HIGHLIGHTS

- 254,000 IDPs in Borno, Yobe and Adamawa states, according to NEMA rapid assessment in March.
- New displacements in north-eastern states after surge in attacks.
- NIMET predicts shorter length of seasonal and below normal rainfall for most regions.
- More than 500,000 under-five children expected to suffer from Severe Acute Malnutrition (SAM) in 2014.
- 6,149 suspected cholera cases with 67 deaths (CFR 1.1%) reported in 2014, from 36 Local Government Areas (LGAs) in twelve States of Nigeria.

KEY FIGURES IN THIS EDITION

Total of DPs in the three States under SoE: 254,812
IDPs staying in camps: 5,366
Reported cholera cases as at week 10 2014: 6,149

NEMA releases IDP figures

254,812 IDPs in north-eastern States

Following a multi-sector rapid assessment to Borno, Yobe and Adamawa states from 3 to 7 March, the National Emergency Management Agency (NEMA) released official figures of Internally Displaced Persons (IDPs) in the three States under state of emergency (SoE) as at March 2014. The total number of IDPs inside the States stands at 254,812 IDPs. The breakdown shows that the vast majority lives with host communities, while 5,366 stay in temporary camps.

Borno most affected

Hosting more than 111,000 IDPs, Borno is the most affected state, followed by Yobe (76,000) and Adamawa (67,000). The most affected areas include Gwoza, Bama, Madagali, Michika and Maiha Local Government Authorities (LGAs). Children and women constitute about 83 per cent of the IDPs.

The new figures indicate a decrease of about 40,000 IDPs when compared to the total as at the end of 2013, also released by NEMA. It is assumed that this reduction is largely due to the fact that some of the IDPs have migrated to the neighboring states of Bauchi and Gombe.
NEMA, State Emergency Management Agencies (SEMA) and UNFPA responded with a three month ration of food and non-food items (NFIs) such as water containers, eating utensils, soap, mattresses, towels, blankets, dignity and reproductive health kits to about 200,000 IDPs. 49,000 IDPs who were not reached require emergency food assistance.

The assessment report further highlighted the following points:

- Meal consumption has dropped from 3 to 1 meal per day in most communities;
- Most of the IDPs have lost their livelihood to the insurgency;
- Out of the 2,500 boreholes in the SoE states, only 1,000 are functional;
- Only 37 per cent of health facilities in the SoE states are functional;
- High percentage of female-headed households and unaccompanied minors;
- In the IDP camps, the ratio of persons to latrines is 500:1, and there are no view-protected bathrooms for women.

**Update on the Northeast**

**Surge in attacks leads to new displacements**

The situation in north-eastern Nigeria remains very worrisome. A surge in attacks by armed groups, occurring almost daily since the beginning of this year, has led to new destruction and displacements. Hundreds were killed in the attacks. According to local partners, locations that have come under attack over the last month include Izge, in Gwoza Local Government Area (LGA) of Borno State; Sabon Gari, Damboa, Wajonkoro and Ajijin, all in Damboa LGA; Benesheik in Kaga LGA; Dikwa LGA; and Gamboru in Gala LGA. There have also been attacks in Kalabalge attributed to its location as the transect town from Bama LGA to Cameroon.

**Some 10,000 flee attack in Izge**

State Emergency Management Agency (SEMA) reports indicate that an estimated 10,000 residents from Izge and neighbouring villages, including Dauri, Konduga, Kawuri, Bama, have fled to Madagali, Adamawa state, in the wake of the 15 February attack on their villages. The presence of displaced people puts increasing pressure on the town. Attacks on Gwoza have also led to population movements to Titiku, Kirchigha, Kaya, Mahraba Kanbula, Madagali, Gulak and Shuwa, all in Gulak LGA of Adamawa State, and to Lassa and Uba in Askira Uba LGA of Borno state. Movement from Gwoza has also been traced to Mubi South, Mubi North and Maihe LGAs of Adamawa State. Affected people from Konduga and Bama have been moving into Maiduguri metropolis, particularly Londociki, where they integrated into host communities.

**Displaced dispersing into host communities**

The displaced people are in continuous movement. Initial settlements in make shift camps in schools and other government buildings are usually vacated after a few days with the population dispersing into the host communities. Due to the fluid nature of the displacement, it is difficult to track and get the accurate number of population displaced. The National Emergency Management Agency (NEMA) has continued the distribution of food and relief materials in the affected areas, usually at the Local Government headquarters premises.

**Borders closed**

At the end of February, the Federal Government ordered the closure of borders between Nigeria and Cameroon in Adamawa and Borno states. This has already provoked a rise in food prices in Adamawa. The Government also issued an appeal to its neighbours, especially Cameroon, to help it in the battle against armed groups.

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Students targeted, schools destroyed

Due to targeted attacks on schools, 115 school buildings and 22 educational centers have been destroyed this year alone in northeast Nigeria. Humanitarian actors reported a massive exodus of students from schools in Yobe state following the recent attack on the Federal Government College in Buni Yadi, in Gujba LGA.

On 25 February, gunmen attacked and killed students of the College in Buni Yadi. The death toll of the attack has reportedly risen to 59. The attack is the fourth on schools in Yobe state since 2013. An estimated 121 students have been killed in attacks by armed groups.

The latest attack has compelled the government to shut down all federal government colleges in the three states under emergency rule. Recurrent school closures have put over fifteen thousand students out of school, many of whom have had no access to formal learning for months.

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Reported fatalities</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 25</td>
<td>Federal Government College Buni Yadi</td>
<td>59</td>
</tr>
<tr>
<td>September 2013</td>
<td>College of Agriculture Gujba</td>
<td>40</td>
</tr>
<tr>
<td>July 2013</td>
<td>Government Secondary School Mamodo</td>
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</tr>
</tbody>
</table>

NIMET seasonal rainfall predictions

More stress on Sahel states

The Nigerian Meteorological Agency (NIMET) in its 2014 Seasonal Rainfall Prediction (SRP) has reported that the annual rainfall amount for Nigeria is expected to range from 300 – 3000 mm. Most parts of the country will see shorter seasonal rainfall below average quantities. This may further exacerbate food and water stress and impact on livestock and crop production, particularly in the Sahel states of Zamfara, Katsina, Kano, Jigawa, Yobe and Borno.

The above normal rainfall predicted in areas like Sokoto, Yola, Shaki, Iseyin and Abeokuta may contaminate domestic water sources with resulting health hazards such as cholera, diarrhea and other water borne diseases. There may also be challenges with hydro-power generation of electricity due to the less than normal rainfall predicted in many parts of the country this year.

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Sector Updates

Health Sector

Polio Immunisation

In January and March 2014, the UN through UNICEF and WHO supported polio campaigns in Yobe and Borno and called for health camps to provide broader health services using UN basic health kits. Volunteer community mobilizers are tracking pregnant women and newborns in the community to immunize them on the spot as well as linking these children for routine immunization. It is noteworthy that since December 2013 no polio case was reported in the Northeast.

Cholera

According to WHO, Bauchi, Adamawa and Kano states in northern Nigeria continue to report cholera cases. A total of 1,394 cases including twelve deaths were reported in week ten of 2014. Bauchi State accounted for 94% of the reported cases. Cumulatively in 2014, 6,149 cases of cholera with 67 deaths (CFR 1.1%) have been reported from 40 Local Government Areas (LGAs) in 12 States.

Lassa Fever

WHO reports that four cases of Lassa fever with no death were reported from Anambra, Ebonyi and Gombe states, as at week ten. Cumulatively in 2014, 208 suspected Lassa fever cases with 17 deaths (CFR 8.2%) were reported from 18 LGAs in nine states. A total of 27 cases were confirmed positive by the laboratory.

Meningitis

In all of 2014, 268 Cerebro-Spinal Meningitis (CSM) cases with 39 deaths were reported from 56 LGAs in 17 States. In week ten, 46 CSM cases with one death were reported from 17 LGAs within eight States. Aliero LGA in Kebbi State has crossed the epidemic threshold since week four.

Response

Due to the emerging humanitarian context in the north-eastern states under emergency, UNFPA has decided to prioritize addressing sexual and reproductive health, Sexual and Gender Based Violence (SGBV), and HIV prevention in its regular program. This will include strengthening health care delivery through the provision of reproductive health and dignity kits, and capacity building. The response targets a total of 450,000 people, including 18,000 pregnant women, in eleven LGAs in Borno state, and seven LGAs in Adamawa state.

WHO has continued to reinforce clinician sensitization on effective case management and infection control including community health education on preventive measures. It is also supporting the investigation of new outbreaks, laboratory confirmations and reinforcement of active surveillance and data verification. WHO will continue to collaborate with local and national actors to address gaps in supplies of cholera treatment kits in all affected States.

In Kano, UNICEF supported the State authorities to respond to the cholera outbreak using the polio health camps. It provided 86 cartons of oral rehydration salts and basic health kits and supported the dissemination of preventive messages. In addition, 89 wards in 21 LGAs were identified as cholera high risk areas. UNICEF is collaborating with WHO to contain the cholera situation in Benue State through the supply of oral rehydration salts, Ringers lactate infusion and water sterilizers.

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Nutrition Sector

Malnutrition

UNICEF and partners project that some 509,823 under-five children will suffer from Severe Acute Malnutrition (SAM) in 2014. Out of these, 60 percent will be treated, leaving a gap of at least 200,000 SAM cases. In the States under emergency (Borno, Yobe and Adamawa), 80,763 under-five children are expected to suffer from SAM. In 2013, 296,950 (91 per cent) out of 323,488 children with Severe Acute Malnutrition (SAM) in 11 northern States were treated.

Coupled with around three million Moderate Acute Malnutrition (MAM) cases with no clear interventions in terms of supplementary feeding, the number of SAM cases risks to further increase. Partners at a humanitarian operational briefing organised by OCHA agreed that malnutrition has persisted in Nigeria due to the lack of adequate response to MAM. Humanitarian actors advocate for more attention to MAM to address chronic malnutrition challenges in the country.

UNICEF will support the establishment of community-based mothers groups that will promote Infant Young and Child Feeding (IYCF). Micronutrient Powder Supplement will be distributed to address micronutrient deficiencies in young children.

Protection Sector

The National Human Rights Commission (NHRC) has developed a system for monitoring protection and Human Rights issues in the SOE States.

Child Protection

In January 2014, UNICEF in collaboration with the Borno Child Protection Network (CPN) and National Human Rights Commission (NHRC) has provided child friendly spaces (CFS) in Mafoni, Maiduri and Umari neighborhoods in Maiduguri, in Borno state. CFSSs offer opportunities for children to access recreational facilities. They have increasingly become important since many schools in Borno were closed down as a result of the conflict, with about 15,000 children out of school. The CFSSs also provide CPN and NHRC an opportunity to identify children who need additional services and support.

Water, Sanitation and Hygiene (WASH) Sector

Response

UNICEF is working closely with the Bauchi state Rural Water and Sanitation Agency to identify WASH gaps for immediate response. This includes identifying contaminated water sources for chlorination and strengthening preventive measures.

In Benue state, UNICEF also provided soap, water treatment powder sachets, and other items as part of its response to this year’s cholera outbreak. Awareness rising towards safe water drinking practices is on-going through mass media and Information Education and Communication (IEC) materials.

For further information, please contact: Choice Okoro (okoroc@un.org), Ajayi Ayobamidele (ayobamidele@un.org), or Chukwudi Ukanacho (ukanacho@un.org).
2014 Funding Overview

Nigeria funded by US$10.3 million, US$3.2 million pledged

The total humanitarian funding for Nigeria in 2014 remains at US$10.3 million. The funding is part of the European Commission Humanitarian Aid Office (ECHO) Humanitarian Implementation Plan (HIP) for Nigeria. The government of Japan has pledged US$3.2 million to the 2014 Strategic Response Plan for Nigeria.