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HIGHLIGHTS



- 18,421 cholera cases recorded in first quarter 2014 -- more cases than reported in all of 2013.
- 250,000 IDPs in the northeast are reverting to negative and unsustainable coping strategies to meet their food needs.
- 700-1,000 flee northeast for Diffa, Niger every week. 100,000 new arrivals expected in Diffa by end of 2014.
- FEWSNET reports crisis level food insecurity in Borno and Yobe states since January.
- Regional Humanitarian Coordinator visits the northeast; UN Special Envoy deployed to Nigeria.
- Over 230 schoolgirls kidnapped by Nigerian insurgents, Boko Haram, remain missing; international rescue efforts underway.
- Inter-agency needs assessment in the northeast begins.

KEY FIGURES

No. of IDPs from the conflict in the northeast (March 2014)

249,446

Dollars in private sector contributions to address the crisis in the northeast

15 million

Reported cholera cases in 2014 as of week 17

18,421

Sources: NEMA/WHO/NGOs

Update on Boko Haram Insurgency

Insurgent Attacks Continue, State of Emergency Extension Requested

Nigerian insurgent group, Boko Haram, continues attacks across Nigeria, reportedly bombing the capital, Abuja, twice in one month; raiding a police station in Cameroon killing two; killing over 300 people in a single attack in Gaboru Ngala town (Borno); and abducting nearly 300 girls from a school in Chibok (Borno state).

A State of Emergency (SOE) in the three northeast states of Borno, Yobe, and Adamawa, began in May 2013 and its extension has recently been requested for an additional six months to facilitate counter-insurgency

activities in the northeast. However, Boko Haram continues to launch attacks in and outside of its stronghold in Borno State. The first April bombing in Abuja is the most deadly attack that Boko Haram has committed in the capital, killing 75. The attack in Cameroon's Extreme North region killed two and is the third such cross-border attack in as many months committed by the group. The May attacks on Gaboru Ngala village near the border of Cameroon killed over 300 people.

Of global notoriety has been April's kidnapping of over 300 girls- some 230 still missing- from a boarding school in Borno state. Boko Haram assumed responsibility for the attack and has threatened to sell the girls as slaves; reports indicate that many have already been forcibly married to members of Boko



Map Sources: UNCS, Europa Technologies, ESRI, OCHA. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created in May 2014.

2014 FUNDING

USD\$ 75 million requested

USD\$ 0 received

USD\$3.2 million pledged

Haram. This kidnapping has sparked large-scale protests in Abuja, and launched an internationally-backed campaign entitled #BringBackOurGirls.

State of Emergency extension in Borno, Yobe, and Adamawa has been requested for another six months.

The increasing frequency and scale of the attacks are creating accordant humanitarian needs. UNHCR and IRC report that some 700-1,000 new arrivals from northeast Nigeria are crossing into Niger's southern region, Diffa, every week totalling some 18,000 new arrivals in 2014 alone; there are presently over 50,000 such new arrivals from northeast in Diffa, and UNHCR expects 100,000 by the end of 2014. These new arrivals are reported as to be in poor physical condition and in need of emergency assistance. The 250,000 IDPs presently estimated in the northeast states reside, for the most part, with host families--adding significant strain to already over-stretched households.

Response

The government and international partners are working together to locate the missing girls. UN Secretary General, Ban Ki-moon has appointed UN Special Representative for West Africa, Said Djinnit, as his Special Envoy for the issue of the kidnapped girls in Nigeria. Following Boko Haram's public threat to sell the kidnapped schoolgirls as slaves, the UN Office of the High Commissioner for Human Rights issued a warning to the group that the sale of humans constitutes a crime against humanity. INGO Watchlist published a report this month revealing that Boko Haram has committed grave violations in contravention of Security Council Resolutions 1998 -- on the protection of children in armed conflict which prohibits attacks on schools by armed groups-- by carrying out coordinated attacks on schools that have resulted deaths of children and involved abductions and recruitment of children into armed groups.

To date, response to assist populations affected by the crisis has included the provision of food and non-food items (NFIs) from the National Emergency Management Agency (NEMA), the State Emergency Management Agency (SEMA), the Nigerian Red Cross Society and the American University of Nigeria in Yola; UNFPA has also distributed dignity kits to women in Adamawa, and IRC has provided life-saving care to more than 800 malnourished children of displaced families. UNHCR and IRC have been monitoring the influx of new arrivals in Diffa and have set up reception centres to provide essential information and emergency support for refugees. The centres also serve as temporary accommodation for new arrivals not yet set up with local host families. IRC is also helping reunite separated children with relatives in Diffa, as well as provide children with counselling and medical care, and build safe spaces where they can play, maintain their education and recover from trauma.

There is an urgent need for emergency protection programming including psychosocial support for unaccompanied and separated children, female headed households and children at risk. There is also an urgent need to establish temporary safe learning spaces with age-sensitive educational, child-friendly spaces, and child-protection services for the IDPs.

Towards addressing pressing humanitarian concerns in the conflict-affected northeast, an inter-agency assessment team was deployed on 10 May to Borno, Adamawa, and Yobe to gauge needs of affected populations. The results of this mission will be available at the end of May.

Regional Humanitarian Coordinator Visits the Northeast

RHC Piper is First Senior UN Official in Northeast this Year

Rates of malnutrition in CMAM center in Adamawa triples.

The Regional Humanitarian Coordinator for the Sahel, Robert Piper, visited Nigeria from 28 April to 1 May, meeting with various partners and Government officials in Abuja, before spending two days in Adamawa, where he met with local authorities and IDPs displaced by the conflict. The RHC's visit to Adamawa marks the first visit made by a senior UN official to the troubled northeast Nigerian region this year. The RHC indicated a worrisome humanitarian situation in the northeast that required greater humanitarian engagement from all partners in Nigeria.



RHC Robert Piper meets with IDPs in Madumari community. CREDIT: OCHA 2014

RHC Piper in Adamawa

RHC Piper spent two days in Adamawa, to assess humanitarian needs, and visit on-going humanitarian activities. During the RHC's time in Adamawa, he met with Internally Displaced Persons (IDPs) from the communities of Burunkutu, Gworza and Beni Sheikh-- all communities in Borno state. The RHC also met with two IDP host communities in Bole and Madumari, where some 1,072 IDPs were being hosted by host families-- all but two of whom were women. IDPs were mostly widows, orphans, and children.



IDPs in Bole community. CREDIT: OCHA 2014

The RHC also visited a UNICEF-funded Community-based Management of Acute Malnutrition (CMAM) site in Burke (outside of Adamawa state capital, Yola), where community health workers appealed for more CMAM centres and WASH facilities to address the malnutrition needs of affected communities. The healthcare workers reported that the number of children being treated for severe acute malnutrition at the centre has tripled with the recent influx of IDPs from neighbouring states. They warned that malnutrition rates would further increase in the coming months due to the conflict's interruption of agricultural activities and the rainy season, which increases rates of diarrhoea and malaria. Pre-positioning of Ready-to-Use Therapeutic Food (RUTF) stocks remains limited due to insecurity and funding constraints in Adamawa state, notably in the border towns of Michika, Mubi North and South, Gombi, Maiha and Madagali.

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Meeting the protection and nutrition needs for at-risk IDPs remains a key challenge. The RHC commended response efforts despite the access challenges posed by the highly insecure environment, and the serious funding gaps that plagued the effort, and called on international actors working in Nigeria to strengthen their support to the country.

RHC Piper's visit to Adamawa follows an April visit to Diffa, Niger, where he witnessed first-hand, new arrivals from neighbouring northeast Nigeria from which at least 50,000 refugees and evacuees have fled for Niger in the past year.

A Host Family Describes its Challenges

Alhaji Aminu Mahmud is the head of a household in Madumari community in Adamawa state, currently hosting ten IDPs from Borno and Adamawa. The IDPs he hosts receive food and shelter from Alhaji's family in exchange for labour in the farms and/or household chores. However, the IDPs lament that their meal consumption, has fallen from three to one per day as their hosts are constrained by the exhaustion of their food stocks, and have resorted to eating the grain reserved as seedlings for the next planting season. Household food stocks are significantly below average and incomes are declining in the northeast.



Alhaji Aminu Mahmud with his family and IDP dependents. Credit: OCHA/2014

Food Security Update

Northeast Faces Crisis Level Food Insecurity

According to FEWSNET, since January 2014, Borno and Yobe states have been facing Crisis (IPC Phase 3) acute food insecurity and Adamawa state faces Stressed (IPC Phase 2) acute food insecurity. NEMA reports that the conflict in the northeast has strained the 250,000 Internally Displaced Persons (IDPs) in the northeast, who in turn have reverted to negative and unsustainable coping strategies.

Meal consumption has reportedly decreased from three meals to one per day and many IDPs have abandoned their farms and agricultural activities due to the insecurity with many farms in the state empty in the run-up to the planting season currently upon us. IDP host families have reportedly exhausted their food stocks and have resorted to eating grain reserved as seedlings for the next planting season. Household food stocks are significantly below average and incomes are declining since the conflict has interrupted off-season livelihood activities and the seasonal increase in labour demand. Various UNCT assessments in the northeast indicate that food access and markets have been adversely impacted by the insurgency and the periodic border closings with neighbouring Cameroon.

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Crisis food security levels reported in Borno and Yobe states since January.

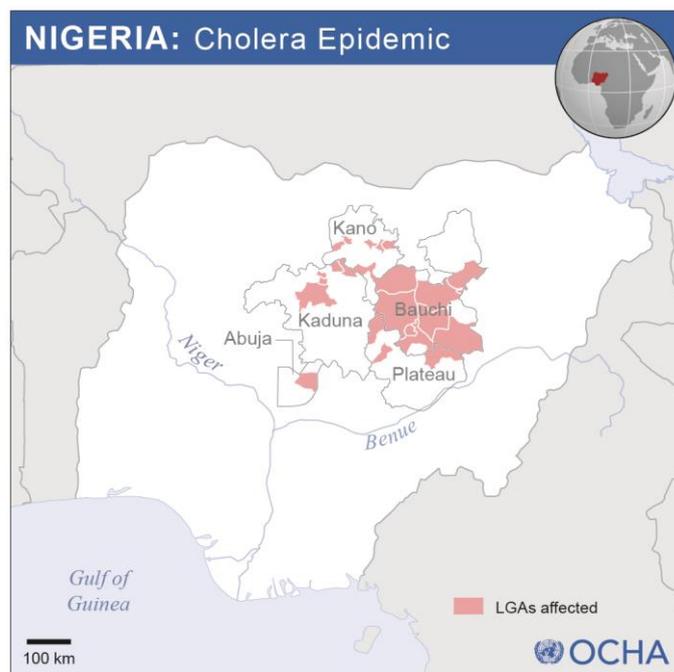
The food security situation in Borno, Yobe, and Adamawa states is aggravated by the ongoing food crisis across the Sahel region, where some 20 million people are estimated to be at risk of food insecurity, of which 2.5 million need urgent lifesaving food assistance.

Cholera Rates High in Bauchi

Notable Increase in Cholera Rates since 2013

More cholera cases recorded in first quarter of 2014 than all of 2013.

WHO reports that, to date, 18,421 cholera cases with 235 deaths (Case Fatality Rate of 1.2 per cent) have been recorded in 83 Local Government Areas (LGAs) in 15 states since the beginning of this year. During the week 17 reporting cycle, 1,155 cholera cases including 23 deaths (CFR 2 per cent) were reported from 26 LGAs in six states (*viz.* Bauchi, Kaduna, Kano and Plateau) and the Federal Capital Territory (Abuja). There have been more cholera cases recorded in Nigeria in the first quarter of 2014, than the entire year of 2013. Bauchi is the most affected state in the country, and Bauchi LGA (in Bauchi State) accounted for 61 per cent (705 out of 1,155) of those cholera cases reported in week 17.



Map Sources: UNCS, SALB, ESRI, OCHA, UNICEF.
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The surge in cholera cases in Nigeria is largely attributed to limited access to safe drinking water, poor hygiene conditions, and poor sanitation. Nearly half of Nigerians do not have access to safe water and some 100 million do not have proper sanitation facilities (UNICEF). The peak period for new cases is during the rainy season which begins in May; humanitarian actors expect the cholera situation to worsen.

Structured Response Needed

Given the high rates of reported cases in Bauchi LGA, there is a concerted inter-agency effort by UNICEF, WHO, MSF, WaterAid, the Red Cross movement, the State and Federal Ministries of Health and the State Rural Water and Sanitation Agency (RUWASA) to contain the situation. WHO is providing surveillance support, UNICEF dispatched three drums of chlorine solution to the state-run hospital, where most cases are being treated, and to affected communities; 235 additional cartons of water purification tablets for disinfection have also been distributed to affected communities at the household level. WaterAid and the Nigerian Red Cross are providing training on how to prepare chlorine solutions, chlorination of water, biomedical waste management, hand washing, personal protective equipment and standard precautions for infection control. MSF is

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implementing cholera response initiatives in its cholera treatment centers in Bauchi LGA.

At the community level, capacity to respond to the cholera outbreak with emergency water treatment and sanitation is lacking. This problem is even more critical in the context of limited capacity (and resources) of primary health facilities in the rural areas of Bauchi and Missau LGAs- which have witnessed high fatalities in the outbreak. Partners have prioritized hygiene awareness sessions with village chiefs, religious leaders, teachers and community volunteers. Chlorination stations have also been installed in areas where people collect water from polluted sources. A structured approach to respond to the cholera outbreak must also address the immediate WASH needs of the affected people.

Private Sector to Support the Northeast

USD\$ 15 million in Cash and Safe Schools from Private Actors

The Nigerian private sector is kick-starting two initiatives to support affected populations in Nigeria's northeast, totalling USD\$15 million.

Cash Transfer Project

Pursuant to recommendations made by a September inter-agency needs assessment on the crisis in the northeast, the Presidential Flood Committee a private sector non-governmental committee will support 8,000 households (56,000 people) displaced by insurgency in Borno, Yobe and Adamawa States and affected by inter-communal conflict in Benue, Plateau, Katsina, Nassarawa, Gombe, Bauchi and Kaduna states. Beneficiaries will receive cash transfer support. The assistance will also ensure access to emergency food assistance, Non-Food Items (NFIs), Water Sanitation and Hygiene (WASH) and healthcare. A project implementation committee has been set-up that includes the Director General of the National Emergency Management Agency (NEMA), Federal Commissioner of the National Commission for Refugees, and the UN Resident Coordinator to oversee the appropriation of the fund.

Safe Schools Initiative

Business leaders at the World Economic Forum (WEF) for Africa launched a Safe Schools Initiative totalling USD\$10 million. The Initiative is a collaborative effort of Nigerian business leaders through the Global Business Coalition for Education to support 500 schools and communities towards improving access to education in the northeast. Additional resources from international partners and the government to scale-up the initiative are expected in the coming months.

Funding Overview

No Funding Received to Support Nigeria; JHAP drafted

According to the Financial Tracking System, Nigeria's Strategic Response Plan (SRP) to address urgent humanitarian needs estimated at USD\$ 75 million, has not received any funding to date. The Government of Japan has pledged USD\$3.2 million towards increased partnership in Nigeria, to include some humanitarian support.

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USD\$15 million in private sector led initiatives to support the crisis in the northeast.

OCHA and the Government of Nigeria are working on a Joint Humanitarian Action Plan (JHAP) for 2014-2016. The JHAP offers a framework for the collaboration of the National Emergency Management Agency (NEMA) and humanitarian partners on disaster preparedness and the reinforcement of the capacities of national authorities.