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# Nigeria

HUMANITARIAN  
SITREP No. 5

## Highlights

- Emergency Primary Health Care (PHC) services reached 917,329 people in the three most affected states in Northeast Nigeria; and UNICEF and its partners supported the measles vaccination of 421,890 children during the reporting period.
- In response to the confirmed case of Lassa fever, social mobilization was conducted in the 4 communities the index case visited during the course of her illness with over 1,000 people reached while the health workers in the hospital were trained/orientated on diagnosis, management of the disease and Universal precautions.
- A total of 21,330 people gained access to safe water and 25,795 people gained access to improved sanitation. UNICEF in collaboration with Rural Water Supply and Sanitation Agency (RUWASSA) dispatched a rapid response team to Dikwa with water trucking and water bladders to increase water availability to an additional 20,000 people.
- A total of 8 new partnership agreements (PCAs) are under negotiation with different INGOs to extend nutrition services to an additional 101,000 people and WASH services for 472,000 people.
- Thus far in 2017, psychosocial support was provided to 20,736 conflict affected children, while 1,252 unaccompanied and separated children received specialised support services.
- In 2017, UNICEF is requesting US\$ 146.9 million to reach four million people, including 2.1 million children. Funds available amount to US\$ 46 million representing a 69 per cent funding gap.

1-15 March 2017

### 8.5 million

Projected number of people in need of humanitarian assistance in the north east states of Borno, Adamawa and Yobe for 2017 (Humanitarian Response Plan, 2017)

### 1.76 million

IDPs in Borno, Adamawa and Yobe states, over 55 per cent are children (DTM Round XIV, February 2017)

### 4.4 million

Children in need of humanitarian assistance (HAC 2017)

### UNICEF Appeal 2017

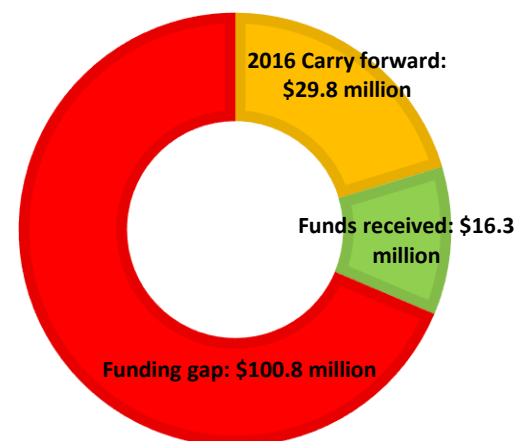
## US\$ 146.9 million

\*Humanitarian Action for Children (HAC), does not

## UNICEF and Partners Response

Indicators	UNICEF		Sector	
	UNICEF Target	Cumulative results	Sector Target	Cumulative results
# of conflict affected people provided with access to safe water per agreed standard	1,028,000	21,330	1,977,987	166,330
# Children <5 with SAM admitted to therapeutic feeding programmes	220,190	18,184	314,557	18,184
# of conflict affected people reached with emergency PHC services	3,919,357	917,329		
# of conflict affected children reached with psychosocial support	375,000	20,736	650,000	70,492
# of conflict affected children accessing education in a protective and safe learning environment	1,260,000	405,722	1,600,000	406,070

### 2017 FUNDS AVAILABLE



## Situation Overview & Humanitarian Needs

As of end of January 2017, a total of 1.78 million people are still internally displaced across the 3 north east states of Adamawa, Borno and Yobe, of which 83 per cent are in Borno state. Children represent 56 per cent of the total IDP population and 8.7 per cent are infants less than 1 year old. The large majority (69 per cent) of the IDPs continue to live in the host communities, with the remaining 31 per cent living in camps<sup>1</sup>.

According to IOM's Emergency Tracking Tool, a total of 3,852 new arrivals have been reported in Bama, Gwoza, Mobbar, Mubi South, Dikwa, Kala/Balge and Monguno from 10-14 March 2017 resulting from improved security in the LGA capitals which encourage IDPs to move back closer to their homes and military operations in inaccessible areas which enable IDPs to move to LGA capitals for protection. The Adamawa state government plans to close all camps by May 2017, however new IDPs are still being received. From Cameroon, a total of 64 new returnees of which 14 were children, arrived at the transit camp in Mubi North and are accessing health care services in the transit camp clinic supported by UNICEF.

The Education sector was alerted that hunger and the absence of school feeding is negatively impacting student attendance in camps throughout Maiduguri Metropolitan Council (MMC) and Jere. Many schools have reduced teaching time from 5 hours to only 2 hours per day as children are hungry. Similarly in Adamawa camps, where pupils do not receive school feeding anymore, attendance and class time has also been negatively affected. The Federal Government plans to adopt the National School Feeding System (which has already started in nine other states) for Borno, although it is planned to only target children in Early Childhood Development and Grades 1 to 3 (i.e. from 3 to 8 years old). UNICEF has brought the issue to the attention of the Commissioner for Education and the Inter-Sectoral Working Group through an advisory committee within the Education Sector, and enlisting the support of other humanitarian partners including WFP and INGOs.

In all IDP camps in MMC, Jere, Damaturu and Yola, maintenance of temporary and semi-permanent school facilities remains a huge challenge. In almost all sites where IDPs reside close to schools or Temporary Learning Spaces (TLS), structures built with local materials are being damaged by IDP communities pulling out wood to make fires for cooking. This issue was discussed with State Universal Basic Education Board (SUBEB) on several occasions including the possible deployment of security guards to protect premises.

## Humanitarian leadership and coordination

UNICEF co-leads with the Government the WASH, nutrition and education sectors as well as the child protection sub-sector; it is also an active member of the health sector. Regular information sharing takes place with the Emergency Operations Centre (EOC) in Abuja and in Maiduguri, alongside other UN agencies and line ministries. UNICEF continues to strengthen coordination, increase operational capacity at the field level, expand NGO partnerships, engage community-level social mobilizers and strengthen existing UNICEF programming systems to reach the most vulnerable. For example, local coordination mechanisms are being set up by the Child Protection sub-sector in Damaturu (Yobe State) and Konduga and Monguno (Borno State). Similarly, the WASH sector is forming a number of technical advisory groups to iron out technical issues that do arise within the sector. Currently there exists the Hygiene and Sanitation Technical Working Group (to harmonise hygiene promotion IEC materials) and the WASH NFIs technical advisory group (to come up with a basic content for a starter dignity kit for quick response).

## Humanitarian strategy

In 2017, UNICEF is scaling up the delivery of an integrated package of humanitarian interventions to affected populations in Borno, Yobe and Adamawa states, through a combination of static and mobile responses in IDP camps, host communities and newly liberated areas. This work is being done in coordination with the Government, other United Nations agencies, and non-governmental organizations (NGOs). The package includes nutrition services such as SAM treatment, promotion of infant and young child feeding and provision of micronutrient supplementation through community outreach; support to health facilities, immunization and maternal, new-born and child health week campaigns, while also improving primary health care service outreach; rehabilitation and construction of safe water access points and sanitation facilities along with hygiene promotion, including in health facilities, schools and child-friendly spaces; psychosocial support for children (including in safe spaces and schools), services for unaccompanied and separated children and reintegration support for children and women associated with Boko Haram; and establishment of temporary learning spaces, additional classrooms, support to teachers, and distribution of learning materials for students.

UNICEF is also scaling up and improving the outreach and quality of response by encouraging partners to move towards mobile outreach interventions integrating health and nutrition responses to increase coverage. UNICEF is diversifying and strengthening its partnerships to increasingly work with reliable NGO partners to target both IDPs in host communities (including the host community

<sup>1</sup> IOM DTM Nigeria Round XIV Report, February 2017

populations) and IDPs living in newly accessible areas. Additional investment is being made in supporting NGO programme costs and strengthening their operational capacity to scale up and improve quality and timeliness of the response.

## Summary analysis of programme response

### Health:

So far, in 2017, a total of 917,329 people received Primary Health Care (PHC) with support from UNICEF health team. During the reporting period, a total of 160,998 women and children in Borno, Yobe, and Adamawa were reached with integrated Primary Health Care (PHC) services. The total medical consultations was 51,062, with malaria being the most common condition treated (with 15,525 Malaria cases, 10,995 Acute Respiratory Infection cases, 4,818 Acute watery diarrhea, 83 measles cases and 19,641 other medical conditions). A total of 85,218 children and pregnant women were immunized with various antigens (including 5,329 children aged from 6 month to 15 years immunized against measles), 9,964 received Vitamin A supplementation; Albendazole for deworming reached 11,196 children, Total Antenatal Care (ANC) was provided to 2,288 women, 760 safe deliveries were assisted and Post Natal care provided to 510 women.

In order to respond to the cases of measles being reported mostly among the new arrivals, routine vaccination has been intensified in all IDP camps and transit points to ensure all new arrivals are immunized. UNICEF along with other partners supported the Borno State to conduct reactive measles vaccination campaign from 14<sup>th</sup> to 17<sup>th</sup> March 2017 in 7 LGAs with large number of new arrivals (Bama, Dikwa, Mobbar, Monguno, Jere, MMC, Kukawa) and 5 LGAs with confirmed outbreaks (Damboa, Hauwul, Bayo, Kwayakursa and Shani) targeting a total of 416,561 children between 6 month – 15 years. UNICEF is responsible for vaccine logistics and social mobilization.

On March 16, a fire incident destroyed the Mandarari Internally Displaced Persons (IDP) Camp in Konduga including the UNICEF supported clinic that provides health services to 4,600 people. The camp accommodated 6,200 IDPs, of whom 3 died and were injured in the incident. In response, UNICEF has provided tents and hospital equipment to the SPHCDA for immediate restoration of the health services.

### Nutrition:

In 2017, a total of 18,184 SAM children with SAM (8% of 314,557 Sector target) have been admitted into therapeutic programs, including 4,215 children reached during the reporting period. The quality of the Community Management of Acute Malnutrition (CMAM) programming is within the sphere standards. The CMAM program is being scaled up in three LGAs (Bayo, Biu and Kwaya Kusar) of Southern Borno through the training of 32 health workers and sensitization of 56 community leaders on CMAM, active case finding with referral and defaulter tracing in order to establish 8 new CMAM treatment sites in wards that currently have none. In these new CMAM sites 49 new SAM cases were admitted from 7-10<sup>th</sup> March 2017.

A total of 4 partnerships with nutrition partners<sup>2</sup> in Borno have been developed and 6 under discussion<sup>3</sup> to support the improvements in quality and coverage of services as well as continuum of care through active case finding, referral and follow-up of cases. These partnerships are expected to reach an estimated 159,200 SAM children.

### WASH:

With support from UNICEF and its partners, 3,211 IDPs and host population gained access to improved water sources in Borno and Adamawa State. In Borno, water access was established mainly through rehabilitation of broken down water sources in Muna Da'alti and Dala, host communities. In addition, 3 hand-pump boreholes were also rehabilitated in 3 communities in Yola North LGA, in Adamawa State.

WASH NFIs were distributed in Borno and Adamawa reaching 22,697 people who also benefited from hygiene promotion activities organised both in camps and host communities. Another 20,182 people were reached through hygiene messages alone in Borno, Yobe and Adamawa States. In Banki, after the Nigerian Army reopened the town they requested the population to move into vacant houses which sometimes contain up to 30 people in one house living in insalubrious conditions. To improve access to sanitation facilities, UNICEF and its partner built of 80 emergency latrines benefiting to 4,000 internally displaced people.

UNICEF in collaboration with Rural Water Supply and Sanitation Agency (RUWASSA) has dispatched a rapid response team to Dikwa with water trucking; pumping and collection equipment that will immediately increase water availability to an additional 20,000 people.

### Child Protection:

<sup>2</sup> AAH, ALIMIA, IMC and IRC

<sup>3</sup> CARITAS, Intersos, Médecins du Monde, PLAN International, Première Urgence Internationale and SC

During the reporting period, a total of 2,909 children (1,539 boys and 1,370 girls) in Borno (2,111), Adamawa (498) and Yobe (300) states were provided with tier 1 psychosocial support (PSS), contributing to a total of 20,736 children supported. In addition, 28 new Child Friendly Space community volunteers were trained on PSS, child protection and gender in two new programme sites (Galtimari host community and Custom Corner).

With UNICEF support, partners CHAD, COOPI and Plan International, registered and provided support to 300 unaccompanied and separated children (146 boys and 154 girls) and 25 children at risk (13 boys and 12 girls) in Borno, Yobe and Adamawa states. In partnership with CHAD International, 106 separated children (52 girls and 54 boys) and 27 unaccompanied children (9 girls and 18 boys) were provided case management support. Likewise, COOPI provided case management support to 121 separated children (64 girls and 57 boys) and 3 unaccompanied children (2 girls and 1 boy) in three 29 wards of three LGAs of Yobe. Plan International provided case management support to 30 separated children (13 boys and 17 girls) and 3 unaccompanied boys in Adamawa state. During this reporting period, UNICEF's partner CHAD International reunified 19 unaccompanied children (8 girls and 11 boys) and 10 separated children (2 girls and 8 boys).

UNICEF through its partner WINN provided short-term reinsertion assistance (cloths, slippers, blankets, soap and detergent) to 187 children (77 boys, 110 girls) who were rescued/escaped/surrendered in Mafa and Konduga. During the reporting period, 7 children associated with armed groups (6 in Gwoza and 1 in Konduga) were identified, profiled and are provided support for socio-economic reintegration.

### Education:

During the reporting period in Borno, UNICEF in collaboration with the SUBEB trained 32 master trainers (female 3 male 29) on psycho-social support (PSS) and Conflict and Disaster Risk Reduction who will provide teacher training for 984 teachers in Borno and Yobe state. So far, 407 primary school teachers from 11 LGAs and 67 schools were trained (female 125 male 282) on PSS and pedagogical skills and effective classroom contents delivery. It is estimated that over 60,000 children will indirectly benefit from improved education through these trainings.

During the reporting period a total 17,000 children, already enrolled in previous months, received school bags and school supplies delivered in 17 schools in 6 LGAs: in Gubio, Mafa, Konduga, Magumeri, MMC and Jere and 10 TLS were established in Fika LGA (Yobe) benefiting to 500 children who were already enrolled.

### Communication for Development (C4D):

In Jere LGA on Saturday, 4th March 2017, the communication specialists from UNICEF, the State Ministry of Health (SMOH) and WHO sensitized/trained 250 traditional and religious leaders, youth and women groups and 20 VCMs at Zabarmari on the prevention and control of Lassa fever following the reported case in the area. In Old Maiduguri ward of Jere LGA, 150 traditional and religious leaders, youth and women groups were also sensitized including 45 VCMs. The sensitization/training was conducted by the state Ministry of Health with support from UNICEF and WHO. The same day, SMOH in collaboration with WHO and UNICEF conducted Lassa Viral Hemorrhagic Fever orientation sessions for 150 persons comprising of VCMs, VWS, Bulamas, representatives of youth organizations, religious leaders, women leaders, Youth Vanguard and members of the CJTF (Civilian Joint Task Force) from Madinatu community at Old Maidiguri Primary. On 5th March the second orientation session at Zabarmari settlement reached another 250 persons including VCMs, VWS, Bulamas, representatives of youth organizations, religious leaders, women leaders, Youth Vanguard and members of the CJTF.

A total of 685 new-borns in 17 LGAs in Borno were tracked down, out of which 634 were vaccinated with zero doses of OPV and referred to health facilities for other Routine Immunization antigens.

In Yobe, Volunteer Community Mobilisers (VCM) conducted house to house mobilization and tracking for Antenatal Care (ANC), Routine Immunization (RI) and Community Management of Acute malnutrition (CMAM) as well as community dialogue sessions in 7 high risk LGAs to address issues of non-compliance. At the Pompomari and Kukareta IDP camps, a total 49 pregnant women were mobilized by VCMs to benefit from free ANC services while 464 children were screened with Mid-Upper Arm Circumference (MUAC) tape for CMAM services where 3 children were in yellow, none in red.

## Funding

In 2017, UNICEF is requesting US\$ 146.9 million to reach more than four million people, including 2.1 million children. Funds available amounts to US\$ 46 million including US\$ 29.8 million carry-over funds from 2016, representing a 69 per cent funding gap. UNICEF wishes to express its deep gratitude to all public and private sector donors for the contributions and pledges received, which make possible life-saving and essential basic services to children and their families. Donor support is critical to continue scaling up the response in Borno, Yobe and Adamawa states.

Funding Requirements (as defined in the 2017 Humanitarian Action for Children (HAC))				
Appeal Sector	Requirements	Funds available*	Funding gap	
			USD	%
WASH	19,137,663	6,129,226	13,008,437	68%
Education	31,435,344	15,468,172	15,967,172	51%
Health	25,007,231	1,711,837	23,295,394	93%
Nutrition	40,217,105	14,412,517	25,804,588	64%
Child Protection	27,230,558	5,440,079	21,790,479	80%
EPR	3,840,000	2,886,858	953,142	25%
<b>Total</b>	<b>146,867,901</b>	<b>46,048,689</b>	<b>100,819,212</b>	<b>69%</b>

\*Funds available includes funding received against current appeal as well as carry-forward from the previous year.

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## Annex A: Summary Analysis of Programme Response against 2017 HAC targets

Sector	Sector Response			UNICEF and IPs		
	Sector target	Sector total results	Change since last report	UNICEF 2017 target	UNICEF total results	Change since last report
<b>NUTRITION</b>						
Number of children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care for specified period of time	314,557	18,184	4,215	220,190	18,184	4,215
Proportion of children 6-59 months with severe acute malnutrition recovered	>75%	81%	0%	>75%	81%	0%
Number of caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding	731,332	18,920	18,920	511,932	9,496	9,496
Number of children 6-23 months in the affected areas receiving multiple micronutrient powder	561,078	15,806	280	280,539	15,806	280
<b>HEALTH</b>						
Number of children 6 months - 15 years vaccinated against measles				1,763,711	3,751,769 <sup>4</sup>	421,890
Number of people reached with emergency primary health care services				3,919,357	917,329	160,998
Number of families reached with LLITNs				653,226	0	0
<b>WATER, SANITATION AND HYGIENE</b>						
Number of people provided with access to safe water per agreed standards	1,977,987	166,332	3,211	1,028,000	21,330	3,211
Number of people with access to improved sanitation facilities	418,000	42,170	4,000	217,000	25,795	4,000
Number of people reached through hygiene promotion Campaigns/ received WASH hygiene kits	1,114,238	94,371	22,697	1,028,000	86,238	22,697
<b>CHILD PROTECTION</b>						
Number of children reached with psychosocial support (including through CFS and child clubs)	650,000	70,492	5,438	375,000	20,736	2,909
Number of children and women associated with armed groups/victims of SGBV <sup>5</sup> supported with reintegration services	5,500	407	10	5,500	301	10
Number of unaccompanied and separated children supported (case managed, including those supported in alternative care arrangements)	12,000	2,287	300	9,200	1,252	300
Number of children reached with Mine Risk Education	104,000	19,645 <sup>6</sup>	0	104,000	0	0
<b>EDUCATION</b>						
Number of school-aged children including adolescents reached by schools/temporary facilities in safe learning environment	1,600,000	406,072	0	1,260,000	405,722	0
Number of school-aged children reached with learning materials	1,600,000	19,523	17,000	1,260,000	19,523	17,000

<sup>4</sup> This result includes 3,319,404 children vaccinated in January 2017 as part of the delayed vaccination campaign which was initially planned to occur in late 2016.

<sup>5</sup> Including victims of forced marriage and sexual violence and children born out of sexual violence.