

UNICEF NIGERIA

Monthly Humanitarian Situation Report

September- October, 2013

Highlights

- As of August 2013, a total of 17,964 children with Severe Acute Malnutrition were admitted to 495 UNICEF-supported Community Management of Acute Malnutrition sites across Northern Nigeria
- An Interagency assessment conducted between 15-20 September in the State of Emergency areas of Borno, Yobe and Adamawa - and in the neighbouring states of Bauchi, Gombe, Taraba and Jigawa - showed that 5,973,692 people are affected by the State of Emergency, 3 million of whom are women and children
- UNICEF Nigeria Country Office requires US\$5 million for the Sahel response in 2013. Despite security challenges in some states in Northern Nigeria, especially following the declaration of state of emergency in May 2013, UNICEF and partners continue to provide lifesaving interventions to vulnerable children and women.
- UNICEF Nigeria is working with WHO, the National Primary Health Care Development Agency and other partners, implemented an integrated measles and polio vaccination campaign targeting 16 million and 19 million children respectively.

Situation overview and humanitarian needs

- Food insecurity and security challenges remain critical in the Sahelian States of Nigeria especially in the north-eastern States of Adamawa, Yobe and Borno where the government has declared a state of emergency since May.
- According to Famine Early Warning Network System, the conflict in north eastern Nigeria continues to restrict business activities and has increased the cost of trade due to risks undertaken by traders and the disruption of telecommunication in the emergency states.

Estimated Affected Population	Total	Male	Female
Total population in affected regions	43,650,101	21,388,549	22,261,552
Children Under 18 in affected regions	22,698,052	11,122,045	11,576,007
Children Under Five in affected regions	8,730,022	4,277,711	4,452,311
Children 6 to 23 months in affected regions	2,733,200	1,339,268	2,733,200
Pregnant women in affected regions	2,182,505	N/A	2,182,505
Children Under Five with Severe Acute Malnutrition	296,950	145,285	151,215
Children Under Five with SAM and medical complications	29,650	14,528	15,121
Children Under Five with Moderate Acute Malnutrition	910,516	446,152	464,363
Total Displaced Population (a proportion of the above)	N/A	N/A	N/A
Children displaced	N/A	N/A	N/A

- Source: 2013 estimates are based on initial figures from 2012 Nigeria National Population projected figure, Humanitarian Action Update July 2012 & Nigeria Nutrition SMART Survey, September 2012

State of Emergency (SoE)

A third interagency assessment was conducted between 15-20 September in the emergency States of Borno, Yobe and Adamawa, and in the neighbouring states of Bauchi, Gombe, Taraba and Jigawa. 5,973,692 people have been affected by the State of Emergency, an estimated 3 million of them women and children. The objective of the assessment was to determine population needs, movements of internally displaced persons and the level of access to the region. In the past four weeks over 52 civilians, 40 of them students have been killed through incidents of kidnappings, highway robberies and burning of schools.

Immediate priorities identified in emergency states

Health

- Supply of essential drugs and disposables in health facilities.
- Access to basic health care services, mainly provided through bordering States.

WASH

- Provision of water and sanitation services especially in areas of population upsurge.

Shelter and NFIs

- Humanitarian needs of large numbers of IDPs who have lost property and homes.
- Emergency support in lieu of damaged schools, water and sanitation networks.

Education

- Need for mapping of damaged/destroyed schools and psychosocial support for students.

Security

- Need for increasing security along the roads leading to and from the State of Emergency.

Livelihood/Food Security

- Expansion of cash transfer programme to the affected areas including emergency States.
- Advocacy for the government to release grains from the national reserve to ameliorate the high food prices in the emergency states

Protection

- Support for Child Protection Networks to continue monitoring, reporting and responding to child rights violations in the SoE states as well as to establish better understanding of protection caseload in the SoE states and neighbouring states.

Response to the emergency States

- Routine immunization/polio eradication efforts through reinforced health outpost services
- Implementation of integrated measles campaigns including in emergency States and other northern states.
- Development of inter-agency response plan with UNICEF leading in Nutrition, WASH, Education sectors and Child Protection sub sector.
- Comprehensive mapping of humanitarian gaps, a process being led by the World Bank.
- Increased government attention in budget allocation to the emergency States.
- UN advocacy for the government to build population immunity in the security-compromised areas of Borno and Yobe. These include the deployment of Permanent Health Teams, health camps and other special approaches.

Communal clashes

Nasarawa State

- Mid-September attacks in Adabun Alagbo, Obi town and Assakio communities, setting fire to and large-scale destruction of houses and targeting of people from the Alago tribe.
- 6,910 persons (3,709 children) displaced from several communities in Quan Pan Local Government Area of Plateau State, for the fear of being killed.

UNICEF Response

- UNICEF provided 140 Blankets, 140 mattresses, 40 cups, 20 plastic buckets, 70 cartons of sanitary pads, 20 cartons of toilet soap and 35 cartons of detergents.

Inter-Agency Collaboration and Partnerships

- The National Emergency Management Agency (NEMA) and partners, including UNICEF, have developed response plans following needs assessment conducted in emergency States.
- UN, NGOs and international humanitarian actors are supporting government through NEMA to develop a Humanitarian Action Plan (HAP), 2013-2015 in support of re-occurring floods and other disasters such as drought and conflict. UNICEF is leading and coordinating WASH, Education, Nutrition sectors and Child protection sub-sectors in developing the HAP for Nigeria.

- Inter-sectoral coordination mechanisms are improving in Nigeria. Through the leadership of the Residence Coordinator/Humanitarian Coordinator's Office, mapping of partners, sector-specific response plans and orientation of standard tools for humanitarian response have been improved. UNICEF in collaboration with OCHA are working together to build capacity of civil societies and national NGOs in humanitarian preparedness and response.

Programme response

SAHEL NUTRITION RESPONSE

The below table contains priority indicators for 2013 for the Sahel Nutrition Crisis

	Sector	Estimated # / % coverage	UNICEF & operational partners			Sector / Cluster		
			UNICEF Target	Cumulative results (#)	% of Target Achieved	Cluster Target	Cumulative results #	% of Target Achieved
SAHEL NUTRITION RESPONSE	Nutrition	Children <5 with SAM admitted to therapeutic care	296,950	159,008	54%	296,500	159,008	54%
		All children <5 with Severe Acute Malnutrition discharged ¹	N/A	138,921	N/A	N/A	138,921	N/A
		Children <5 with Severe Acute Malnutrition discharged recovered	75% of all exits	108,659	78.2%	75% of all exits	108,659	78.2%
		Number of health centres with SAM treatment	550	495	90%	550	495	90%
		UNICEF Operational Partners: Federal and State Ministry of Health, National and State Primary Health Care Development Agencies, Save the Children-International, ACF, MSF, Valid International						
	WASH	Nutritional centres delivering the WASH minimum package*	478	298	62.3%	478	298	62.3%
		# of nutritional centers with water facility	329	196	59%	329	196	59%
		# of nutritional centers with access to sanitation facilities	329	220	66.6%	329	220	66.6%
		# of hygiene kits with key hygiene messages distributed to SAM affected carer/mother/child ¹	29,342	14,225	48.5%	29,342	14,225	48.5%
		UNICEF Operational Partners: RUWASA						

*Minimum package: Water purification sachets – 2.5g, 25 L Jerry can, 10L Jerry can, 20L Bucket with lid, White Filter Cloth, 1L Plastic cup, Plastic kettle, 250g Toilet soap, 200g Laundry soap, Sanitary pad (adult female)

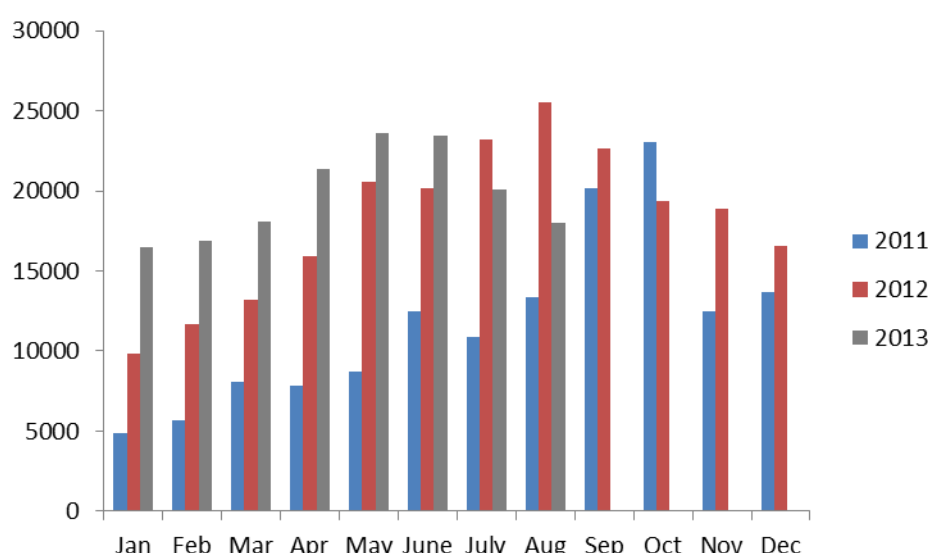
UNICEF and partners' programming

Nutrition

- In August, 17,964 children were in Severe Acute Malnutrition (SAM) in the CMAM program; 14,899 children were discharged, 11,684 of whom recovered. Overall recovery rate remains at 78.2 %; default rate stood at 17.1% and death rate at 1.2%. Generally, the key performance indicators remained largely in line with recommended SPHERE standards. However, discussions are underway to analyze the causes and way forward to address the default rate.

¹ The target is for families with SAM affected children

- CMAM admissions in June 2013 were lower compared to earlier months of 2013. However, monthly CMAM data from Adamawa state for August has yet to be received from the State Ministry of Health; this will be included in the next report.
- Overall achievement of CMAM admission as of August remains at 54%, which is lower compared to the annual target. The nutrition team in Abuja and field offices have been reviewing and discussing the factors and way forward to address the challenges for lower achievement as compared to the target set for 2013.



- RUTF was rationed efficiently, with intensified stock monitoring and redistribution of supplies, from the States which had surplus stock level to the States that experienced stock outs. This was one of the useful lessons learnt to maintain closer monitoring on the RUTF supplies from State warehouses to LGAs to PHCs/CMAM sites to the end user. RUTF supplies for the CMAM program has stabilized with additional supplies coming in as of end of August 2013.
- In addition to reallocation of RUTF supplies between states, a number of other actions were taken to overcome the critical pipeline situation, and some of the actions were: i) fast track of RUTF orders for an overall quantity of 168,000 cartons of RUTF, and ii) exploring the feasibility of moving 12,000 cartons from Douala whether by sea or inland transport to northern states in Nigeria.
- CMAM monthly review meetings were conducted as planned to collect and collate CMAM statistics and to review the progress and challenges on programme implementation. As part of improving financial and material support for the CMAM program, a quarterly review meeting was undertaken in Sokoto State with Chairpersons of CMAM LGA's and State level stakeholders.
- Concerning implementation of community Infant and Young Child Feeding (c-IYCF) programme, joint Operational Plans were developed by State Partners of Jigawa, Kano and Adamawa for the rollout of c-IYCF (nutrition) and Community Led Total Sanitation (CLTS-WASH) as part of resilience building:
 1. 66 health workers have been trained on c-IYCF group and individual counselling, c-IYCF Supportive Supervision, Monitoring and Mentoring and CLTS;
 2. A total of 90 Communities have been triggered for CLTS and IYCF in a total of 6 LGAs in the 3 States (30 communities per State, 15 per LGA, 3 per ward);
 3. A total of 90 c-IYCF Support Groups formed;
 4. A total of 1,350 IYCF Support Group Members, comprising of pregnant, breastfeeding mothers, men and grandmothers trained on CIYCF counselling, focusing on the Support group methodology; and

5. c-IYCF support group sessions/meetings began in all 90 communities in the 3 States.

- Counselling on IYCF practices has been taking place in communities where community support groups were assisted by trained community volunteers in all the 4 Sahel States. However, data on key indicators has not been systematized to facilitate its collection and collation.
- First round of nutrition survey using SMART methods in 24 States of four Zonal field office areas has been completed. This survey aims at providing nutritional status data for children age of 6-59 months and its determinants (release of results scheduled for early November).
- Kwara State implemented its Mother and Child Health week (MNCHW) interventions from 26-30 August, as there was a delay while the other states completed MNCHW in July 2013. Overall coverage of Vitamin A supplementation (VAS) has been 70%, the region-wide coverage ranges from 46% to 89% (i.e. the highest coverage being 89% on South West region and the lowest coverage 46% in North East region). Among the Sahel areas, the VAS coverage ranges from 42% to 89% (i.e. the highest being 89% in Jigawa state and 42% in Kano state).

WASH

- WASH Emergency Contingency Plans for Enugu and Anambra States were reviewed. Additionally, the same review was done for Benue, Bayelsa and Cross River States in preparation to the flooding disaster.
- UNICEF is leading the draft of the Joint Humanitarian Action Plan WASH for 2014-2015, the process is done in a consultative process with other partners planned to be completed by the end of October.
- Pretesting of the hygiene promotion and advocacy materials for emergency was carried out in Jos Plateau state using radio jingles, posters translated into 5 languages Hausa, Igbo, Yoruba, Efik and Pidgin English.
- 4 Hand pump boreholes have been flushed and repaired in Cross Rivers state benefitting 2,000 persons.
- 5 motorized water facilities and one hand pump facility constructed/rehabilitated in Ndokwa East, Aniocha South and Isoko South LGAs of Delta State benefitting 22,500 persons.
- 3 motorized water facilities are also rehabilitated in Esan South East, Etsako Central LGAs of Edo State benefitting 5,000 persons. Additional 4 are to be rehabilitated in Etsako Central and Etsako East LGAs of Edo to support the flood affected.

Sanitation intervention

- 10 blocks of 5-compartment VIP latrines are provided in schools in Ndokwa east, Aniocha South and Isoko South LGAs schools and former camps during the flooding to serve 10,000 persons in Delta State.
- 5 blocks of 5-compartment VIP latrines are provided in schools in Etsako East, Etsako Central and Isan South East LGAs schools and former camps during the flooding to serve 10,000 persons in Edo State.

Health

- Planning the revitalization of the PHC services in security challenged states including those under a state of emergency. UNICEF will distribute Inter-Agency Emergency Health Kits (IEHK) to initially 210 centres and support service delivery in these facilities and their catchment communities.
- 2nd round of Maternal, Newborn and Child Health weeks planned for November. These weeks deliver a package of high impact interventions including immunization, deworming, vitamin supplementation, ITN, IEC and mama kits.

- Implementation of a nationwide integrated measles and polio campaign targeting 30 million children aged less than five years; a meningitis vaccination campaign in eight high risk states to reach 22 million people in October and November.
- A yellow fever vaccination campaign scheduled for early December to reach some 9 million people in three very high risk states.

Polio

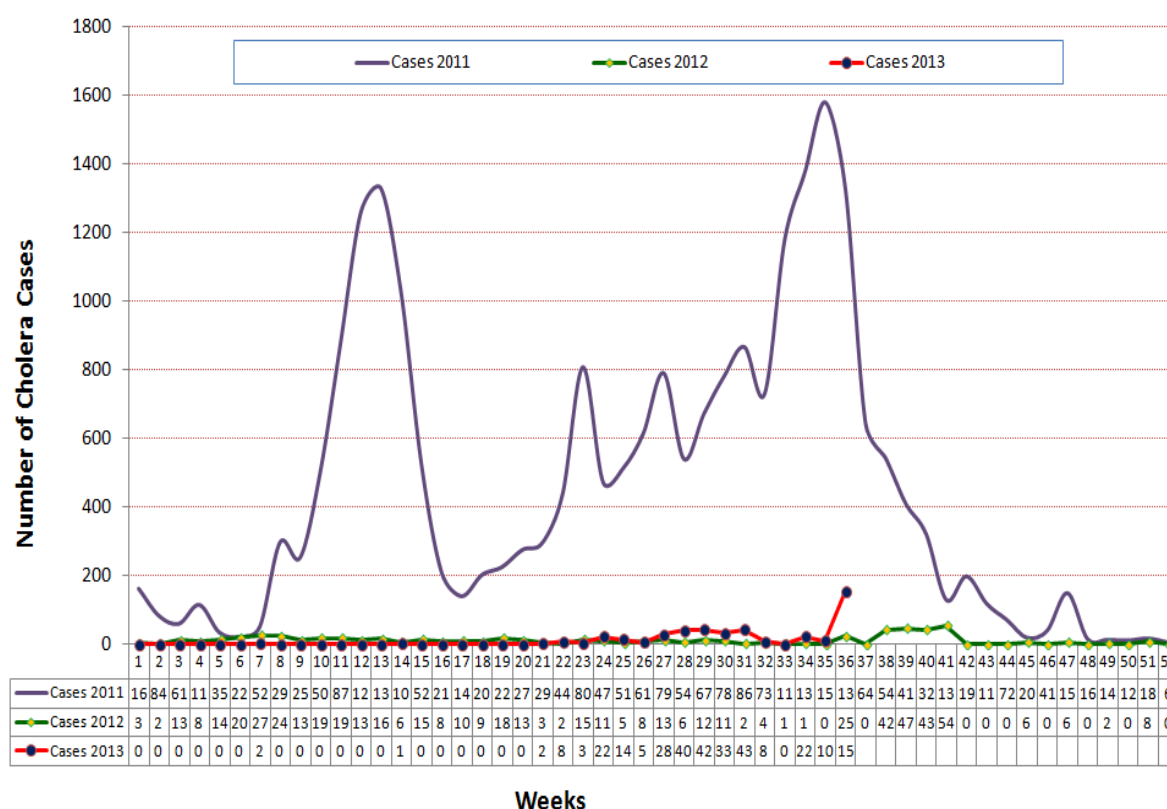
- Nigeria has reported a total of 49 cases of polio in 2013, compared to 102 cases for the same period in 2012. 72% of the cases in 2013 are from Borno, Yobe and Kano. It is important to highlight that 23 cases are from Borno and Yobe where insecurity has hampered access to children during planned polio campaigns.
- Borno and Yobe conducted polio campaigns in September. Access improved in some LGAs of Borno, with more LGAs implementing the campaign. Borno and Yobe also implemented the integrated measles campaign from 5 October. 24 out of 27 LGAs were able to implement the campaign as scheduled in Borno.
- UNICEF and WHO, together with other partners, are supporting the government to develop special plans to build population immunity in the security-compromised LGAs of Borno and Yobe. These include the deployment of Permanent Health Teams, health camps and other special approaches.
- Government and partners are currently planning a sub-national campaign in early November which will include Borno and Yobe. Special focus will be placed on improving campaign quality in 70 very high risk LGAs across northern Nigeria, as well as Borno and Yobe.

Diseases outbreak

Cholera

In week 36, a total of 154 suspected cases of Cholera with 8 deaths were reported from Nassarawa and Oyo States. Cumulatively from weeks 1-36 (2013), 437 suspected cholera cases were reported with 27 deaths (CFR 6.2%) from 14 LGAs in 9 States of which 17 cases had lab confirmation as cholera (cf. 389 suspected cases and 5 deaths from 24 LGAs in 8 States over the same period in 2012).

Reported Cholera Cases by Week, 2011-13



Lassa fever

- No new case of Lassa fever was reported in week 36. Cumulatively from week 1-36 (2013), 1,134 suspected Lassa fever cases with 33 deaths (CFR 2.9%) were reported from 26 LGAs in 13 States. A total of 154 cases have been confirmed by the laboratory.

Cerebral Spinal Meningitis (CSM)

- 793 suspected CSM cases were reported in weeks 01-36 (2013) with 42 deaths and Case Fatality Rate of 5.3%.
- So far, between week 01 and week 36 (2013), 116 LGAs (27 States) have reported at least one suspected CSM case. Aliero and Gwandu in Kebbi State, Shagari and Tambuwal LGAs (Sokoto State) reached Alert /Epidemic Threshold between week7 and week15.
- In the reporting week (Week 36), 3 suspected CSM cases and 0 deaths were reported. No LGA crossed Alert / Epidemic Threshold in the reporting week.
- UNICEF and partners in epidemic prone states are working closely to strengthen early warning, preparedness and timely response to epidemics.
- UNICEF is working with WHO, partners and the NPHCDA to implement a preventive meningitis vaccination campaign in 8 high risk states targeting.

Education

- With attacks on schools in Nigeria on the rise and the subsequent loss of lives of students and faculty, the Education in Emergency Working Group (EiEWG) paid a courtesy visit to the Hon. Minister of Education, Prof. Ruqayyat Rufa'i to discuss how to best approach the prevention of further attacks on schools and restore confidence among parents, students and teachers in the affected areas.
- The group raised concerns regarding the drop in school attendance, notably in the northeast where a state of emergency has been declared. Since 16 June, a total of 88 students (40 are

student killed at the Agriculture College in Yobe) and seven teachers have reportedly been killed in four attacks.

- The Minister promised to continue to support the activities of the group and made assurances that necessary mechanisms would be put in place, in collaboration with relevant stakeholders (including the security agencies) to ensure the safety of students and teachers especially in the northeast.

UNICEF Response:

- During this reporting period, UNICEF has trained 197 Emergency Preparedness and Response (EPR) focal officers in Education Sector on emergency preparedness, disaster risk reduction, climate change and contingency planning. These figures make a total of 317 trained since 2010.

Child Protection

- In Borno, in response to the violence, Borno Child Protection Network (CPN) is working on establishing three child friendly spaces (CFS). CPN had originally planned for these to be established in Baga, Bama and Baga Kwawa communities as a result of the April, 2013 violence, but they were unable to gain consistent access to these areas. Thus, CFS will instead be set up in Mafoni, Umarari and Maiduri communities, which have also been affected by violence. CPN Borno was also able to reunify two children they discovered in Baga in August with their families.
- Adamawa CPN has been established in August and 4 cases of separated children, sexual abuse and children in conflict with the law have been reported and responded by Adamawa CPN to date.
- Yobe CPN launch is planned in November in order to step up monitoring and reporting of incidences of child protection violations in the state.
- Birth registration in CMAM: By incorporating routine birth registration into an increasing number of CMAM centres being established, more children (and particularly those most marginalized) are better able to access birth registration activities. Between January and September 2013 about 147,571 children have been registered in the CMAM centres.
- To increase coverage and build an efficient workforce to cover birth registration activities within those CMAM centres, a structured framework is being employed as an approach to complement recording, reporting and registration of births and deaths of these under-five children. This is done through the signing of MOUs/Plan of Action between States' Ministry of Health and National Population Commission. For example, amidst all the odds and in spite of the 'hostile' programming environment, Borno State Ministry of Health has signed the MOU with the National Population Commission, while training for health workers on conducting birth registration activities including in the CMAM centres will commence soonest.
- Strong collaboration exists between Yobe State Government and the National Population Commission. In September 2013, the state government supported training of 534 sub-registrars who have currently been deployed to all the 178 wards in Yobe State and set up a high level Committee (headed by the Secretary to the state government) to revamp Vital Registration in the state, to boost the current low level coverage of under-5 births including children accessing CMAM centres.
- Adamawa state is also set to sign the MOU. Draft MOU received full attention, support and involvement of Adamawa State Ministry of Health and Justice. The Ministry of Health has provided Adamawa state National Population Commission (NPopC) with list of all health workers in specific health facilities that will be engaged in registering births of new born and under -1 children.

Human Resources

- In response to the emergencies in Nigeria, currently there are 8 Staff mobilized and in country, 4 under recruitment and 4 post not yet funded.

Next SitRep: 28 November 2013

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