BOKO HARAM INSURGENCY AND ECONOMIC RECOVERY IN POST-INSURGENCY ACROSS BORNO, YOBE, AND ADAMAWA STATES (2015 – 2024)

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Abstract

Boko Haram has not only posed severe security challenges but has also significantly hindered the region's progress in terms of socio-economic development, internal displacement and migration patterns, and public health outcomes. This study was anchored on Gellnerian theory of Nation and Nationalism, and the Frustration/Aggression theory. A survey research design was adopted to stimulate the needed information directly from the target respondents. The population comprises selected stakeholders in Borno, Yobe, and Adamawa States, with members of the local communities, indigenes, government and private sector employees, members of NGOs, government agency representatives, and members of separatist groups. Data was analysed using thematic analysis. The qualitative findings reveal that the insurgency of Boko Haram has a significant influence on internal displacement and migration patterns, which have wreaked havoc in the selected states. Likewise, the Boko Haram conflict has a significant impact on public health outcomes, leading to many deaths. It was discovered that addressing the challenge will require more than militarised interventions, but certain stakeholders' engagements. It was observed that beyond the immediate destruction of infrastructure, the protracted conflict has disrupted education and healthcare delivery, creating a cycle of poverty and instability. The study recommends that there should be more efforts by various governments to rebuild and secure educational facilities, implement mobile schooling in IDP camps, and incentivise the return of trained professionals.

Keywords: Boko Haram insurgency, economic recovery, post-insurgency**,** patterns of internal displacement, public health outcomes

1. Introduction

Nigeria, Africa's most populous country, is a multi-ethnic and multi-religious state created through colonial amalgamation in 1914. While this political union was intended to promote unity, the historical, cultural, and economic differences among its regions have often bred discontent. Over the decades, unresolved grievances rooted in perceived marginalisation, political exclusion, uneven economic development, ethnic rivalry, and resource control disputes have triggered the rise of Boko Haram insurgency. Boko Haram emerged in the early 2000s in Maiduguri, Borno State, as an Islamist sect advocating for the separation of Northern Nigeria from the secular federal system. During its formative years (2002–2009), the group's activities largely revolved around religious preaching, withdrawal from state institutions, and rejection of Western-style education, portraying themselves as a separatist movement seeking to establish an Islamic state governed strictly by Sharia law (Amnesty International, 2015).

The group's transformation into a terrorist organisation began after the July 2009 Nigerian security crackdown, during which its founder, Mohammed Yusuf, was captured and extrajudicially killed. This event radicalised the movement, pushing it towards violent insurgency. From 2010 onwards, under the leadership of Abubakar Shekau, Boko Haram adopted systematic terror tactics, including suicide bombings, mass abductions, and attacks on civilians, schools, markets, and places of worship, expanding beyond its separatist ambitions into acts characteristic of global terrorism (This Day, 2016). This evolution redefined Boko Haram not merely as a secessionist threat, but as one of the deadliest terrorist organisations in the world.

Since its emergence, Boko Haram's activities have posed a significant security threat using a separatist platform, which has severely hindered socio-economic development in Borno, Yobe and Adamawa States. The region, characterised by its diverse cultural and economic activities, has witnessed a dramatic shift in its socio-economic landscape due to Boko Haram conflicts. The insurgency has led to widespread displacement, loss of lives, and destruction of property, which have further exacerbated poverty and unemployment rates in the region (Sahara Reporters, 2018). Key sectors such as agriculture and trade, which are the mainstay of the region's economy, have been severely disrupted (UN Department of State, 2021). Educational institutions have been targeted, decreasing educational opportunities and literacy rates (Awotokun & Omotayo, 2018). The healthcare system, already under-resourced, has been overwhelmed due to the crisis, impacting the delivery of essential health services (Nwogu & Ijirshar, 2023). The cumulative effect of these obstacles poses a significant threat to the long-term socio-economic stability and development of Borno, Yobe and Adamawa States, Nigeria.

Statement of the Problem

Previous studies have left a vacuum in the study of Boko Haram insurgency. For example, Nwogu and Ijirshar (2023) reported that the persistent separatist activities have created an environment of

insecurity and instability, hindering the normal functioning of communities, resulting from frequent attacks, abductions, and bombings have instilled fear, disrupted daily life, and displaced a significant portion of the population, making it challenging to implement development projects. Udeh *et al.* (2023) added that insecurity caused by Boko Haram insurgency has disrupted the region's economic activities. Agricultural productivity has declined due to farmers' inability to access their fields, and businesses have suffered because of the volatile security situation. These disruptions have adversely affected livelihoods and overall economic growth (Ansolabehere & Puy, 2022).

The UN Department of State (2021) reported that the protracted conflict has resulted in a severe humanitarian crisis in some northern states, precisely, Borno, Yobe and Adamawa States. Thousands of people have been displaced from their homes, leading to overcrowded internally displaced persons (IDP) camps and a strain on available resources. This crisis has placed additional burdens on the already limited resources allocated for development. In addition, Amnesty International (2015) faulted the effect on infrastructure, such as schools, healthcare facilities, and roads, which have been destroyed or rendered unusable due to attacks by separatist groups. This has hindered access to essential services and hampered efforts to rebuild and develop the region.

The present study filled some gaps in the previous studies on social cohesion that have created community divisions, sowing seeds of mistrust and discord. This is because the prevailing insecurity has discouraged domestic and foreign investments in the region. Potential investors are hesitant to commit resources to an area with such high levels of risk, impeding the much-needed economic development of the Borno, Yobe and Adamawa States. Also, previous studies have been silent on the effectiveness of government responses to Boko Haram insurgency in terms of both security measures and development initiatives, which is essential. An analysis of policies and strategies employed to mitigate the impact of separatist activities is necessary to identify areas for improvement.

Despite recognising these challenges, there remains a gap in comprehensive empirical research that quantifies and elucidates how the Boko Haram insurgency has affected the socio-economic development of Borno, Yobe and Adamawa States specifically. Understanding the extent of these impacts is crucial for formulating effective policies and interventions aimed at rehabilitation and sustainable development. This study seeks to fill this gap by providing a detailed analysis of the various socio-economic dimensions affected by the insurgency, specifically on 2 components: internal displacement and migration and public health infrastructure. Following the gaps identified in the study, the following research objectives are:

To determine the influence of Boko Haram insurgency on the patterns of internal displacement and migration in Borno, Yola and Adamawa States and

To explore the impact of Boko Haram conflict on public health outcomes in Borno, Yola and Adamawa States.

2. Literature Review

Boko-Haram Insurgency

The concept of Boko Haram insurgency in the Northeast of Nigeria refers to the violent activities and uprisings led by the extremist group known as Boko Haram. The group, whose name roughly translates to "Western education is forbidden" in the Hausa language, has been active predominantly in the northeastern regions of Nigeria, though its influence and attacks have also extended to neighbouring countries. The insurgency escalated in 2009 when Boko Haram began to carry out armed rebellions against the Nigerian government. Their operations typically include guerrilla warfare, suicide bombings, kidnappings, and attacks on civilian and military targets. A significant and globally known act of terrorism by Boko Haram was the 2014 kidnapping of 276 schoolgirls from Chibok, which drew international condemnation and attention to the group's activities (Daily Trust, 2023).

The Nigerian government, along with regional and international allies, has been engaged in military operations to combat Boko Haram. Despite some successes in reclaiming territories and weakening the group, the insurgency has proven resilient and adaptive. The complexity of the crisis, exacerbated by underlying political, social, and economic issues in the region, makes it a challenging problem for the Nigerian government and the international community (Aladekomo, 2021; US Department of State, 2020).

Socio-Economic Recovery in Borno, Yobe and Adamawa States

Efforts to promote socio-economic development have been ongoing by the Nigerian government and international organisations. Various initiatives have been launched to improve security, rebuild infrastructure, and provide humanitarian assistance to affected communities (Okoli, 2022). Additionally, programs promoting education and vocational training have been implemented to empower the local population and create sustainable economic opportunities. However, the road to full socio-economic recovery remains long and challenging, as it requires addressing the immediate security concerns and the underlying structural issues that have contributed to the region's underdevelopment. Sustainable development in Borno, Yobe, and Adamawa States will require continued investment, collaboration, and a multi-faceted approach to addressing the root causes of the region's challenges (Okoli, 2022).

Pattern of Internal Displacement

Literature by Olawumi (2023) reveals that displacement patterns are not random; they follow the intensity of violence, state response capacity, and the socio-economic opportunities of receiving communities. In Nigeria, particularly in the Borno, Yobe and Adamawa States, displacement has become protracted, with many internally displaced persons (IDPs) residing in informal settlements or camps lacking basic

amenities. The pattern is characterised by urban influx, pressure on peri-urban infrastructure, and increasing dependency on humanitarian aid. Conceptually, displacement must be understood beyond movement; it reflects the breakdown of governance, protection gaps, and the socio-spatial redistribution of poverty and vulnerability (Gureje & Oladeji, 2019). The literature also critiques the limited state-led durable solutions and overreliance on NGOs for long-term integration strategies. The group's violence and attacks have forced millions of people to flee their homes, leading to one of the largest internal displacement crises in Africa (Obinna & Arikenbi, 2023). Displaced individuals often live in overcrowded and inadequate camps, facing challenges related to food, shelter, and healthcare. This displacement has strained resources and created humanitarian challenges for government and international organisations (Nwankpa, 2015).

Public Healthcare Infrastructure

Obiefule *et al.* (2023) argue that weak health systems are both a cause and consequence of conflict and displacement. The destruction of health facilities, brain drain of professionals, and restricted humanitarian access further deepen health inequities. From a conceptual standpoint, public health infrastructure is a core pillar of state legitimacy and resilience. Its functionality reflects governance priorities and is essential in bridging humanitarian response with development. The literature advocates for a systems-thinking approach that integrates health with water, sanitation, security, and education as part of post-conflict reconstruction. Boko Haram's activities have also exposed weaknesses in Nigeria's public healthcare infrastructure. The conflict zones have limited access to healthcare services, and many healthcare facilities have been damaged or destroyed during attacks (Adesoji, 2019). Displaced populations often struggle to access medical care, leading to increased health risks and challenges in disease control. The healthcare system's inability to respond effectively to the needs of internally displaced persons exacerbates the health crisis in affected areas (Obinna & Arikenbi, 2023).

Boko Haram Insurgency and the Patterns of Internal Displacement and Migration

Tayimlong (2021), the conflict has led to large-scale internal displacement due to the destruction of homes, loss of livelihoods, and persistent threats to civilian lives. The United Nations High Commissioner for Refugees (UNHCR, 2021) estimates that over 2.9 million people have been displaced within the Lake Chad Basin, with the highest concentration in Borno State. Similarly, Aleyomi and Nwagwu (2023) argue that the displacement patterns have become cyclical and recurrent, as many displaced persons who attempt to return are often re-displaced due to renewed violence. This contradicts traditional displacement theory, which typically assumes a linear progression from displacement to return or resettlement.

Conversely, some studies have argued that the displacement is not just a direct reaction to violence but also a strategic response by affected populations. For instance, Mojishola (2024) emphasises the

role of socio-political dynamics, including distrust in state protection and fragmented communal ties, which influence decisions to migrate internally rather than across borders. This internal migration, often toward urban centres like Maiduguri and Yobe, is not solely driven by insecurity but also by the hope for humanitarian aid and social networks. However, Banik and Das (2021) counter this by suggesting that urban migration patterns have created overburdened urban infrastructures, heightened tensions between host communities and IDPs, and increased the risk of radicalisation.

Boko Haram Conflict on Public Health Outcomes

Several studies emphasise that the conflict's direct consequences, including displacement, destruction of health infrastructure, and disruption of essential services, have severely compromised healthcare delivery in the region. For instance, Okolie *et al.* (2021) and Uthman *et al.* (2020) found a significant decline in immunisation coverage, maternal health services, and access to essential medicines due to the conflict-induced collapse of primary healthcare systems. These findings align with the WHO (2018) reports that indicated over 60% of health facilities in Borno State alone were either non-functional or only partially functional at the height of the insurgency. Such deterioration has been linked to increased child and maternal mortality rates, the spread of preventable diseases, and a resurgence of conditions like measles and cholera.

Some studies argue that while the conflict has impacted public health negatively, international humanitarian responses have mitigated the worst outcomes in some areas. For example, research by Adepoju (2019) noted that the influx of humanitarian aid by organisations like Médecins Sans Frontières (MSF) and UNICEF created temporary health interventions that helped stabilise nutrition and disease management in IDP camps. Similarly, Oleribe *et al.* (2018) reported improved access to antiretroviral therapy and tuberculosis treatment in conflict-affected communities due to targeted NGO interventions. However, critics argue these efforts are often fragmented, short-term, and insufficient to build long-term health resilience, especially in remote and non-urban areas where insecurity persists.

Empirical Review

A study by Adofu *et al.* (2024) aimed to examine the security implications of Boko Haram insurgency with a focus on its displacement effects in the Northeast. The authors adopted a qualitative research design using secondary data from government reports, NGO publications, and media sources. Findings revealed that the insurgency led to mass displacements across Borno, Yobe, and Adamawa States, with IDPs fleeing to safer regions, including the Middle Belt and southern Nigeria. The study concluded that the insurgency significantly altered migration patterns and exacerbated humanitarian crises, calling for stronger institutional responses and long-term peace-building strategies.

In another study, Ugwuoke *et al.* (2025) explored the socio-economic impact of Boko Haram on forced migration through a

mixed-methods approach combining surveys of IDPs and key informant interviews in selected IDP camps across Yobe and Maiduguri. The study's objective was to analyse the coping mechanisms of displaced persons and the demographic patterns of displacement. Findings indicated that insurgency-induced migration predominantly affected women and children, disrupted traditional livelihoods, and overstretched host communities. Ugwuoke *et al.* (2025) concluded that Boko Haram has created a migration crisis with far-reaching implications on regional stability and human development, recommending inclusive rehabilitation programs and inter-agency collaboration for durable solutions.

A study by Omotoso *et al.* (2023) aimed to assess the health consequences of prolonged insurgency on the civilian population in affected areas. Using a cross-sectional survey methodology involving 450 IDPs across camps in Maiduguri, the study employed structured interviews and health facility records to assess disease prevalence, malnutrition, and access to healthcare. The findings revealed a significant rise in preventable diseases such as cholera, malaria, and respiratory infections, as well as high rates of maternal and child mortality. The study concluded that the insurgency had severely weakened public health infrastructure and access to essential services.

Similarly, Ikeanyibe *et al.* (2023) examined how the conflict altered health service delivery. Using a mixed-methods approach that combined geospatial health facility analysis, key informant interviews with healthcare workers, and household surveys, the researchers explored the accessibility and functionality of health systems during active insurgency years (2010–2019). Their analysis showed that over 45% of health facilities were either destroyed or non-functional in the most affected LGAs, and skilled health personnel had migrated due to insecurity. The study concluded that Boko Haram's activities exacerbated existing health disparities and recommended rebuilding health infrastructure with integrated security measures and mobile clinics to serve displaced populations.

Theoretical Framework

Gellnerian Theory of Nation and Nationalism

The Gellnerian Theory of Nation and Nationalism, as developed by Ernest Gellner in his work "Nations and Nationalism" (1996), provides insights into the role of nationalism and its connection to modern nation-states. According to Gellner (1966), nationalism emerges in the context of industrialisation and modernisation. It suggests that as societies transition from traditional rural economies to industrialised ones, there is a need for a standardised, homogenised culture and identity to facilitate economic and political coordination. In this process, nationalism becomes a powerful force, promoting a shared national identity, language, and culture as essential elements of a cohesive nation.

In the context of the Boko Haram insurgency, Gellner's theory can shed light on the role of nationalism in conflict. Boko Haram, based in Nigeria, represents an insurgent group that has been driven by a

desire to establish an Islamic state based on strict interpretations of Sharia law. Gellner's theory suggests that in response to modernisation and the erosion of traditional values, groups like Boko Haram may promote a rigid form of nationalism that emphasises a particular religious or cultural identity as a means of resistance (Wood, 2008). Boko Haram's insurgency can be viewed as a manifestation of ethnic and religious nationalism conflicting with the broader Nigerian national identity (Posner, 2009).

Frustration/Aggression Theory

The Frustration/Aggression Theory was established by Dollard *et al.* (1939) and later refined by Berkowitz and Aubrey (1962). It appears to be the most typical explanation for violent criminal behaviour and related behaviours such as social unrest and disturbances, which a lack of demands being met may cause (Cederman *et al.,* 2010). Frustration, which arises when circumstances interfere with a goal-response, typically leads to aggression. According to this notion, aggression is the outcome of a person's attempts to achieve a certain goal that has been blocked or frustrated. It goes on to say that when the source of the dissatisfaction cannot be confronted, the violence is directed at an innocent target. The responsibility of every government is to provide the social, economic, and political environment for people to get by in life.

In many cases, such an enabling environment hardly exists. For example, Nigerian universities and tertiary institutions churn out hundreds of thousands of graduates yearly. Many graduates have little or no prospects of securing paid employment in the saturated Nigerian labour market (Roberts, 2019). Moreover, many poor and vulnerable people are confronted with existential challenges. Faced with such a bleak future, the natural tendency is for such people to become frustrated. This probably explains why, since Nigeria's return to civil rule in 1999, the country has witnessed a rise in the incidence of civil unrest, religious, ethnic, and communal conflicts with devastating impacts on human lives and property. Furthermore, insecurity has led to over 70,000 deaths in Nigeria between 2012 and 2020. The activities of the Boko Haram insurgents have serious implications for Nigeria's socioeconomic development. The previous disturbances may not be unconnected with bottled-up anger and frustration.

Research Methodology

The study used a qualitative research approach to get the necessary information from the intended participants directly. The selection of a research design is based on its efficacy and practicality in answering the study's research inquiries. A qualitative research approach was adopted for this study because the research problem cannot be fully studied, the research questions cannot be appropriately answered, and the research objectives cannot be achieved without collecting and analysing data for the study. The population for this study comprises all stakeholders in Borno, Yobe and Adamawa States, including members of the local communities, indigenous groups, government and private sector employees, members of NGOs, government agency representatives, and

separatists. The sampling size for this research was determined using convenience sampling as recommended by Krejcie and Morgan (1970).

The data was collected using a primary method of a self-structured interview. This was achieved by recruiting and training three Field Assistants (FAs) to administer the interview. The FA was recruited and trained from the sampled states (Borno, Yobe, and Adamawa) to administer the interview and other associated social issues. The criteria for the selection were that FAs reside in sampled states for convenience and easy access to the respondents. The data collected was transcribed and analysed using thematic forms.

Results and Discussion

The interviews were carried out across three (3) states in North-East Nigeria, Borno, Yobe, and Adamawa, where the effects of insurgency have been most deeply felt. In each state, I engaged with two (2) categories of participants: 3 local indigenes drawn from affected communities and 3 individuals identified as separatists or repentant insurgents. This gave a total of 6 participants whose voices were central to understanding both community perspectives and the lived realities of those who once took part in the conflict. The process of conducting the interviews required careful preparation and sensitivity, given the volatile history of the region and the personal experiences of the respondents. Access to participants was facilitated through local contacts and community leaders, who helped in building trust and ensuring that the individuals felt safe enough to share their stories. Neutral and familiar spaces such as community halls, private compounds, or discreet meeting points were chosen for the conversations to minimise fear, suspicion, or external interference.

Table 1 Interviewers' Profiles

Participants	State	Location	Gender	Age	Occupation
P_01	Borno	Maiduguri outskirts	Male	45	Farmer
P_02	Borno	Bama LGA	Female	41	Trader
P_03	Yobe	Damaturu LGA	Male	55	Farmer
P_04	Yobe	Gujba LGA	Male	36	Extension Worker
P_05	Adamawa	Mubi LGA	Male	42	Rice Farmer
P_06	Adamawa	Michika LGA	Male	38	Fisherman and Farmer

Each interview was guided by open-ended questions but allowed participants the freedom to narrate their experiences in their own way. The conversations were held in Hausa, Kanuri, or English, depending on the participant's preference,

with interpreters assisting where necessary. On average, each session lasted between 45 minutes and one and a half hours. Before beginning, I explained the purpose of the study and obtained the consent of each participant, assuring them of confidentiality and anonymity. While some agreed to have their voices recorded, others preferred that I only take notes, and their wishes were respected.

Theme 1: Boko Haram Influence on Internal Displacement and Migration Patterns

Table 2: Interview Transcripts

Participants	***Responses***
P_01	*"Before Boko Haram, my family and I farmed millet and sorghum on our ancestral land. But when the attacks began, our village was burned, and we had to flee to Maiduguri. Many farmers abandoned their farmlands, which became deserted or taken over by the insurgents. Displacement has forced us to live in an IDP camp, where we depend on aid, and farming is no longer possible as before."*
P_02	*"My trading business suffered greatly. The insurgency disrupted major market routes, and I could no longer move goods between towns. Many of my customers fled to other states like Gombe and Kano, while others crossed into Niger. I had no choice but to migrate with my family to Damaturu. The pattern of movement is now fragmented, families are scattered, and markets are empty compared to before."*
P_03	*"I used to cultivate rice and maize in my village near Mubi. But when Boko Haram attacked, we were displaced multiple times—first to Yola, then later to Gombe. Many farmers became migrants within the state or even across state borders, seeking safety. The cycle of displacement has made farming unstable because we don't stay in one place long enough to harvest. It has destroyed both livelihoods and community ties."*
P_04	*"As an agricultural extension worker, I witnessed firsthand how Boko Haram displaced farming communities. Many extension programs collapsed because farmers fled their homes, and extension agents could not access insecure areas. Migration patterns are now characterised by rural-urban shifts, with IDPs settling in towns and cities. This influx creates pressure on urban resources, while rural areas are left uncultivated and insecure."*
P_05	*"The Boko Haram crisis displaced me twice. Initially, I relocated within Yobe to stay with relatives, but later I moved to Kano to continue farming on rented land. Many rice farmers either stopped production or migrated southwards to safer regions. What I noticed is that migration is not always voluntary it is forced. Families often split up, with women and children moving to IDP camps while men search for farmland in safer states."*

P_06	*"I combined fishing and farming before the insurgency. But after Boko Haram attacked my village near the Lake Chad basin, I migrated with my family to a camp in Yola. Many fishermen like me lost access to the river and the lake because of insecurity. Migration patterns show that most people leave border villages and riverine areas for towns, while some cross into Cameroon. The result is that traditional livelihoods like fishing are disappearing."*

The analysis presented in Table 2 highlights the devastating socio-economic consequences of the Boko Haram insurgency, particularly in relation to displacement, livelihood disruption, and shifting migration patterns. Farmers and traders reported the loss of ancestral farmlands, abandoned markets, and interrupted trade networks, forcing many to migrate within and across state borders or into IDP camps, where survival now depends largely on aid. The testimonies show that migration is largely forced rather than voluntary, often fragmenting families and communities while undermining traditional livelihoods such as farming, fishing, and trading. Moreover, the accounts reveal how rural-urban migration has intensified, with displaced persons crowding urban areas and straining limited resources, while rural farmlands remain abandoned and insecure. Collectively, the responses underscore how insurgency-induced displacement not only destabilises economic activities but also erodes community cohesion and traditional systems of survival.

Theme 2: Boko Haram Conflict Impact on the Public Health Outcomes

Table 3: Interview Transcripts

Participants	***Responses***
P_01	*"The conflict has disrupted our farming activities and left many of us without enough food. When families cannot eat well, children and women often become weak and fall sick. Many clinics in the rural areas have been destroyed, so even when people are ill, they have to travel far to find treatment, and sometimes they die on the way."*
P_02	*"As a trader, I have seen how markets have collapsed because people are afraid of attacks. Without functional markets, people cannot buy essential food or medicine. Prices of basic drugs are now very high. Malnutrition and untreated illnesses are everywhere because both access and affordability are affected."*
P_03	*"Before the insurgency, we used to grow enough grains for our families and to sell, but now many of us have been displaced. In the IDP camps, overcrowding has caused diseases like cholera and measles. The lack of clean water and sanitation has made public health conditions even worse."*
P_04	*"From a professional view, the conflict has not only reduced agricultural production but also undermined rural health services. Many health workers have fled, and immunisation programs were interrupted. This has led to a resurgence of preventable diseases, particularly among children. The conflict is both a food security and public health crisis."*
P_05	*"In my area, many rice fields were abandoned due to insecurity. People depend on food aid, which is not enough or balanced. Poor nutrition has weakened people's immune systems, making them vulnerable to*

	malaria and other infections. Many pregnant women cannot access antenatal care, leading to complications and sometimes death."
P_06	*"The lake area used to provide fish and crops, but now movement is restricted, and people fear Boko Haram attacks. This has destroyed livelihoods. Without income, families cannot buy medicine or pay for hospital treatment. Mental health problems are also increasing because people live in constant fear, and this stress affects the body too."*

The analysis in Table 3 highlights the profound impact of conflict on food security, public health, and livelihoods. Participants consistently describe how violence and insecurity have disrupted agricultural activities, markets, and access to essential services, leading to widespread malnutrition, disease, and mortality. Displacement and overcrowding in IDP camps exacerbate health risks, with outbreaks of preventable diseases like cholera and measles, while destroyed or abandoned health facilities and fleeing health workers further compromise care. Economic livelihoods have been devastated, leaving communities dependent on insufficient aid and unable to afford medical treatment, while fear and stress contribute to deteriorating mental and physical health.

Discussion of Findings

The findings of this study reveal that the Boko Haram insurgency has had a significant influence on internal displacement and migration patterns in Borno, Yobe, and Adamawa States. This outcome is consistent with earlier studies, such as those by Owoeye *et al.* (2022); Khoirunnisa and Jubaidi (2025), which highlighted that violent conflicts and insurgencies in northeastern Nigeria have forced millions of individuals to flee their homes, either relocating to internally displaced persons (IDP) camps or seeking refuge in relatively safer urban centers. Comparatively, this study's results reinforce previous scholarship on how protracted conflicts intensify migratory flows. For instance, Madukwe *et al.* (2024) argued that Boko Haram's activities have created complex displacement trajectories, with some individuals experiencing multiple displacements due to recurring attacks in host communities.

Similarly, reports by Aleyomi and Nwagwu (2023) indicated that the northeast has one of the highest concentrations of internally displaced populations in Africa, a phenomenon linked directly to insurgent violence. However, this study also provides contextual nuance by focusing specifically on Borno, Yobe, and Adamawa, where displacement is not only shaped by the insurgency but also by secondary factors such as disrupted agricultural livelihoods and the collapse of local markets (Denisova & Kostelyanets, 2021). This confirms the broader literature while emphasising the localised socio-economic dimensions of forced migration in Nigeria's northeast (Denisova & Kostelyanets, 2021; Amah & Eze, 2023).

The finding that the Boko Haram conflict significantly impacts public health outcomes in Borno, Yobe, and Adamawa States aligns with previous research

highlighting the detrimental effects of armed conflicts on health systems and population well-being. Studies by Abbasov (2024) and Maharani *et al.* (2023) found that insurgency in Northeast Nigeria has led to widespread displacement, destruction of healthcare infrastructure, and limited access to essential medical services. However, earlier studies often focused broadly on the humanitarian crisis across the Lake Chad Basin. However, this current finding offers more localised insight into the unique health challenges within Borno, Yobe, and Adamawa States. Compared to reports from organisations such as Abba *et al.* (2023), which highlight widespread emergencies, these finding underscores how regional variations in conflict intensity affect health outcomes differently. For example, Borno, as the epicentre of violence, exhibits more severe public health deterioration than relatively less affected areas like Yobe.

Conclusion and Recommendations

It was evident that agricultural productivity has suffered substantial declines due to the destruction of farmlands, restricted access to arable land, and the displacement of farming communities. This is also premised on human capital development, which has been severely undermined through the destruction of schools, loss of skilled professionals, and interruptions in education and vocational training. Likewise, the internal displacement and forced migration have destabilised community structures, strained host communities, and exacerbated competition over scarce resources. The insurgency's impact on public health outcomes is equally alarming, with increased morbidity and mortality linked to the collapse of healthcare systems, poor sanitation in IDP camps, and heightened vulnerability to disease outbreaks. Despite the fact that governmental counter-insurgency policies have been introduced aimed at restoring stability, they have shown mixed outcomes, with some measures inadvertently contributing to socio-economic strain through restricted movement and security crackdowns. Conversely, NGOs have provided critical humanitarian relief and development support, though their reach and sustainability remain constrained by security risks and funding limitations. Based on the study's findings and the conclusions drawn from them, the following recommendations are made:

There should be more efforts by various governments to rebuild and secure educational facilities, implement mobile schooling in IDP camps, and incentivise the return of trained professionals. Aside from that, there is a need to invest in vocational training linked to local market demands to reduce youth unemployment and radicalisation risks.

The government should reconstruct and equip health facilities, deploy mobile clinics to inaccessible areas, and prioritise maternal, child, and mental health services. More so, there is a need to improve water, sanitation, and hygiene (WASH) infrastructure in displacement camps and host communities.

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