



...Promoting Human Rights

**AN ASSESSMENT OF VULNERABLE
GROUPS IN NIGERIA DURING THE
COVID-19 PANDEMIC:
CHALLENGES, LESSONS LEARNT AND
RECOMMENDATIONS**

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INTRODUCTION

The Corona Virus Disease-19, better known as COVID-19, has triggered a worldwide pandemic which has also affected Nigeria. The first confirmed case of COVID-19 in Nigeria was announced on 27 February 2020, when an Italian citizen in Lagos, Nigeria's commercial hub, tested positive for the virus. Since then more cases have been identified as the highly contagious disease slowly spread through the general population.

The Federal Government quickly instituted measures to combat the pandemic which included restriction of movement, establishment of testing and isolation centres as well as treatment facilities in various parts of the country. A few states were given additional funds to aid efforts at containing the virus.

However, in a bid to manage the situation effectively and enforce the new regulations, government resorted to a militarization of the civic space which also introduced fresh challenges. The social, economic, health and even domestic spheres of life have all been negatively affected as people struggle to cope with the sudden change in lifestyle.

Lawyers Alert carried out this study as a contribution to knowledge being gathered about the effect of the pandemic, and has documented the findings obtained from a number of Community Based Organizations. The goal is to distill lessons from the experiences of the pandemic into a document that can be used globally as a reference tool for the Nigerian situation.

CHAPTER ONE – GROUPS

1.1 Community Based Organizations

To obtain the desired information, Lawyers Alert worked closely with CBOs across the country. They have proven invaluable in the data collection process for this study. Being uniquely positioned for making the desired improvements at local levels, they provided useful data which has been dissected in this report and is presented in narrative form in a group-specific format to enhance comprehension. The following is a list of those Lawyers Alert partnered with.

1.1.1 Persons with Disabilities (PWDs)

Persons with disabilities (PWDs), according to the UN Convention on the Rights of Persons with Disabilities, include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder effective participation in society on an equal basis with others.

Globally, over 1 billion people, or approximately 15% of the world's population, have some form of disability. As at 2020, there are reportedly over 27 million Nigerians living with some form of disability. More than 50% of the 25 million disabled Nigerians are females. Women and girls with disabilities are at 3 times greater risk of suffering physical, sexual and economic abuse than women without disabilities.

1.1.2 Persons Living With HIV (PLWHIV)

Nigeria has about 3.8 million people living with HIV, the second largest globally.

1.1.3 Persons Who Use/Inject Drugs (PWUID)

PWUID are among the groups most vulnerable to HIV infection. It is estimated that people who inject drugs are 22 times more likely to acquire HIV than the rest of the population.

1.1.4 Female Sex Workers (FSW)

FSWs have been identified as a key population. FSW vulnerability is linked to poverty, violence, criminalization, drug use, high mobility.

1.1.5 Sexual Minorities (SM)

This is a group whose sexual identity, orientation or practices differ from the majority of the surrounding society. Primarily referred to as Lesbian, Gay, Bi-sexual or non-heterosexual individuals, the term can also refer to transgender, non-binary (including third gender) or intersex individuals.

CHAPTER TWO – PEOPLE WITH DISABILITIES

2.1 EXPERIENCES SHARED BY PERSONS WITH DISABILITIES (PWD)

Though the needs of PWDs generally tend to be overlooked in Nigeria, the pandemic further exacerbated the situation as this study revealed. Lawyers Alert interrogated the experiences of the PWDs through the pandemic especially during the lockdown with focus on health rights, access to justice, services and resources. The pandemic's effect on the organizations, persons or constituencies they serve are highlighted below:

Health Care Challenges: Most persons with disabilities found it difficult to access health services and institutional care or routine health checks. The health system, even before the advent of COVID-19, has been discriminatory. The pandemic seemed to further worsen the situation. Most could be described as insensitive to or incapable of attending to the needs of PWDs as the following challenges were enumerated by the group:

- Difficulty accessing health facilities/services owing to structural design defects (e.g. lack of ramps for wheelchairs for the physically challenged)
- Communication challenges as evidenced by the lack of sign language interpreters in the hospitals for the hearing or speech impaired.

The lockdown called to sharp relief the fact that health personnel in Nigeria are not adequately trained to handle PWDs as enshrined in the *Discrimination against Persons with Disability Prohibition Act 2018* and other global and regional treaties.

Inadequately Positioned COVID-19 Isolation Facilities: Owing to the varied nature of the disabilities PWDs have, which range from physical challenges to cerebral palsy, the challenge of isolating them in the event of being found positive for COVID-19 is one that must be planned separately for. Most would need more care than the average patient depending on the level of challenge involved. Regular isolation centres are currently not equipped for handling such cases.

Socio-economic challenges: The lockdown deprived many of the physically challenged who rely on alms as a means of livelihood as they could not leave their homes. The ripple effect is that everything else, including their ability to feed and seek health services as and when due, is compromised. The new policy on social distancing and the increase in fuel prices caused a hike in transportation fares further deepening their plight as they could no longer afford to pay the new fares and attend to their needs or move from place to place in search of alms. Additionally, a large number of PWDs in Nigeria are unemployed and without a

means of earning a living. Even the few who are self-employed found that their customer base dwindled dramatically as the lockdown hindered movement significantly. These factors working together have had a negative effect on PWDs capacity for self-sustenance.

Challenges Accessing COVID-19 Related Information. While there has been a deluge of information relating to COVID-19 across all mass media platforms, there is a paucity of messages targeting the hearing or sight impaired. The print media such as publications, posters and billboards could fill this gap for the hearing impaired, such publications are sparse and of no value to the unschooled. The sight-impaired, on the other hand, rely on content assimilated aurally and yet there are not enough radio messages in different Nigerian languages to ensure that the messages are widely and sufficiently disseminated. Nigeria, with a population of approximately 200 million people has about 500 known languages. Most of the messages being disseminated are in English and the 3 main languages which are grossly inadequate even for the general population.

Omission from State-Funded Palliatives: Nigeria's Federal Government through various instruments of state has instituted COVID-19 palliatives support subsidiary as a means of cushioning the effects of the pandemic on the populace. Though a laudable initiative, PWDs have been overlooked as there is no special provision for their needs. Noting the omission, PWD organizations have embarked on advocacy campaigns to ameliorate the anomaly. These efforts are yet to yield any tangible results.

Increased Sexual Abuse and Violence: This study also uncovered allegations of sexual molestation and violence toward PWDs by caregivers during the lockdown. Fear of abandonment or ejection from their places of abode purchased silence from the victims further emboldening the abusers.

Increase in Stigma and Discrimination: Owing to their usually cramped living conditions and generally resource-constrained circumstances, PWDs are perceived as a high risk population for COVID-19. This has further deepened feelings of stigma and discrimination toward them from the general population.

2.2 RECOMMENDATIONS

Addressing Health Care Challenges: There is a need for government to note the challenges within the healthcare sector that the pandemic has further exposed. Issues around the care of PWDs are just some. While they cannot be sorted out overnight, deliberate steps must be taken by government to begin the process now.

COVID-19 Isolation Facilities: The Federal Ministry of Health working through its state branches should liaise with the government at state level on the need for special provision to be made for PWDs at isolation centres or for the establishment of a separate facility to cater to their needs. Additionally, effort should be put into encouraging them to voluntarily go for testing to ascertain their COVID-19 status.

Cushioning Socio-Economic Challenges: Federal Government through various state instruments should create a database of PWDs in Nigeria disaggregated by demography. This data base should be used to ensure that a separate palliative policy is drawn up to cater to their needs pending when normalcy returns. The data base will also come in handy for rehabilitation subsequently.

Challenges Accessing COVID-19 Related Information: The Federal Ministry of Information which is vested with the responsibility for managing state owned media organizations has made some efforts in sensitizing the public. However, there is a need to draw its attention to the many gaps spotted in the information dissemination strategy adopted by these various organizations with regard to the pandemic in hopes that suggestions for improvement are implemented and the challenges of PWDs are considered in crafting awareness content.

Omission from State-Funded Palliatives: The fact that PWDs are already in talks with the authorities to reverse the situation is comforting. There is however a need to galvanize other pressure groups to add voice to that of the PWDs to ensure that government succumbs to these urgent demands.

Increased Sexual Abuse: Hotlines should be specially dedicated to resolving challenges of PWD assault or abuse. They should be able to report incidents anonymously and know that their safety is assured when the abuser is apprehended. The government needs to work closely with CBOs that already work with PWDs to assure this.

Mitigating Stigma and Discrimination: Stigma and discrimination are best dispelled through adequate sensitization and knowledge dissemination. Myths,

fallacies and false information should be tackled via adequate sensitization campaigns which could equally be provided by CBOs, FBOs and traditional community gate keepers and community leaders. The government should be sensitized on the need to work with the aforementioned groups to ensure that the right information is cascaded down to all strata of the community.



CHAPTER THREE – PEOPLE LIVING WITH HIV

3.1 EXPERIENCES SHARED BY PLWHIV

Listed below are the experiences encountered by PLWHIV in managing the pandemic during the lockdown as documented by their various groups. The focus is on health rights, access to justice, services and resources. The impact on their organizations, persons or constituencies they serve.

High Cost of Transportation: PLWHIVs could not access their healthcare facilities, workplaces and other social services owing to the high cost of transportation occasioned by the lockdown and an increase in fuel prices.

Drugs Refill: PLWHIVs have had difficulty accessing their healthcare facilities for drug-refills owing to the restrictions on movement and high cost of transportation necessitated by the lockdown.

Inadequately Equipped COVID-19 Isolation Centres: PLWHIVs will require special attention if exposed to COVID-19 as it could exacerbate their condition. At the moment, information at Lawyers Alert disposal shows that the facilities are not adequately equipped with anti-retrovirals to handle patients who might already be dealing with HIV.

Economic Impact: As the economy took a hit, PLWHIVs means of livelihood were also compromised. Many lost their jobs and had difficulty getting new ones. Those who are self-employed suffered loss of patronage which also negatively affected their income.

Domestic Violence: There has been an increase in incidents of Domestic Violence which has also affected PLWHIVs. This has been occasioned by the general restiveness brought on by the lockdown as a result of the pandemic and also the general loss of livelihood of many heads of household leading to acts of violence against family members and dependents.

3.2 RECOMMENDATIONS

Exploring Alternative means of Ensuring Drug Refills: The FMOH must explore other means of getting medication across to those who are unable to access their health facilities. Where possible, drones could be used to effect drop-offs in well co-ordinated operations that are communicated to the beneficiaries well ahead of time. This would be done in conjunction with established CBOs. Another option would be to partner with patent medicine stores already located in various communities to serve as collection centres for those unable to access their healthcare facilities. Again there would be a need to work closely with CBOs

to effect the strategy. While this might take some time to actualize and plan properly, if well executed it could serve as a valuable remedy to the problem.

Economic Impact: The palliative measure instituted by the FG must be expanded to include all vulnerable groups. This will serve as a safety net pending the return to normalcy.

Mitigating Domestic Violence: The provision of hotlines for attending to incidents of DV is strongly recommended. Government should partner with CBOs and NGOs involved in handling issues of DV to provide succor to victims.

Equipping COVID-19 Isolation Centres: These centres should be equipped with adequate facilities and medicines to handle COVID-19 patients who also happen to be HIV positive.

CHAPTER FOUR - PERSONS WHO INJECT/USE DRUGS

4.1 EXPERIENCES SHARED BY PWIUDs

PWIUDs often find themselves on the fringes of society and subjected to much stigma and discrimination as their challenges are viewed through the prism of morality. Their experiences with the COVID-19 outbreak have been captured in this study.

Health Issues: Owing to the highly contagious nature of COVID-19, rehabilitation centres were closed down and PWIUDs were dismissed from these facilities thereby denying them much needed management of their condition. Additionally, PWIUDs in many instances could not be revived after incidents of overdose because of a lack of Personal Protective Equipment in hospitals and the need for medical personnel to protect themselves from the possibility of contracting COVID-19. A number of PWIUDs have been lost as a result. Health service providers have also had difficulty accessing bunks in order to provide them with required healthcare. The pregnant among them cannot be provided ante-natal care as they are unable to access it owing to restrictions of movement.

Rights Infringements: As mentioned, the situation of PWIUDs, like PLWHIVs and Sex Workers, tends to be viewed from a moral prism by the general public. This means there is a tendency for them to be treated as criminal elements which results in frequent run-ins with the law even at the best of times. With the COVID-19 outbreak and subsequent militarization of the civic space, these incidents have increased significantly. Many PWIUDs have difficulty getting their usual drugs and therefore experiment with other substances which can cause them to be erratic and viewed as disturbing the peace. This has led to a host of detentions resulting in further exposure to the virus as the detention camps tend to be overcrowded.

Lack of Access to Drugs: The lockdown also caused a scarcity of drugs which PWIUDs ordinarily ingest. This has led to experimentation with substitutes (as mentioned in the preceding paragraph) which in some cases resulted in more harm. Some have overdosed with no recourse to professional medical care. Those who inject have also resorted to sharing needles, a dangerous trend which could facilitate the spread of other diseases.

Movement Restriction: The lockdown has also hindered access to drugs and ability to socialize bringing with it an increase in mental health challenges especially amongst this group of people. Furthermore it has affected their capacity to move around in search of means of livelihood or even accessing healthcare facilities when needed.

Economic Impact: Most PWIUDS earn their living on a daily basis. The lockdown has hindered their ability to earn their source of income. This also affects their capacity to purchase their drugs and generally sustain themselves or take care of their responsibilities. For those who are self-employed, there is now a scarcity of clients owing to the general downturn in the economy.

4.2 RECOMMENDATIONS

Government Support Required for Strengthening Support Systems:

Rehabilitation centres should be given the proper COVID-19 protocols and allowed to re-open under strict compliance. The Federal Government has provided free testing for COVID-19 at designated centres. It is vital that PWIUD that were being rehabilitated be mobilized for testing. Where found free of the virus, they should be returned to the rehab centres for continuation of treatment. This will reduce the number of PWUIDs looking for alternatives to their preferred drugs.

The Federal Government should also acquire and distribute more PPEs in states showing higher number of infections to enable medical personnel carry out their work effectively.

Sensitizing State Security Agents on Human Rights: There is a need for state security agents to be adequately sensitized to the nature of the virus so that other methods which do not include detention can be adopted for dealing with persons who break the law. This, in addition to human rights training for officers to be provided by Human Rights organizations.

Implementation of General COVID-19 Protocols: The current restrictions on movement can be eased in favor of a regime of personal hygiene, social distancing and wearing of masks instead. This will have a positive impact of the economy and social life while government feels its way out of the current situation.

Economic Impact: Government's efforts at cushioning the effect of the pandemic, while laudable, were not inclusive. Many vulnerable groups were left unattended to. This should be remedied to ensure that vulnerable populations receive the support they require to face the current economic downturn.

Equipping COVID-19 Isolation Centres: This is also a problem which cuts across all the identified groups. The solution as stated earlier lies in the FMoH liaising with state counterparts to redress the situation and make adequate provision for all groups.



CHAPTER FIVE - SEXUAL MINORITIES

5.1 EXPERIENCES SHARED

The pandemic brought about certain challenges which hindered access to LGBTIQ members. Given that the courts were also affected by the lockdown, arrest of LGBTIQ community members, which has been an issue owing to their sexual orientation and gender identity, resulted in an increase in detentions at the Police stations with impunity. Those among them who are HIV positive and

already on antiretroviral drugs were denied access to both their medication and lawyers which infringed on their rights to health and justice.

Highlighted below are other challenges and experiences as alleged by the group:
Collapse of Outreach Programs: Covid-19 imposed a serious setback on the gains achieved with reactive community members. Client trackers who acted as the link between them and the clinics were practically shut down and the link broken, subjecting the reactive community members to further health hazards. Adherence level among reactive community members reduced drastically since most of them could not sustain a nutritious diet as a result of the lockdown. Outreach programs petered off due largely to mobility challenges occasioned by the lockdown.

Increased Stigma and Discrimination: Sexual Minorities experienced a surge in stigma and discrimination within their immediate communities which in some instances translated to aggression and violence. These incidents went largely unreported as a result of the lock down and also owing to perceived hostility from the authorities. SM lifestyles are criminalized in Nigeria.

Economic Challenges: The challenges already outlined in previous chapters are applicable to this group as many have lost their means of livelihood owing to economic meltdown.

5.2 RECOMMENDATIONS

Rejuvenating Outreach Programs: The health needs of sexual minorities during the pandemic can only be catered to if the outreach programs are revived. Since the SM lifestyle is criminalized in Nigeria, there is a need for members of the community to embark on self-help initiatives where necessary by reaching out to NGOs that are sympathetic to their cause. There is a need to draw their attention to this option.

Stemming Stigma and Discrimination: This is fuelled in part by the state owing to its stance of SMs. Cultural beliefs and religion have also played a part in the hostility directed at SMs in Nigeria. While the SM lifestyle has always been a matter of simmering tension, their move to be recognized as members of the society brought them into the open rendering them subject to open displays of intolerance which only worsened during the lockdown. There is a need to start a conversation with influential groups in the community on the need to see them as humans and not just as sexual beings in hopes of minimizing the attacks on them.

Providing Economic Palliatives: Making a case for this will be more challenging for the SM group than any of the others because same sex relations and the like are criminalized in Nigeria and they can therefore not demand any rights from the state. It is, therefore, not a surprise that they have also been omitted for palliative support by the government. NGOs that cater to SMs might therefore need to be equipped to discharge this duty as the government is not likely to.

CHAPTER SIX – CONCLUSION

6.1 Summary

In summary it can be seen that a number of the challenges identified in this study cut across all the groups. These are Health Challenges (lack of access to facilities, personnel, services and or commodities); Economic Challenges (livelihoods negatively affected owing to lockdown, scarcity of clients or work); Movement Restrictions; Inadequate provision for different groups at Isolation Centres; and Omission of groups in state-designed palliative programs. Group specific challenges have also been highlighted

6.2 Immediate and Long-Term Steps

In the immediate, advocacy and sensitization visits should be paid to relevant state agencies to draw their attention to gaps observed in the COVID-19 implementation plan. These will include the FMoH, FMol&C, FMoWASD, and the NCDC.

In the long term, it is important to ensure that marginalized and vulnerable persons/groups are given consideration at every step of the development of a response to a pandemic and also in the policy-making process as a whole. They should also be included in all aspects of decision-making. This will ensure overall development across different strata. There is a need, for instance, to craft messages/content in a manner that people who are hearing or sight impaired are also catered to.

6.3 Conclusion

While this report cannot be described as a comprehensive research into the phenomenon, a survey was carried out involving many CBOs across the various groups. The findings presented here are conclusions drawn from data presented to Lawyers Alert by these organizations.

It is hoped that the information contained therein will be valuable in efforts to stem the tide of the pandemic while making provision for the vulnerable.