



OCTOBER
TO
DECEMBER
2022



UNFPA NIGERIA
HUMANITARIAN
SITUATION REPORT:
FOCUS NORTH-EAST
CRISES

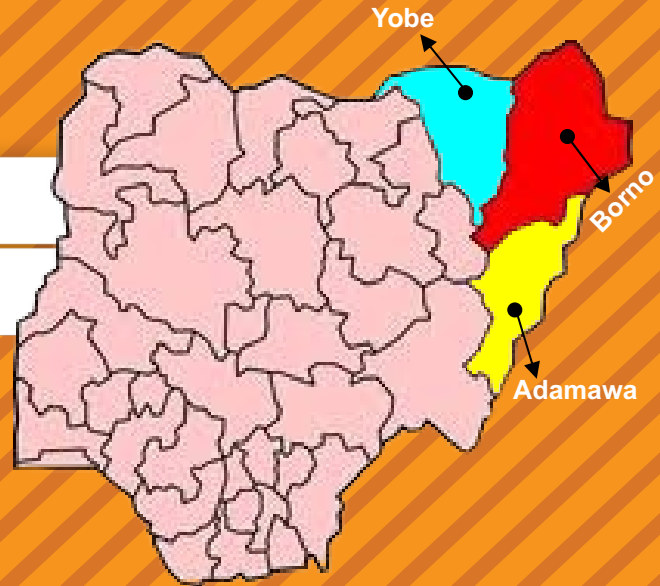
UNFPA #3/2022

CRISIS:

Boko Haram insurgency and counter-insurgency conflict, Nigeria

CRISIS LOCATION:

BAY (Borno, Adamawa and Yobe) States



BACKGROUND / OVERVIEW

Twelve years into north-east Nigeria's large-scale humanitarian crisis, the needs are generally as severe and large-scale as ever. The crisis is not normalized, and affected people are not stabilized. They still live with great unpredictability, privation that goes far beyond background poverty, and daily threats to their health and safety, many of which could prove fatal or inflict irrecoverable harm.

In 2022, some 8.4 million people in the three most affected states or Borno, Adamawa and Yobe (BAY) in Northeast Nigeria are projected to require humanitarian assistance. Compared to a year ago - 8.7 million, this represents a slight 4% decline in people in need (PIN) of humanitarian assistance. Some 6.7 million representing 80% of the total PIN, are women and children. Within these population groups, some of the vulnerable people with specific needs include children, women at risk, people with disabilities, older people, pregnant and lactating women and children under five years of age with high levels of malnutrition. They are 3.9 million people, while 2.2 million are IDPs, 1.5 million are returnees, and 1.02 million live in inaccessible areas.

Displaced people due to the conflict are concentrated in Borno which has 81% of the total displaced. Out of the 61 Local Government Areas (LGAs) assessed, needs in 22 LGAs are classified as 'extreme' on the severity scale, while another 19 LGAs have 'severe' needs. While 18 LGAs are at 'stressed' level, the remaining 2 have 'minimal' severity of needs. It is rainy season again in most parts of Nigeria and at this period every year, Nigeria experiences flooding in the most states leading to massive displacement. The 2022 flood prediction by the Nigeria Hydrological Services Agency (NHSA) also indicated that about 17 states that are likely to encounter flooding this year among which are the Borno, Adamawa and Yobe already affected by the 12 year conflict. Flood in over 27 LGAs and displacement many households which counting still continue as we have recorded over 60,000 affected individuals. Some of the settlements and communities are not accessible at the moment due to flooding. The aftermath effect of flooding will be spilling over to the year 2023 and these need to be estimated for and planned for as well.

Nigeria is going through the national elections campaign season. It should be noted that Nigeria has a history of pre and post-elections violence that generally leads to killings and destruction of properties. Though the primaries for the presidential, governorship and House of Representatives went on relatively calm in most parts of the country, security analysts recommend for more vigilance during the campaign and elections period as any election violence can be more deadly with current general insecurity in the country coupled with the economic crisis resulting from the economic inflation. Inter-communal clashes were also experienced in some parts of the BAY states as well as farmer-herders clashes in state like Adamawa state. There are enormous funding gaps for the CO humanitarian response plan for 2022 with less than 20% of humanitarian funds mobilized for now.



8.4M
Population



80%
Destroyed Health facilities



35%
IDP from Borno

HUMANITARIAN NEEDS

According to the Humanitarian Needs Overview (HNO) for 2022, an estimated 1.4 million individuals (46% IDPs, 23% returnees, 31% host communities) will require GBV prevention and response services in the BAY states in 2022. Around 5 million people are in need of health assistance, of which 1.25 million people (25%) are women and girls of reproductive age who are most vulnerable and are in need of life-saving SRH information and services. The majority are women and girls (82%). Most of those in need are in Borno State (63%), with 22% in Adamawa and 15% in Yobe. Though the HNO covers only the BAY states, similar trends could be projected in the other crisis regions (South-East, North-West and North-Central) in Nigeria considering the crisis situations always exposes more women and girls to protection risks and vulnerabilities. The humanitarian crisis has only worsened the pre-existing severe reproductive health and GBV situations in this part of the country.

The 2018 Nigeria Demographic and Health Survey (NDHS) reports the highest rate of sexual violence in the North East of 16% compared to 10% or less in other regions. Data from 2018 NDHS also shows that the North East has high unmet need for contraceptives at 17% and extremely low Contraceptive Prevalence Rate of 2% compared with 10% national average - which translates into a high total fertility rate of 6.3 as compared to the national average of 5.5.

The Region also has a very high Maternal Mortality Rate of 1,546 per 100,000 live births as compared to the national value of 546 per 100,000 births. Teenage pregnancy is also high at 32%, a major health concern because of its association with higher morbidity and mortality for both the mother and the child. The crisis with the disruption of the health system has further aggravated the situation and only 22% of deliveries are assisted by a skilled birth attendant exposing women and new-born to increased risk of deaths and complications.



UNFPA team engaging IDP women and girls on GBV and SRH key messages including cholera prevention and control (IPC) messages in the context of the flooding and cholera outbreak.



Digital literacy students during a typing skills exercise.

KEY RESULTS

1- SEXUAL AND REPRODUCTIVE HEALTH

- A total of **84,762** community members were reached with sensitization messages on key life-saving Sexual and Reproductive Health services availability, including referral mechanisms.
- Total of **28,705** people reached with reproductive health services (Antenatal Care, Safe Delivery, Post-natal Care, Management of Supervisors of Sexual Violence, Treatment of STIs, Nutrition, Family Planning) and other medical conditions.
- **2,324** deliveries were supported by Skilled Birth Attendants (SBA) in Borno, Adamawa and Yobe state.
- **86** health facilities were supported to provide BEmONC services (provide with fabricated mini-ambulance, RH Kits, capacity building, SRH commodities or COVID-19 PPE).
- **2,139** individuals were supported by mini-ambulance to access SRH/GBV services including home deliveries, Emergency Obstetric and Newborn Care (EmONC), community outreaches and referral system.
- **43** functional integrated SRH/GBV facilities including Safe Shelters, One Stop Centers (OSCs), and Women and Girls Friendly Spaces (WGFSS) were supported to provide SRH/GBV services.
- **45** Health Workers and Programme Managers were trained to provide quality integrated Reproductive Health and GBV services.
- **9** SRH coordination meetings conducted across the three Northeast States (Borno, Adamawa and Yobe).



72,969

Community members reached with key life-saving messages



1,043

Persons supported by mini-ambulances to access services



20,566

Individuals reached with SRH services



993

Pregnant women delivered safely

2- PREVENTION AND RESPONSE TO GENDER BASED VIOLENCE

- **2,750 dignity kits** have been provided to vulnerable women and adolescent girls to restore their dignity and as an entry point to awareness raising on GBV/SRH/PSEA/COVID-19 issues.
- **113 survivors of sexual violence** had been treated by trained health care providers on clinical management.
- **9,415 survivors** of violence and their family members received psychological support from trained caregivers.
- **3,661 survivors** of sexual violence accessed temporary safe shelters, security and legal aid by professionals.
- **59% of GBV survivors** who sought help through self-referrals, and 42% referred by other agencies received appropriate care from trained service providers.
- **3 toll free lines** supported for remote GBV information dissemination and service linkage.
- **467 community members** were supported through the toll-free lines for GBV information dissemination and service provision.
- **84,762 community members** were reached with community sensitization messages on key life-saving topics that include prevention and response to GBV, Protection from Sexual Exploitation and Abuse (PSEA) and referral mechanism for psychosocial and health care.
- **3,064 women and girls** have benefited from skills acquisition and economical empowerment activities through 25 functional WGFSs.
- **A total of 2,587 Women and Girls** accessed and used the Friendly Centers (WGFCs) operated by Ips across the BAY states to meet their needs.
- **42 adolescents trained** on Digital Literacy in IDP camps in Borno State.
- **200 individuals enrolled** in the Engagement of Men through Accountable Practice (EMAP) program.
- **15 secondary schools** (government & private) supported in setting up reporting mechanisms and GBV clubs to address School Related GBV (SRGBV).



2,750

Dignity kits distributed



52

Trained on Digital Literacy in IDP camps



3

Functional Toll Free Lines established



68,569

Community members sensitized



3,064

Benefited from skills acquisition and economic empowerment activities



13,906

New women & girls users of WGFSs

3- CALL TO ACTION ON PROTECTION FROM GENDER BASED VIOLENCE IN EMERGENCIES

- **Capacity Building:** GBViE Course in partnership with the American University of Nigeria (AUN) Yola: 36 participants trained in Cohort 6.
- **Leadership Committee of Call to Action:** Restructured into the: Strategic Task Team (STT) Technical Task Team (TTT).
- **The Technical Task Team of the Call to Action met,** deliberated and determining the Outcomes and Action Areas to focus on in developing the new Call to Action Roadmap 2022-2025.
- **Held the Call-to-Action Workshop** for the development of the Northeast Nigeria Roadmap 2022-2025.



186

Participants trained from 2019 to date.

4. COORDINATION: GBV-SECTOR, SRH-WORKING GROUP AND PSEA NETWORK

- Supported 25 non-GBV actors and paralegals to provide GBV case management to 41 survivors across 17 local government areas so that evidence could be preserved and access to justice could be ensured.
- Trained 35 individuals in GBV case management to enhance existing knowledge and understanding of GBV cases. This training enabled GBV case workers to increase their skills and attitude in order to facilitate the healing and recovery of survivors of GBV across Yobe state.
- Supported and facilitated a training on PSEAH for FMHADMSD staff, which serves as an interactive learning session on PSEA; covering concepts on PSEA, PSEA trends, PSEA report, PSEA victim assistance, and Staff and humanitarian practitioner mandate on protecting beneficiaries of assistance from Sexual exploitation and abuse.
- Updated referral pathways for Borno, Yobe and Adamawa is in progress.
- Convened strategic and technical review meetings for Nigerian Humanitarian Fund (NHF) by OCHA for mobilizing resources for GBV SS members (1 million dollars).
- A total of 24 GBV SS monthly coordination meetings were held during the reporting period in the three BAY states (Borno, Yobe, Adamawa). **Nine** (3 per state) of the meetings were held at the state level while **15** of the meetings were held at the field level locations.
- 03 GBVIMS meetings organized with all the data gathering organizations (DGOs) to improve quality of GBVIMS data and strengthening of coordination among DGOs.
- 03 SRH coordination meetings conducted across the three Northeast states (Borno, Adamawa and Yobe).
- Strengthened field level coordination mechanisms through field missions in Yobe and Adamawa to provide technical assistance to GBV SS members.
- Provided technical assistance for multi sectoral needs assessment (MSNA) tools and report for flooding in Yobe.
- Initiated discussions and formalization of task force for preparing 16 Days of Activism commemoration 2022 in the BAY states.
- Developed GBV sectoral needs analysis in HNO/HRP 2023 from key efforts – MSNA, PIN calculation, with PSNE and OCHA.
- Supported monitoring of case workers on the usage of GBV case management tools in GBV case documentation.
- Conducted supported supervision and monitoring of all GBV activities in camps and host communities.
- Supported coordination of GBV case management through the one stop center hotline.
- Supported planning and implementation of 2022 GBV 16 days of activism.



110

GBV case workers trained on survivors' access to justice



13

NGOs/INGOs supported on GBVIMS Migration



36

Case Management Officers trained



10

Implementing partners engaged for front-line services delivery



32

GBV/SRH Coordination meetings held

5- FLOOD RESPONSE IN THE BAY STATES

- 5,125 dignity kits distributed to women and girls.
- 3,150 provided with non-food items; Household kits, Mat and Buckets for persons.
- 48 survivors provided with GBV Case Management Services.
- 683 persons provided with referral and linkage services for GBV and SRH.
- 928 Women and Adolescent Girls provided with Psychological First Aid.
- 557 individuals medical care through community outreach services for and
- 3,153 Women and Adolescent Girls sensitized on GBV/SRH/PSEA



Cross section of UNFPA staff during flood intervention in Flatari, Rann, 1000 camp and kuya Community in Monguno, Kala/Balge and Dikwa LGA.



Assessment of flooding in the IDPs camp, Rann Kala Balge LGA, Borno State.

6- FLOOD RESPONSE OUTSIDE THE BAY STATES

Anambra state is one of the worst hit of the 34 states in Nigeria, grappling with the devastating effects of the country's worst flooding in a decade. Seven local government areas were reported to have been the most hit with an estimated 35,074 (53% female) individuals directly affected by the floods. These individuals consisted of 25,996 IDPs that were living in camp-like settings following the floods. Majority of the affected population (85%) are women, girls and children which are the most vulnerable hit by the flood in Anambra State. While the focus of intervention is geared towards food security and livelihood, most often, the Sexual Reproductive Health (SRH) and Gender Based Violence (GBV) needs of the vulnerable population of women and girls are neglected, leading to high morbidities and mortalities among the affected people.

UNFPA is currently working with Anambra State Emergency Management Agency (ANSEMA), State Ministry of Health, State Ministry of Women and Children Affairs and the local coordinating group for all partners supporting the response led by IOM. UNFPA has responded to the flood incident with the following relief materials and technical guidance to support flood affected communities in the State



Explanation of each item inside the dignity kit bag to the women at Anambra West LG before distribution with the Honorable Commissioner of Women Affairs and Social Welfare, Anambra State.



Onloading and sorting of dignity kits to the affected flooded communities in Ogbaru LG, Anambra State.

- Official handover of 500 dignity kits, 17,280 pieces of male condoms, 1000 pieces of female condoms, information booklets on GBV prevention and referrals to the State Ministry of Women and Children Affairs.
- Official handover of 34,560 pieces of male condoms, 2000 pieces of female condoms and menstrual hygiene kits.
- Thorough supervision of relief materials (dignity kits, menstrual hygiene kits, male and female condoms) distribution in Anambra West and Ogbaru LGAs.
- Mapping of first responders (GBV and SRH) for capacity building.
- 5-day Training of Trainers (ToT) for 25 health care workers on Minimum Initial Service Package (MISP).
- 5-day training of 30 health and social workers on Gender Based Violence in Emergencies (GBViE) prevention and response, including Mental Health and Psychosocial Support (MHPSS).
- Built a model for a sustainable community and finding innovative ways to provide great value to fulfill the needs of women and girls across the affected communities.



UNFPA staff members pose with the Honorable Commissioner of Women Affairs and Social Welfare, Awka, Anambra State after the official handover of the relief materials.



A snapshot of dignity kits, menstrual hygiene kits, male and female condoms that were handed over to Anambra State Government by UNFPA MDSO.

7- CHOLERA RESPONSE IN BORNO STATE

- 517** individuals were supported using Keke Ambulance to access treatment at far health facilities.
- 50** Women and Girls victims were provided with Dignity Kits to ensure their dignity is protected.
- 2450** victims were provided with liquid hand wash and hand sanitizers.
- 187** individuals were provided with Psychological First Aid.
- 765** individuals accessed Referral and Linkage services.
- 42** individuals were provided with Case Management.
- 4584** individuals were provided with Sensitization/Awareness on GBV/SRH/PSEA.
- 25** front line workers were trained on Cholera IPC, Environmental Cleaning and decontamination.



Women and Girls beneficiaries of dignity kits during Distribution in Dikwa, Kala/Balge, Monguno, and Dambo, Borno State.



8- HUMAN RESOURCES

The Humanitarian Unit has 25 fully dedicated programme and operations personnel working from both the Country Office in Abuja and the three field offices of Borno, Adamawa and Yobe states, with coordination from the Maiduguri Decentralized Office. The Units is supported on needs basis by other technical Programme Units and the Operations Unit of the Country Office.

9- PHOTO GALLERY



Cross section of graduating participants from the GBVIE Cohort 6 Course in a group photograph with high level guests from Government, Civil society including faculty members from the American University of Nigeria and course facilitators.z



Participants from the GBVIE Cohort 6 course during a group work discussion on Community Engagement guided by facilitators



Session on Graphics design by male participants at Muna IDPs camp, Maiduguri.



Female participants of digital literacy training 2.0 at Madinatu IDPs Camp, Maiduguri



GBV/SRH frontline workers distributing liquid soap and hand sanitizers to women and girls in Custom house camp, Maiduguri, Borno State.



GBV/SRH frontline workers sensitizing women and girls on Cholera management, prevention and GBV/SRH key messages in Auno Community and Its Environs, Borno State.



GBV/SRH frontline workers sensitizing women and girls on Cholera management, prevention and GBV/SRH key messages in Gubio camp, Borno State.



Engagement with gate keepers/community leaders on the protection needs of women and girls and remove on their role in ensuring SRH rights for everyone.



Providing opportunities to IDP adolescent boys and girls to acquire skills on ICT to as a means of resilience building through digitalization , at IDP Camps.



Male participants receiving training on the functions of the computer mouse during a digital training.



Participants during training on Cholera IPC, Environmental Cleaning and decontamination for UNFPA Nigeria Frontline Workers at Emergency Operation Centre (EOC) in Maiduguri Borno State.



District head of Auno, during a flagging off ceremony for the distribution of liquid soap and hand sanitizers to 200 women and girls as part of measures taken against cholera epidemic in Auno community, Borno State.



DONORS



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NHF

Nigeria
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