

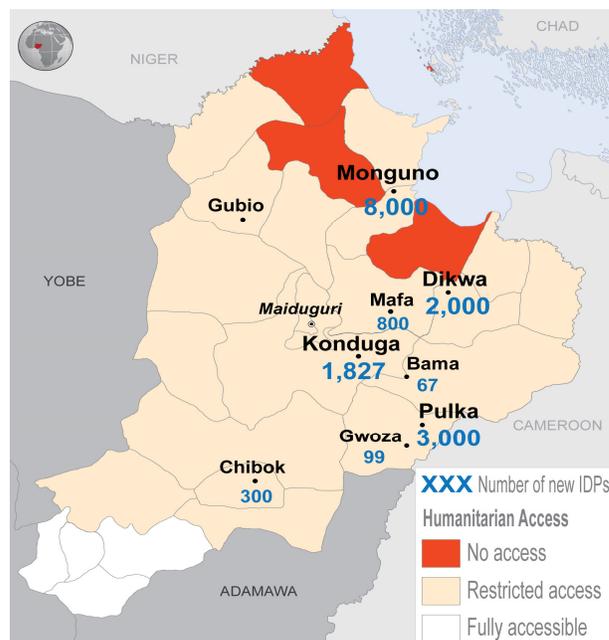


OCHA produced this report in collaboration with humanitarian partners. It covers the period from 24 January to 09 February 2017. It does not include information on the operations of actors that are not part of the Humanitarian Response Plan (HRP). The next report will be issued on or around 03 March 2017.

## Highlights

- At least 14,827 people were displaced due to military activity between 27 January and 10 February 2017, a further 300 were displaced because of attacks by armed groups.
- The risk of famine will remain high in Nigeria's northeast over the coming year, according to the Famine Early Warning Systems Network (FEWSNET).
- Almost 3 million children, aged 6 months to 10 years, were vaccinated in the recent national vaccination campaign against measles in Adamawa, Borno and Yobe states.
- Numerous internally displaced children not attending school are engaged in child labour and some are being sent out to beg.
- The volatile security situation and on-going military operations make it difficult to organize effectively the movements of cargo and personnel.

Population Movements: 27 January to 10 February 2017



<p><b>1.7 million</b></p> <p>Internally displaced people (IDPs) in the states of Adamawa, Borno and Yobe</p> <p><i>DTM XIV (IOM)</i></p>	<p><b>137,804 people</b></p> <p>Attended mine risk education</p> <p><i>Early Recovery Sector</i></p>	<p><b>1.83 million</b></p> <p>People yet to be reached by water and sanitation services</p> <p><i>WASH Sector</i></p>	<p><b>2.9 million</b></p> <p>Children in need of access to education</p> <p><i>UNICEF (Education Sector)</i></p>	<p><b>305,961</b></p> <p>Children under five with severe acute malnutrition (SAM), yet to be reached</p> <p><i>Nutrition Sector</i></p>	<p><b>5.1 million</b></p> <p>Food insecure people</p> <p><i>2017 Humanitarian Response Plan</i></p>
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## Situation Overview

This reporting period saw the introduction of a new tool – the Emergency Tracking Tool (ETT) – to measure and understand the current surges in population in diverse locations. These surges pose significant challenges for humanitarian workers, as the arrival of new internally displaced persons (IDPs) in any location will require additional food, shelter, water and sanitation, as well as health services, nutrition, protection, education and other services.

The local government areas (LGAs) of Borno State in the north-east of Nigeria are currently witnessing significant population movements. In some cases, IDPs may be returning to their LGAs of origin. In other cases, people are displaced because of military activities or attacks by armed groups. Other population movements may be due to refugees

returning from Cameroon, or to a combination of causes.

The ETT acts as an alert tool that enables partners to deliver assistance in a timely manner. It is published every Monday to provide details of population movements during the previous week. It is followed by the Tuesday meetings of the Rapid Response Mechanism Working Group, to arrange quick responses to urgent needs of new arrivals in any site.

The table below gives a snapshot of the first ETT results over a 15-day period, and the map on page one shows the locations to which people moved and the numbers involved. It is notable that four population movement incidents were triggered by military activity and another by the attacks of armed groups. In three cases people were drawn to LGAs that recently became accessible. Another movement was due to the Nigerian refugees brought back from Cameroon by the military.

### Emergency Tracking Tool – Snapshot of displacement and returns – 27 January to 10 February 2017

Checkpoint	Characteristic of movement		Population
PULKA Town	Type of movement: Arrivals Trigger: <b>military activity</b>	Inflow of IDPs from neighbouring villages due to ongoing military activity in nearby Ngoshi village in Gwoza LGA. Shelters are needed.	<b>Estimate</b>  3,000 people
BAMA Town	Type of movement: Arrivals Trigger: <b>refugee returns</b>	A total of 67 refugees returned to Nigeria from Cameroon with military assistance: 19 of the refugees returned on 29 January and 48 more returned on 02 February.	<b>Estimate</b>  67 people
MONGUNO Town	Type of movement: Arrivals Trigger: <b>military activity</b>	Military activity in the villages in Marte LGA has caused daily inflows of IDPs in Monguno.	<b>Estimate</b>  8,000 people
GUBIO Town	Type of movement: Arrivals Trigger: <b>recently accessible area</b>	The military announced last week that people could start returning to Ngetra, Kingowa, Feto, Zowo and Ardimin Wards, in Gubio LGA.	<b>Estimate</b>  Returns expected
KONDUGA Town	Type of movement: Arrivals Trigger: <b>military activity</b>	Military activity since 27 January in Kawuri village caused the arrival of 1,200 people in the Galtimari area of Konduga LGA, as well as the arrival of 627 IDPs in the Fannamari area.	<b>Estimate</b>  1,827 people
DIKWA Town	Type of movement: Arrivals Trigger: <b>military activity</b>	Military activity in Mallam Maja, Fufiye and Boboshe Wards of Dikwa LGA, caused the temporary relocation of people to Dikwa town.	<b>Estimate</b>  2,000 people
MAFA Town	Type of movement: Arrivals Trigger: <b>recently accessible area</b>	An estimated 800 IDPs returned from Tamsu Ngamdua to Mafa town between 30 January and 10 February.	<b>Estimate</b>  800 people
CHIBOK Town	Type of movement: Arrivals Trigger: <b>attacks by armed group</b>	Suspected Boko Haram attacks in Kautivwa, Kalmari, Kamsulari and Kaya, caused over 300 people to move to Chibok town. The military advised neighbouring villages to do likewise.	<b>Estimate</b>  300 people
GWOZA Town	Type of movement: Arrivals Trigger: <b>recently accessible area</b>	On 04 February, 25 people returned from Izge village to Gwoza town, and on 07 February a further 74 people returned. The military brought them to their screening point where members of the community were asked to identify them.	<b>Estimate</b>  99 people

The ETT tracks sudden displacement or return movements in areas most affected by the crisis. It shows the numbers of people involved in new displacements, giving an overview of their basic humanitarian needs and their reasons for moving.

The ETT targets the following populations: those displaced by recent conflict; those previously displaced by conflict moving back to their LGA of origin; and those who had left Nigeria, because of conflict, moving back into the country. The ETT does not aim to capture migration flows that are not directly linked to the conflict and therefore does not include individuals moving for trade, agricultural or business purposes.

Data for the ETT is collected by staff of the International Organization for Migration (IOM) deployed in the field. Areas that are inaccessible or insecure are assessed through phone interviews with partners, or with key informants who are present in the locations concerned. The data collected is then verified and cross-checked with government bodies and humanitarian partners in the field to provide the best estimates possible and to ensure the accuracy of data.

Data is collected and analysed on a daily basis and shared through weekly reports. Daily incident reports will also be published in the case of important population movements that require immediate attention.

### Highlights: Displacement Tracking Mechanism Round XIV (DTM Rd XIV)

The DTM Rd XIV was conducted between 16 December 2016 and 25 January 2017 to collect, analyse and disseminate data on IDPs, in support of the assistance being provided to people affected by the conflict. Here are some highlights from the report of this most recent DTM.

- The ongoing conflict in the three most affected States of northeast Nigeria has displaced nearly 1.7 million people (314,100 households).
- These internally displaced people (IDPs) live in 168 displacement sites and 1,155 host communities, in the three most affected states of the region. Children make up 56 per cent of the IDP population.
- While the majority of the IDPs identified by DTM Round Rd XIV live in host communities (68.8 per cent), 587,342 of them (31.16 per cent) live in 168 camps and camp-like settings around the three states targeted for assistance.
- Borno State has most displacement sites (143), followed by Adamawa (20), and Yobe (5).
- Borno accounts for 79 per cent of IDPs (1,506,170); Maiduguri LGA hosts more IDPs than any other LGA in the region (445,314).
- Conflict was the cause of displacement for all IDPs identified in Borno and Yobe states.
- The DTM Rd XIV assessed 108,492 households and 168 camp-like settings in January 2017; of the sites assessed most (60) consisted of self-made tents, followed in frequency by sites consisting of government structures (21)
- In 42 sites, more than 75 per cent of the IDP households live in self-made or makeshift shelters

## Humanitarian Response



### Food Security

#### Needs:

- There are approximately 1.4 million IDPs in Borno state alone and several areas remain inaccessible due to military operations. The analysis of the FEWSNET suggests that a further 400,000 to 800,000 may be in need of food assistance in inaccessible areas of northern and central Borno, but cannot yet be reached.
- Many LGAs in the north-east of Nigeria are experiencing acute food insecurity, and are in Integrated Phase Classification (IPC) Phase 4 - Emergency; in inaccessible areas, the risk of famine (IPC Phase 5 - Catastrophe) will remain high over the coming year.
- According to FEWSNET several IDP concentrations are in crisis (IPC Phase 3 - Crisis), but it is likely that continued food assistance will prevent these populations from reaching famine level (IPC Phase 5 – Catastrophe).

#### Response:

- The Food Security Sector (FSS) reached some 557,305 vulnerable people in the **two-week** reporting period in Borno, Yobe and Adamawa states. The assistance provided is broken down as follows:
  - 445,016 new and pre-existing people-in-need received food assistance through in-kind transfers (general food distribution) and through cash-based transfers.
  - 112,289 people were reached with agricultural inputs through the distribution of seeds, tools, fertilizer, poultry, and restocking with small ruminants, as well as assistance through alternative livelihoods (small-scale enterprises and other cash-generating activities).
- The Rapid Response Mechanism provided assistance, for the first time, in previously-inaccessible locations such as Magumeri, Gubio and Ngala.
- In Borno and Yobe states, General Food Distribution (GFD) is taking place for IDPs, returnees and highly vulnerable

local populations. The GFD criteria are based on assessed food security needs in consultation with partners. Priority is given to IDPs in government-designated camps and IDPs in unofficial camps. IDPs in host communities are targeted on the basis of vulnerability. When reaching vulnerable IDPs in host communities, the equally vulnerable local populations are also assisted (using the agreed vulnerability criteria).

- FSS partners provided integrated food and agricultural inputs, through a seed protection programme, for those who have access to land, among returning IDP farmers and IDPs in host communities. The agreements also involve food security interventions, agriculture-based and alternative livelihood activities, and long-term seasonal livelihood planning to build the resilience of people affected by conflict.
- The FSS conducted assessments for informed planning and targeting, covering the topics such as the following:
  - emergency food security assessment (EFSA);
  - regional markets;
  - localised multi-sector assessments, to learn food security needs at lower administrative levels – including ward level – in the recently accessible areas of Dikwa, Gubio, Magumeri, Monguno and Ngala;
  - Mobile Vulnerability Assessment Mapping (mVAM), through which 2,000 respondents are interviewed by phone in each of the three states, to learn their food security situation.
  - Rapid food security assessments are carried out along with Rapid Response mechanism. These assessments are conducted in newly accessible areas and target FSS beneficiaries. The idea is to learn of beneficiaries' food security situation before and after food distribution.

#### Gaps & Constraints:

- There are 5.1 million people who are food-insecure in the three target states. By the at end January 2017, the Food Security Sector had reached 1.2 million of these people-in-need, reducing the gap to 3.9 million people yet to be reached by food assistance.
- Funding will run out between now and June 2017. Unless the growing gap in funding is addressed immediately, FSS partners will be unable to source the food commodities required to provide the necessary food assistance beyond March 2017
- The lack of access to land is the key driver of extremely poor agricultural production.
- Deteriorating access to food is becoming an additional burden to most households in the conflict zones.
- Inaccessibility to markets severely constrains the purchasing power of market-dependent households. There is only limited relief from off-season crop production and labour opportunities.



#### Nutrition

#### Needs:

- An estimated 3.4 million people (children 6-59 months and pregnant and lactating women) will require humanitarian nutrition services in Adamawa, Borno and Yobe states. Of these, it is estimated that 450,000 children under five years will require services to manage severe acute malnutrition (SAM).

#### Response:

- A joint vitamin A, de-worming and measles campaign, conducted in 25 accessible LGAs in Borno State concluded on 27 January. Preliminary data from this campaign, received from 12 LGAs, indicates that about 1.2 million children aged 6-59 months received high dose Vitamin A supplementation.
- A 50-bed capacity stabilisation centre to manage severe acute malnutrition (SAM) with medical complications opened in Fori primary health care facility in Maiduguri Metropolitan Council (MMC). This will reduce pressure on current stabilisation centres. Currently 14 children are undergoing treatment in the facility.
- An additional 6,000 SAM cases were admitted to treatment programs across in the reporting period. At this time, three per cent of the targeted SAM children have been admitted to treatment programmes.
- Training in infant and young child feeding (IYCF) in emergencies concluded in Borno State. The training targeted the staffs of 30 international non-governmental organisations and the State Primary Health Care Development Agency. It will improve coverage of IYCF interventions in the state.

#### Gaps & Constraints:

- Some 305,961 children with SAM (97 per cent of the target) are yet to be reached in Adamawa, Borno and Yobe states.
- The sector has not received any funding under the 2017 requirements.
- Planned missions to the recently accessible areas need to be postponed frequently due to limited air capacity and

armed escorts.



### Needs:

- The restoration of health services and non-functional health facilities.
- Provision of quality primary and secondary health care services, essential medicines and medical supplies, especially in recently accessible areas.
- Re-establishing a functional health referral system for secondary and tertiary care.

### Response:

- The mass measles vaccination campaign has concluded across Borno State. A total of 2,927,949 children were vaccinated – 94 percent of the targeted 3,113,620 children aged 6 months to 10 years, in 24 LGAs. For security reasons Kala Balge LGA was inaccessible.
- The Borno State health authorities and the Centres for Disease Control and Prevention (CDC), under the chair of the State Primary Health Care Development Agency (SPHCDA), activated the cholera preparedness working group with key Ministry of Health (MOH) agencies and Health Sector and WASH Sector partners.
- The Health Sector is scaling-up the number of community resource persons (CORPs) to 500. The CORPs are volunteer community-based health workers who are trained to classify and treat key childhood illnesses, and also to identify children in need of immediate referral under Integrated Community Case Management (ICCM) and Integrated Management of Childhood Illness (IMCI). They are an important for reducing mortality, especially among marginalized children who otherwise would have limited or no access to life-saving treatment
- In the reporting period 68 new CORPs received training. The teams are now deployed in their respective communities; 57 new supervisors were also trained in the supervision of ICCM, and will be linked with CORPS and the Nigerian health system. They will be responsible for the supervision, drugs supply and data collection of CORPS teams. There are 282 trained CORPs providing services in 25 LGAs, and in 243 settlements.

### Gaps & Constraints:

- The long-term nature of the task of restoring health services and non-functional health facilities.
- The shortage of skilled health care workers especially doctors and midwives, and the reluctance of people to work in recently accessible areas,
- The delivery of live-saving health services is hampered by the limited availability – or non-availability – of qualified human resources and essential medicines, and the destruction of medical facilities,
- The upward review of import duties on anti-malarial drugs and antibiotics is likely to increase the burden on already vulnerable populations and drive up the cost of treating malaria and fighting epidemics.
- The need for food assistance is likely to increase further from March, when stores from the low-yielding harvest of 2016 run out, marking the start of the annual lean season.



### Needs:

- The spontaneous returns of IDPs and refugee returnees from neighbouring countries in the Lake Chad Basin were the most dominant trend in the past two weeks. These returns are taking place against the backdrop of an escalation in military offensives. In addition, The Government reiterated its commitment to the closure of IDP camps by 31 March 2017 in Adamawa State, and by 29 May 2017 in Borno State. All these conditions involve a range of protection concerns.
- Many humanitarian actors have serious reservations concerning their limited access to beneficiaries trapped in villages beyond LGA headquarters.
- There are security concerns in the LGAs of Gozamala, Marte and Abadam, where many IDPs have returned.
- IDPs need assistance in the renewal of lost documentation.
- During the reporting period, 43 cases of sexual and gender-based violence (SGBV) were recorded – of which 36 cases involved child marriages. Harmful traditional practices and poverty are the main contributing factors in under-age forced marriages. Awareness-raising sessions and psychosocial and medical service were required.
- In the host communities of Kwashafa and Hudufi almost all households (HHs) are in urgent need of food, shelter, CRIs, health, WASH, education facilities and sources of livelihood. These HHs are composed mainly of new arrivals. They Lack of potable water and this forces IDPs to drink from unsafe sources, leading to health hazards.

- The large increase in the number of new arrivals has depleted the meagre food IDPs receive. This shortage of food supply from donor agencies has profoundly affected IDPs in Bayo LGA who depend on the food emanating from the central kitchen. There are many cases of malnourished children due to food scarcity.
- Many indigent IDP children are being sent out to the streets to beg and hawk as a source of income generation; this exposes such children to serious protection risks, and needs the attention of the child protection sub-sector.
- Drug abuse is becoming a serious concern in IDP camps, requiring interventions from the Protection Sector.
- Numerous IDP children are not attending school and are engaged in child labour, and are a child protection concern.

#### Response:

- 200 dignity kits and re-washable sanitary pads were distributed to vulnerable women;
- 100 thermal water bottles were distributed to vulnerable women and girls;
- 490 women and adolescent girls received training under a variety of skills acquisition programs;
- 3,326 people mostly women, but also including men and adolescent boys and girls, were reached through awareness-raising and community sensitization programmes on gender-based violence (GBV) and sexual exploitation and abuse (SEA);
- 30,926 people were reached with psychosocial support (PSS), including case management;
- 8 cases of GBV referrals largely involved PSS and medical care.
- 100 Chairmen of Local Government Areas, and Heads of Districts, were trained in the registration of returns.
- 48 members of the Nigerian military from Bama, Dikwa Damboa, Mubi and the Maiduguri field offices, were trained in best practices in civilian protection, including Prevention of Sexual Exploitation and Abuse (PSEA).
- 22 community workers trained in basic psychosocial care.

#### Gaps & Constraints:

- Thousands of IDPs are being deprived of immediate life-saving assistance due to the restriction of movement, security concerns and lack of access to people-in-need, which remain major protection concerns in the recently accessible areas.
- The coordination of protection activities and the mapping of who is doing what, and where, remain a challenge.



## Education

#### Needs:

- Increased funding is required to provide the key components of a minimal education package.
- Increased partner engagement and support is needed to provide more children with education services.
- In the recently accessible areas and in informal camps in Dikwa, Damboa, Konduga, Mafa, Bama and Mongono, schools have insufficient classrooms, teaching and learning resources and teachers, to deliver education.
- Weather-resistant and protective temporary learning spaces are required, for the child-friendly learning environment needed to support quality learning
- Support is required to access hard-to-reach locations, to respond to educational needs and to monitor results.

#### Response:

- Through a massive enrolment drive 116,355 children (60,083 boys and 56,272 girls) were newly enrolled for the November kick-off of the 2016-2017 academic year.
- 30,920 of these learners (14,688 boys and 16,232 girls) were enrolled in 13 schools throughout 12 IDP camps in the LGAs of Maiduguri Metropolitan Area (MMC) and Jere; and 85,435 children (45,395 boys and 40,040 girls) were enrolled in 429 host community schools.
- 2,523 school bags were distributed to learners (1,329 boys and 1,194 girls) in eight IDP camps, in Maiduguri and Jere.
- 22 temporary learning spaces were set up in newly established IDP camps in Custom House, in the LGA of Jere, where more than 2,200 children have been enrolled (50 per cent of whom are girls).
- 33 prefab classrooms were installed in Damboa, Bama, Gwoza, and Konduga LGAs where 1,320 children were enrolled (50 per cent of whom are girls).
- The components for 17 prefab classrooms were delivered to Yobe.
- 188 girls and women registered as vocational trainees in various skills including: cap making; tailoring, local baking, confectionery and wet milling; 100 were trained in MMC LGA (Borno State) and 88 trained in Mubi LGA (Adamawa State).

**Gaps & Constraints:**

- While improved accessibility to LGAs previously held by armed groups has increased opportunities to access education, in some cases the terrain remains a key constraint and makes humanitarian access largely dependent on helicopter availability.
- In the four LGAs of Kala Balge, Ngala, Dikwa and Bama, only four of the 24 primary and secondary schools that existed prior to the attacks by armed groups, are still functional.
- In Banki, Borno state education has been re-established after a massive attack by armed groups during the construction of one school and deployment of 20 teachers.
- In most of the affected LGAs, the failure of education personnel to return to their areas of origin after fleeing, has created huge gaps in teaching and learning.
- Two additional permanent IDP camps (Custom House 1 and 2) were built in Maiduguri to host the rising IDP population. The presence of at least 10,000 IDPs in these camps highlights the growing educational needs.

**Water, Sanitation and Hygiene****Needs:**

- An estimated 3.6 million people need WASH services. This figure includes 1.35 million people in host communities, 1.35 internally displaced people (IDPs) and 900,000 returnees. The sector's target is to reach two million of these people-in-need in 2017.
- There is a dire need for safe drinking water, sanitation and hygiene among the displaced populations.
- The WASH facilities in newly accessible LGAs are overwhelmed by the recent influx of IDPs into these locations.
- Recent assessment indicated that more than 70 per cent of the WASH infrastructure has been either completely or partially destroyed.

**Response:**

- During this reporting period:
  - 160,173 children, women and men obtained safe and equitable access to water.
  - 59,220 children, women and men obtained access to improved sanitation facilities
  - 22,050 people received access to bathing cubicles.
  - 25,982 people benefited from the distribution of non-food items (NFIs) in recently accessible areas of Borno and Adamawa states.
  - 69,276 people benefitted from the dissemination of hygiene promotion messages in camps, informal settlements and IDP host populations.
- Also during this reporting period, the sector carried out needs assessments (notably in the LGAs of Magumeri, Konduga, Ngala, Damboa, Dikwa, Gwoza, Biu and Mafa) to identify emerging humanitarian needs and appropriate responses..
- The WASH Sector held a technical review meeting with Health Sector partners to prepare a cholera response for 2017 in Borno State. The sector is mapping cholera hotspots and planning to take preventive measures.

**Gaps & Constraints:**

- There are 1.83 million people-in-need who are yet to be reached by WASH services.
- The biggest challenges are insufficient funding and a lack of humanitarian partners in those geographical areas where there is a strong need for WASH services.
- The movement of heavy equipment (drilling rigs and compressors) in insecure areas is still a big challenge and this has added considerably to the cost of drilling and other WASH interventions..
- There is not enough land available to construct the required number of gender-segregated latrines, to meet the needs of targeted populations in camps.

**Displacement Management Sector/Shelter and Non-Food Items (NFIs)****Needs:**

- Between 29 January and 7 February, an estimated 3,000 new arrivals were reported in Pulka; 8,000 in Monguno and 1,827 in Konduga, due to ongoing military activities. Also 2,000 IDPs were relocated to Dikwa town (DTM ETS report, see Page 2 above). Shelter support and displacement management interventions are needed urgently, to respond to the immediate needs of IDPs in these locations.

**Response:**

- During the reporting period, 1,700 families received non-food item kits (NFIs) in sites and host communities in Borno State; and in Adamawa State 128 bedding kits were distributed.
- In Maiduguri LGA, Borno State, additional transitional shelters were constructed in Muna Garage (40), Bakassi (56), Fariya (20) and Custom House (114); and 300 shelter kits were distributed in Mafa LGA.
- Four emergency shelters were constructed in Malkoli site, Yola South LGA, in Adamawa State; emergency shelters were also constructed in Bama LGA (190), Monguno LGA (40) and Ngala LGA (300), in Borno State.
- In Yobe State 500 shelter kits were distributed in the LGAs of Gujba (300) and Galani (200).

**Gaps & Constraints:**

- Despite the increase in interventions, there is still limited accessibility in several areas, and the logistical concerns of the upcoming rainy season may further affect access; the need for humanitarian partners to obtain a military permit to access certain areas is an additional constraint, as are the current surges in IDP movements.
- There is a shortage of strong dedicated camp managers, and this leads to critical gaps in the responses to IDPs' needs, particularly in the case of new arrivals.
- There are displacement management gaps due to the increased military operations leading to new arrivals in areas already lacking minimal infrastructures and support such as Dikwa, Monguno, Pulka, Gwoza and Damboa.
- Fundraising needs to be intensified to meet targets. Last year the Displacement Management/Shelter/NFI Sector received only 32 percent of the required \$ 54 million in funding.
- In Ngala camp, there is a need to identify additional land, to assess flood risk and to find a partner to support the repair and rehabilitation of IDP sites, or collective centres.
- Shelter and NFI needs among the IDP population remain a high priority, with large populations of IDPs living within school buildings serving as collective centres, as well as in makeshift shelters.

**Logistics****Needs:**

- As operations are now scaling up, there is an urgent need for a coordinated and enhanced logistics response, to ensure effective and efficient delivery of aid.
- The focus will be now around scaling-up mobile storage capacity outside Maiduguri, in locations where humanitarian hubs are to be established.

**Response:**

- The mobile storage capacities have increased in Gwoza to 640 m<sup>2</sup> and 1920 m<sup>3</sup>, for food and non-food items, ahead of the establishment of a humanitarian hub there.
- The sector also prepositioned hub kits to Ngala and Gwoza ahead of the construction of humanitarian hubs in both places.
- The sector is providing Mobile Storage Units (MSUs) on loan, outside humanitarian hub locations. Organisations may use these MSUs in coordination with the Logistics Sector partner managing them. Two such MSUs in Dikwa are already serving the needs of two partners engaged in food distribution.
- The Logistics Sector has taken over from OCHA the task of humanitarian access mapping, using an interactive tool for the more accurate collection and management of data. The sector also now coordinates requests for military escorts for cargo and staff movements with the Nigerian Armed Forces on a weekly basis, on behalf of humanitarian organizations

**Gaps & Constraints:**

- The volatile security situation and on-going military operations make it difficult to organize effectively the movements of cargo and personnel.

**Emergency Telecommunications****Needs**

- As operations scale up, the locations chosen for humanitarian hubs require the deployment of vital communication services.

**Response**

- Two UN agencies deployed technical resources in Maiduguri to support the ETS in upgrading the existing UN security communications system to become compliant with Country Minimum Operational Security Standards (CMOSS).
- The ETS held a meeting with a specialist in communicating with affected populations (CwC) to identify potential areas and projects where the ETS could provide support. The specialist was provided by the UN Office for the Coordination of Humanitarian Affairs (OCHA).

**Gaps & Constraints**

- The ETS is appealing for US\$3.6 million to provide vital connectivity and security telecommunications services until the end of 2017, in eight operational areas.

**Early Recovery**

*As this is the first appearance of the Early Recovery Sector in our Situation Reports, the sector has been given latitude to report on activities that were implemented between October 2016 and February 2017.*

**Needs:**

- Approximately 1 million households need to stabilise and re-establish their livelihoods.
- It is necessary to rehabilitate basic services and infrastructures, to ensure safe, dignified and voluntary returns, in the 32 most affected LGAs in the states of Borno, Yobe and Adamawa.
- Social cohesion activities are required in the three states as well as assistance with community security, including mine clearance, and support for crime prevention.
- The reintegration of former Boko Haram (BH) and Joint Civilian Task Force (JCTF) members will gain in importance during the second quarter of 2017, and must be considered in humanitarian response plans.

**Response:**

- From the end of 2016, a total of 348,000 of the most vulnerable conflict-affected people benefited from interventions by this sector.
- Five primary schools were rehabilitated in the communities of Markinta Kururi (Kaga LGA), Wajiroko and Sabon Gari (Damboa LGA), Kwajaffa (Hawul LGA) and Debiro (Biu LGA).
- Five health facilities were rehabilitated, including maternity centres in Gambodu (Ngala LGA) and Damboa (Damboa LGA); health dispensaries in Kwajaffa (Hawul LGA) and Sabon Gari (Damboa LGA); and the general hospital in Damboa (Damboa LGA).
- The project to rehabilitate the above health facilities provided cash-for-work to support to 4,000 skilled and unskilled community workers.
- Unconditional cash grants were provided to a total of 82,000 of the most vulnerable conflict-affected people.
- 1,250 accredited conflict-affected entrepreneurs were supported with cash grants to restart their businesses. At least 20 per cent of the beneficiaries were women.
- Support was given to 1,280 small business entrepreneurs, including electricity generators (for barbers and mobile phone repairers), milling machines (for millers), butterfly sewing machines (for tailors), and welding machines (for welders). The beneficiaries were selected from nine LGAs in Borno State, five LGAs in Yobe State, and seven LGAs in Adamawa State.
- In Adamawa State, 679 entrepreneurs received skills-acquisition trainings six months duration in mobile phone repairs, metal welding and aluminium fabrication.
- 137,804 people attended Mine Risk Education sessions in 16 IDP settlements and host communities in Borno and Yobe states. An average of 20 persons attended each session; 53 per cent of the participants were women and 43 per cent were under 18 years of age.
- 200 clerics, young persons, women, community leaders and media practitioners, were trained in counter-radical narratives, as part of de-radicalization and social cohesion initiatives in Borno, Adamawa and Yobe states.
- 117 security personnel trained on critical community security aspects and were deployed to crisis locations in Borno, Adamawa and Yobe states for the protection of civilians. Three training streams with varying numbers of participants (48, 45 and 24) were conducted for 8 days each; 41 per cent of the beneficiaries were female officers.

**Gaps & Constraints:**

- While the 2016 experience has shown that a lot can be achieved with modest resources, the required scale-up in the

rehabilitation of basic services and infrastructures will require significant additional investment over the coming two to three years.

- In the light of improved security and access at the end of 2016, economic recovery activities should now be scaled up rapidly to reach the most vulnerable communities in Adamawa, Borno and Yobe states. The peace dividends to be enjoyed by a large part of the affected population could contribute to further stabilisation.
- The initial returns in the second half of 2016 demonstrated that without a minimum level of community security and reconciliation, population returns are not sustainable and lead to secondary displacements. Increased investment in Early Recovery will be required.

## General Coordination

- The Health Sector discontinued the Health Supply Chain Working Group meetings. This topic will henceforth be integrated into the Logistics Sector coordination meetings.
- The Emergency Telecommunications Sector (ETS) continues to organise the Local Telecommunications Working Group and Global ETS meetings twice a month, for a coordinated IT response by all humanitarian organisations operating in north-east Nigeria. It recently distributed a brochure detailing ETS services in the north-east.
- The Education in Emergencies Working Group (EiEWG) convened a crucial partner-donor forum on 25 January 2017 to discuss the unavailability of an Education in Emergency (EiE) Curriculum address emerging needs of conflict-affected children. Participants included key senior government representatives, EiEWG members and funding organizations.
- A consultative engagement took place with the Nigerian Educational Research and Development Council (NERDC), which is responsible for national curriculum development. There was of presentation of the rationale, scope and action plan for curriculum development. Key Federal Ministry of Education (FME) directors were present, including the directors of planning, research and development, quality assurance and basic and secondary education.
- The Health Sector has hired a roving sector coordinator and sub-national coordinators, to strengthen the sector's response.
- The Nutrition Sector partners are developing a community mobilization and sensitisation campaign, to ensure that nutrition services are available every day. The sector has also embarked on a rationalisation exercise to ensure that the sector has one partner per LGA and that nutrition services are available in at least one site in every ward.
- Yobe State primary health care development agency developed a 5-year multi-sectoral strategic response plan, in collaboration with humanitarian partners and the Nutrition Sector. It will inform a nutrition action plan for the state.
- The monthly national nutrition coordination meeting will now be held routinely on the first Friday of every month.
- The WASH Sector is strengthening integration with other sectors (especially Health, Nutrition, Education and Child Protection) to advance convergence opportunities and improve the effectiveness of WASH activities.
- The WASH Sector is encouraging its partners to extend their WASH activities to recently accessible LGAs.
- The WASH Sector established coordination at a local level in three LGAs, for enhanced services to the most vulnerable people. The coordination is led by sector partners: Oxfam-GB in Damboa and Biu, and Solidarité in Monguno.
- The DSM/Shelter Sector held a three day workshop in Maiduguri to agree on priorities. There were more than 50 participants, including Government representatives and international and local non-governmental organisations.
- The DMS/Shelter held coordination meetings in Abuja, Borno and Adamawa states; it also coordinated site planning for Ngala with the WASH sector; and a special working group reviewed Cash for Shelter/NFI interventions.

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