guidelines for action. This call culminated in an international conference in 2001, which encouraged countries to respond to the problems of displaced persons.

In northern Nigeria instability has escalated to become a global issue. It was estimated that the number of internally displaced persons (IDPs) apart from refugees rapidly increased, at an
average of 1.6 million people per year, from 2000 to 2014 (Crawford, Cosgrave, Haysom, and Walicki, 2015). As a result, forced displacement, Two main categories of victims were produced; the refugees who cross international borders and IDPs who remain within the borders of the affected individual’s nation. At the end of 2014, the total number of forcibly displaced persons (refugees plus IDPs) around the globe stood at 59.5 million, with 60% of these being IDPs, within the borders of their own countries (Crawford Cosgrave, Haysom and Walicki, 2015). Forced displacement destroys or at least weakens the fabric of communities, creating new vulnerabilities and needs among the deprived individuals and families, often stripped of their livelihoods and property (Christensen and Harild, 2009). During forced displacement, IDPs face peculiar vulnerabilities and have specific needs (Bohnet, Cottier and Hug, 2013). They are, for example, “…at an increased risk of being separated from their families, and are particularly exposed to abuse during displacement…” (Kellenberger 2009). This brings up their specific protection needs, which are due to the distinct vulnerabilities they face. Among their specific needs, they are “…commonly in need of special protection and assistance…” (Brun, 2003) and should therefore be viewed as an especially vulnerable category of people, entitled to protection and assistance as a matter of priority (ICRC, 2006)

ICRC (2016) recognizes that the Nigerian state, through its agencies, departments and ministries and with support from humanitarian actors (international, regional and local) is trying to respond to the various needs of IDPs as obligated under the Kampala Convention. Even so, the response is far from meeting the assistance and protection needs of IDPs” (ICRC 2016 Although humanitarian actors - especially local organizations - may be more aware than the government of the specific concerns and needs of IDPs, they often lack the financial and logistical capacity to reach out to all the IDPs in time and in situations where they are able to assist IDPs living in host communities, or the assistance they provide is “adhoc and insufficient” (Beyani, 2013).

According to Akuto (2017) IDPs is defined as persons who have been displaced by natural disaster or conflicts from their homes and traditional support structure and have not crossed the border of their countries. They are victims of various kinds of injustices, violent confrontations perpetrated by their own government or others against them. Internally Displaced persons also known as IDP's are mostly victims of the inhumanity of man against man. They are victims of various kind of injustices or violence confrontations, perpetrated by either their own government against them or by others, such as, communal clashes, terrorism, riots, religious conflicts or natural disasters. Mallum (2000) defined counseling as that process which takes place in a one to one relationship between an individual troubled by problems with which he cannot cope alone, and a professional worker whose training and experiences have qualified him to help others reach solution to various types of personal difficulties. Idown (1986) defined “counselling as the process, by which a person with problems is helped by a professional counsellor to voluntarily change his behaviour, clarify his attitude, ideas and goals so that his problems may be solved. Bulus (1990) defined counseling as a person to person relationship in which one person helps another to resolve an area of conflict that has not been hitherto resolved. Counseling is one to one interaction between professionally trained counselor and a client bothering with series of social adjustment problems with the aim of setting him out of his problems. It is also the process of creating strong relationship with client that will empower them to obtain mental health and to fulfill their goals.
Counselling interventions have been defined in professional literature as a unique interrelationship between a client and a counsellor, which aims to create a change and a growth in three main areas: Personal development, social adjustment, and professional development. During the counselling process, the counsellor has the responsibility to contribute to the process of change, concerning to his or her client’s personal development (Bordin, 1968). This study attempted to explore the counselling services provided by governmental and non-governmental agencies at Gandi camp. These interventions can be delivered to individuals, families or groups and in either clinical or non-clinical/community settings. The intervention can either be focused on previous potentially traumatic events or can be multi-modal and comprehensive in design, concurrently addressing a number of issues in the child's environment and social networks as well as past experiences (Basoglu, 2006). The choice of potential interventions can therefore be limitless and so developing a coherent evidence-base is crucial to ensure that those interventions that are effective can be replicated and those that are not effective, discontinued (Nickerson, Bryant, Silove & Steel, 2011).

Gandi Town is the second most populous district in Rabah Local Government with estimated population of about two hundred thousand (200,000) people. Gandi is Geographically located in Eastern part about 35 km away from Rabah. Gandi district share border with four main road linking to different town in Rabah namely kurya, tsamiya, yartsakkuwa and Gundumar Bunu. The inhabitant of Gandi are mainly farmers who solely rely on farming and rearing animals to earn a living. From July 2018 to July 2019 there have been the incessant bandit attacks occurring in neighboring villages of Gandi. The attackers usually storm the villages riding motorcycle and shooting sporadically. Their periodic raze of many villages resulted the death of several people and carted away with their belongings. About 4,996 surviving victims of the bandit attacks storm to the district city of Gandi in rescue of their lives which necessitate the establishment of Gandi IDPs Camp. The Camp initially begun with the displaced persons from 9 villages, but with similar development the number of affected villages are constantly increasing due to periodic intensification of attack by the bandits. As at the time of data collection, the villages affected are Rakwanni, Mallela, kaiwa, kalhu, kwattamagaji, Tsage, Tabanni, Allikiru, RuwanTsamiya, Dutse, Kursa, Dalijan, Gidankare, Warwanna, Ilulu, Burwanga, Ta’okin Kwasa, and Banga. The total number IDPs found on ground in Gandi camp were 104 people. From the pilot study conducted, it is discovered that there are quite number of Non-Governmental organizations rendering different types of services in Gandi IDPs camp (see table 1);

<table>
<thead>
<tr>
<th>S/No</th>
<th>NGOs</th>
<th>Date of formal engagement with the Gandi Camp</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Muslim Students Society Mss</td>
<td>18/7/2018</td>
</tr>
<tr>
<td>2.</td>
<td>Sokoto State Women Muslim Association</td>
<td>22/7/2018</td>
</tr>
<tr>
<td>3.</td>
<td>Community Birth Health Volunteer (CBHV) Gandi</td>
<td>26/7/2019</td>
</tr>
</tbody>
</table>
The above-mentioned NGOs visited the camp on several occasions and render a health, educational, rehabilitation, vocational, post traumatic and persona-social related services. In view of the above, this paper seeks to assess the counselling intervention available to Gandi IDPs Camp with a view to projecting useful recommendations. Forced displacement of people in Gandi district of Raba local government in Sokoto State created new vulnerabilities and needs among the deprived individuals and families, as their livelihoods and properties were destroyed. The situation which result to the establishment of IDP Camp. In ideal setting the displaced people are expected to provide with professional counsellors for personal social counselling services to enable them cope with life in the camp. The services should include group counselling. Individual counselling, couple and marital counselling, and rehabilitation counselling. Unfortunately, the counselling services on the ground were delivered by difference group of people at the expense of professional counsellors. The consequences of their services may not yield the desire expected result since they like adequate skills and techniques of counselling therapy. It is against this background the researcher explored the counselling intervention available in IDP Camp of Gandi district..

**Research Questions**

The following research questions were formulated to guide the study;

1. What types of counselling services are provided to IDPs in Gandi Camp?
2. To what extent the IDPs in Gandi Camp benefit from the counselling services provided?
3. Are there other services available to the IDPs in Gandi Camp.

**Methodology**

The design for this study was descriptive survey design. It enabled the researcher used questionnaire to seek for the opinion of the sample representing the entire population of IDPs in Gandi Camp. The sample sizes of 104 respondents were randomly selected to represent the total number of 278 IDPs on the bases of Krejcie & Morgan (1970) method of sample selection. Researchers developed questionnaire was employed to collect data directly from the respondents. The inventory is divided into section A containing respondents’ bio-data and section B containing questionnaire’s items and instruction of Likert rating scale. The instrument was scrutinized and finally validated by expert in the field of guidance and counselling and psychology from the department of educational foundations of Usmanu Danfodiyo University, Sokoto. The reliability of the instrument was also ascertained through Test Retest reliability method of three weeks interval. The results obtained from the tests conducted were compared and correlation coefficients of 0.87 were obtained which indicate the reliability of the items to be use for research.
The collected data from the respondents were analysed using frequencies and percentages to answer research questions with the help of Special Package for Social Sciences (SPSS) version 20. Though, out of 278 questionnaires distributed 237 were retrieved and 41 mortality recorded. Therefore the analysis was based on 237 questionnaires.

**Results**

**Research Question 1: What are the types of counselling services provided to IDPs in Gandi Camp?**

<table>
<thead>
<tr>
<th>S/N</th>
<th>Items</th>
<th>Agree F/</th>
<th>Disagree F/</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I received individual counselling service in the camp</td>
<td>22 (10%)</td>
<td>215 (90%)</td>
</tr>
<tr>
<td>2</td>
<td>I was counseled with colleague</td>
<td>200 (84%)</td>
<td>27 (16%)</td>
</tr>
<tr>
<td>3</td>
<td>I enjoyed rehabilitation counselling service</td>
<td>90 (38%)</td>
<td>146 (62%)</td>
</tr>
<tr>
<td>4</td>
<td>Every member benefited from spiritual counselling service</td>
<td>219 (92%)</td>
<td>18 (8%)</td>
</tr>
<tr>
<td>5</td>
<td>Medical service is provided free and for all camp members</td>
<td>65 (27%)</td>
<td>172 (72%)</td>
</tr>
<tr>
<td>6</td>
<td>People enjoy marital counselling in the camp</td>
<td>76 (32%)</td>
<td>161 (67%)</td>
</tr>
</tbody>
</table>

*Source: Field data 2019*

The item 1 of the above table indicated that only 22 (10.%) of the respondents agreed with the item, and 215 (90%) disagreed with the statement. Thus clearly indicate that face-to-face individual counselling service was not adequate. The item 2 of the above table indicated that 200 (84.%) of the respondents agreed with the items, only 27 (16%) disagreed with the statement. Thus clearly indicate that the main type of counselling service benefited by most IDPs is group counselling. The item 3 of the above table indicated that 90 (38%) of the respondents agreed with the items, and 146 (62%) disagreed with the statement. Thus clearly indicate that rehabilitation counselling was not sufficiently provided. The item 4 of the above table indicated that 219 (92%) of the respondents agreed with the item, and only 18 (8%) of the respondents disagreed with the statement. Thus clearly indicate that spiritual form of counselling service was adequately provided.

**Research Question 2: To what extent does the IDPs in Gandi Camp benefited from the counselling services provided?**

The results of item 2 and 4 from table 2 indicate that 200 (84.%) of the respondents agreed with the items, only 27 (16%) disagreed with the statement and 219 (92%) of the respondents agreed with the items, only 18 (8%) of the respondents disagreed with the statement respectively. The results shown that most of the NGOs which visited the Gandi IDPs Camp were religious oriented bodies. It also revealed that majority of the IDPs members benefited from spiritual group counselling.

**Research Question 3: Is there other services provided in Gandi IDPs Camp?**

The result of item 5 from table 2 indicated that only 65 (27.%) of the respondents agreed with the item, while 172 (73%) disagreed with the statement. This clearly indicated that medical aids was provided but not sufficient.
Discussion
The result of the research question 1 in table 2 shows that individual counselling was not provided adequately. This explain that the visited NGOs concentrated on grouping. The above statement is supported by the responded percentages of agreed and disagreed of 10% and 90% respectively. The result further revealed that group counselling was adequately provided considering the percentages of 84% agreed and only 16% disagreed. The finding is with agreement of Szymanki and Parker, (2006) which stated that counselling services provided in group is significant in rehabilitating IDPs.

The result of the research question 2 in table 2 shows that the internally displaced persons in Gandi camp benefited a lot from spiritual counselling offered mainly through group counselling. The result indicated that 92% of the respondents agreed and only 8% disagreed with provision of spiritual counselling service. Spiritual counselling discourages prolong grief and bereavement and foster self-rehabilitation of the grieved.

The result of the research question 3 in table 2 show that there was existence of medical services in Gandi IDPs camp, but the service was not adequate. The result indicated that 72% of the respondents were of opined that services was not sufficient to their expectation. While 28% of the respondents agreed with the item. The finding is with agreement of Sambo, (2016) recommendation that the role of intermediary played by government agencies such as National Emergency Management Agency (NEMA) and State Emergency Management Agency (SEMA) should be discouraged. This will enable the donor agencies to have contact with the affected people and provide adequate assistance.

Conclusion
The counselling intervention available in Gandi IDPs camp is not yielding the desire result, because the professional counsellors were not involved. Both governmental and NGOs need to double their effort in utilizing the counsellors available so that other forms of counselling in will also be applied in addressing the multiple problems affecting the life of the displaced in the camp. In view of that, the following recommendations were made;

Recommendations
1. There is need for individual form of counselling by professional counsellors.
2. Different types of counselling services should be provided to address other social challenges affecting IDPs instead of spiritual counselling which focuses on only psychological trauma.
3. Other services like medical should be provided sufficiently in the camp to enable the displaced persons cope with medical challenges.

References


