Nigeria: Floods
Office of the Resident Coordinator Situation Report No. 1
(as of 07 November 2012)

This report is produced by Office of the Resident Coordinator in Nigeria in collaboration with humanitarian partners. It was issued by OCHA HAT in Nigeria. It covers the period to 06 November 2012. The next report will be issued on or around 09 November.

Highlights

- Nigeria is currently experiencing the worst flooding in more than 40 years.
- Between July and the end of October, 7,705,378 people have been affected by the floods and 2,157,419 have registered as IDPs at some moment; 363 people are reported dead, more than 618,000 houses have been damaged or destroyed; 33 States out of 36 are affected.
- Floods are now slowly receding.
- A Presidential Committee on Flood relief and Rehabilitation was established, which includes members of the private sector. The President announced $110 million of federal funds.
- Based on the result of an Interagency assessment in 14 most affected states, the humanitarian community has presented an initial $38 million plan.

Situation Overview

Nigeria is currently experiencing the worst flooding in more than 40 years as a result of heavy rainfalls in the country, the downstream move of the Niger River floods that previously affected Niger and Benin, and the release of water from dams, including the Ladgo dam in Cameroon during the last week of August.

According to the latest figures provided by the National Emergency Management Agency (NEMA) 7,705,378 people have been affected by the floods in Nigeria between July and 31 October, and 2,157,419 have registered as IDPs at some moment to receive assistance. This means that the number of persons currently sheltered in sheltering structures, including schools, may be significantly lower, since many people are living with host families and other have already returned home. A total of 363 people are reported dead and over 18,200 have been injured. More than 618,000 houses have been destroyed or damaged.

Out of the 36 states of the country, 33 are affected, including 14 that are considered severely affected. A total of 256 Local Government areas (LGAs – subdivisions of the states) and 3,870 communes are affected. The state of Kogi has recorded the highest number of affected people (1.35 million) followed by Adamawa (1.11 million) and Delta (785,000).

Floods are now slowly receding, starting from upstream states. The Nigeria hydrological services agency (NIHSA) has announced that the level of the Niger River in Lokoja was at 8.83 meters on 1 November, while it peaked at 12.84 meters on 29 September. The discharge of the Niger has dropped from 31,692 cubic meters per second on 29 September to 17,722 cubic meters per second on 1 November. The National meteorological agency has announced additional rains until December, but added they should not result in additional flooding.

The early recovery realizations and long-term work though Post damage needs assessment (PDNA) are ongoing. Report is expected in early December.
**Funding**

On 9 October, President Goodluck Ebelele Jonathan announced that the federal Government would provide Naira 17.6 billion (US$ 110 million) to be distributed to states depending on how affected they were.

A Presidential Committee on Flood relief and Rehabilitation was established, which includes members of the private sector. The Committee will organize a major fundraising dinner on 8 November at the President’s house. According to media, the Committee aims to raise up to Naira 100 billion (approx. $637 million), a total that would include both immediate relief and long-term reconstruction and rehabilitation.

The International Federation of Red Cross and Red Crescent Societies have launched an Emergency Appeal Fund of US$ 216,561 (Nairas 34 million). This appeal will be used to help flooding affected people in Adamawa, Taraba, Kogi, Plateau, Katsina, Cross River, Jigawa, Kogi, Benue and Edo states.

According to FTS, Sweden had given $152,672 for Flood response in areas of emergency shelter, relief, distributions, emergency health, WASH promotion, logistics and disaster risk reduction.

As a regional response to serious flooding in Benin, Cameroon, Niger, Nigeria and Chad since the beginning of the rainy season, the European Commission has committed €1 million of humanitarian funding to over 95,000 of those worst affected. Much of the funding will go towards providing emergency shelter and basic household items to those who have lost nearly everything.

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA’s Financial Tracking Service (FTS - http://fts.unocha.org) of cash and in-kind contributions by e-mailing: fts@un.org

**Humanitarian Response**

Following the interagency assessment made 19-25 October in 14 states, the Humanitarian community presented on 1 November a US$ 38 million draft response plan to the Presidential Committee on Flood relief and Rehabilitation to fill the current gap in the response. The plan is based on a working figure of 2.1 million people in need of assistance. Sectors involved are: education; health; nutrition; water, sanitation and hygiene; protection; and shelter/NFI. Collection of information on 3W is ongoing.

![Breakdown of requirement for the draft response plan](http://fts.unocha.org)

<table>
<thead>
<tr>
<th><strong>Sector</strong></th>
<th><strong>Requirements</strong></th>
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<tbody>
<tr>
<td>Education</td>
<td>40,730,000</td>
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<tr>
<td>Health</td>
<td>545,000,000</td>
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<tr>
<td>Nutrition</td>
<td>234,000,000</td>
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<tr>
<td>Water, sanitation and hygiene (WASH)</td>
<td>4,604,354,000</td>
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<tr>
<td>Protection</td>
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<tr>
<td>Shelter/NFI</td>
<td>118,897,275</td>
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<tr>
<td><strong>Grand Total</strong></td>
<td>5,965,983,775</td>
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</tbody>
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**Education**

Needs identified by the interagency assessment mission in 14 states:

- Education activities have been severely disrupted
- 53% of schools in the communities visited are not available for schooling. Out of this total 77% are destroyed and 23% are occupied by IDPs.
- In some communities, the teacher/pupil ratio is about 1:400 (e.g. Plateau state).
- Lack of educational material.
Response plan

The response plan aims at the immediate restoration of Education through the promotion of access and continued learning in a safe protective environment by all children and adolescents in affected areas. Objectives are as follows:

- To ensure that schools are immediately restored for education use: IDPs occupying school premises should be allocated alternative accommodation in order to allow school activities to resume.
- To ensure that alternative learning spaces (where schools have been occupied) and learning materials (school tents, school and recreational kits, learners’ and ECD kits and educational materials) are available.
- To create awareness of the affected community on peace building/conflict resolution, violence and abuse prevention and increase their knowledge base and coping capacities.
- To ensure that culturally appropriate key communication messages on violence prevention, peace building and sanitation and hygiene available.
- To empower teachers, pre-school care providers and community-based paraprofessionals in affected communities with skills and knowledge to provide psychosocial support and Life skills Education to learners.

Food Security

Main needs identified by the interagency assessment mission in 14 states

- Populations don’t have access to markets and the food distribution in camps is not regular.
- In 82% of the communities visited, the food insecurity is severe or very severe.
- Farmlands and storage facilities as well as livestock are washed away.
- There is limited access to market in some communities and prices of basic food communities have sharply increased.

Response plan

The draft response plan presented to the Presidential committee does not include the food security sector.

Ongoing response

With support from the IFRC and other partners, the Nigeria Red Cross is providing support to 10,000 households in of Adamawa, Taraba, Kogi, Bauchi, Katsina, Cross River, Jigawa, Kogi, Benue and Edo States. This includes food.

Health

Main needs identified by the interagency assessment mission in 14 states

- In several states, health facilities have been damaged, limiting access to basic health services, especially in Bayelsa and Delta States.
- Medical staffs, supplies and commodities were generally inadequate.
- Prevalent health problems reported include diarrheal, malaria and typhoid.

Response plan

The response plan aims to prevent excess mortality and morbidity among the IDPs and host communities by restoring basic health services and supporting early detection and rapid response to communicable disease outbreaks. Objectives are as follows:

- Restore access to basic and referral health care including curative and preventive health services
- Continue assessments of the health situation and public health threats
- Strengthen surveillance of epidemic-prone diseases and response to outbreaks
• Support health partners through coordination and response planning to address the health needs of flood-affected populations
• Promote health

Ongoing response operations
MSF is providing assistance in Adamawa and Taraba states with mobile clinics. In Taraba state, MSF teams carried out 1,430 consultations in Mayorenweno and 10 nearby villages and locations where displaced people had settled, including Bandawa Virna, Zip, and Didango, providing primary and emergency health care, focusing on children under five and pregnant women. In Adamawa State, MSF mobile clinics treated 5,500 patients in 33 flooded villages and two internally displaced people’s camps in Numan and Borong. Soap and mosquito nets were also distributed to 2,200 beneficiaries.

Nutrition

Main needs identified by the interagency assessment mission in 14 states
• Access to Management of childhood illnesses, including treatment of acute malnutrition were lacking

Response plan
• The response plan aims to provide life-saving nutrition interventions and promotion of infant and young child feeding practices during emergency to ensure appropriate nutrition emergency response.
• The targeted beneficiaries are 49,060 children under five to be treated for severe acute malnutrition (SAM); and 327,067 caregivers/mothers of children 6-23 months to benefit from promotion of optimal infant and young child feeding practices to ensure adequate growth and development.

Protection

Main needs identified by the interagency assessment mission in 14 states
• Camp layout does not take into consideration protection concerns especially for women and children.
• Overcrowding is evident in all camps and communities creating high risk for sexual and gender-based violence.
• Inadequate security measures in camps and communities

Response plan
The response plan aims to prevent and respond to abuse, exploitation and violence against children (directly or indirectly) affected by the flood; and to mitigate potential protection risks by closely coordinating with other sectors to ensure protection needs are given due considerations in all of their planned interventions and actions.

The plan includes short term measures activities such as the establishment of protection coordination systems at state and federal levels for information sharing and follow up on protection concerns; the facilitation of initial protection interventions; provision of facilities for children and their protection; SGBV protocol for reporting and assistance to survivals; the identification of women of reproductive age and distribution of hygiene kits; monitoring of the distribution of relief items to ensure it is done without discrimination; creation of sensitization mechanisms in IDP camps and communities on areas of protection concerns; the monitoring of protection incidents.

The plan also provides for Medium and Longer term measures: Profiling of IDPs including disaggregation of IDP population; continued assistance until return and resettlement phase; Continued counseling and psychosocial support to traumatized victims; and continued advocacy and monitoring of human rights principles.
Main needs identified by the interagency assessment mission in 14 states

- Approximately 63% of the IDPs are living with host families while 37% are in camp like situation.
- There is overcrowding and overstretching of family resources.
- IDPs camps are mostly located in schools and public places.
- NFIs have not been distributed in most rural areas. E.g. Kogi, Bayelsa, Benue and Delta.

Response plan

The response plan aims to provide adequate and appropriate shelter for IDPs families and NFIs for their specific needs.

In the short term, this includes the provision of Tents for 350,000 families (one per family); assistance to vulnerable groups to build shelters; distribution of Basic NFIs (Blankets, Sleeping mats/Mattresses, Mosquito Nets, Cooking Sets, 20lits Jerry Cans/Buckets, Soap, Clothes, Lanterns) to 350,000 families; Sensitization/awareness campaigns in camps and communities to support re-building activities and against overcrowding; Monitoring of shelter standards and practices; the establishment of an operation coordination system at SEMA level. UNFPA will provide Mama Kits for women in reproductive age.

Medium to long-term activities will include provision of construction material for 350,000 families for re-construction of individual family houses and training and support to construction activities.

Ongoing response

With support from the IFRC and other partners, the Nigeria Red Cross is providing support to 10,000 households in Adamawa, Taraba, Kogi, Bauchi, Katsina, Cross River, Jigawa, Kogi, Benue and Edo States. This support includes non-food items such as mosquito nets, blankets, sleeping mats, jerry cans, buckets, soaps, shelter tool kits, tarpaulins, hygiene kits and kitchen sets.

Water, Sanitation and Hygiene

Needs identified by the interagency assessment mission in 14 states

- In almost all the communities, there is no provision of clean water. 63% of drinking and cooking water comes from streams or unprotected wells. Due to the lack of clean water epidemic is looming.
- Inadequate sanitation has been reported in almost all the host communities and camps visited by the teams.

Response plan

The response plan aims to ensure provision of safe water, proper sanitation and improved hygiene for the affected population in IDP camps and communities. Objectives are as follows:

- To ensure the availability of minimum safe drinking water supply (15 lit/capita/day) at a maximum distance of 500m) taking into account privacy, dignity, and security of most vulnerable segment of people including girls and women in IDP Camps, affected and host communities.
- To ensure people have adequate numbers of toilets, sufficiently close to their dwellings, to allow them safe and acceptable access at all times of day and night
- To facilitate dissemination of key messages on hygiene including hand washing

Ongoing response

With support from the IFRC and other partners, the Nigeria Red Cross is providing support to 10,000 households in of Adamawa, Taraba, Kogi, Bauchi, Katsina, Cross River, Jigawa, Kogi, Benue and Edo States. This water purification tablets (aqua tabs) and Oral Rehydration Salt (ORS).
General Coordination

A Presidential Committee on Flood relief and Rehabilitation has been established. The committee includes Ministries, MPs, state agencies such as NEMA, representatives of donors (USAID, World Bank, EU, DFID) the UN System (through the RC) and members of the private sector. The committee is chaired by Nigerian businessman Aliko Dangote.

A joint interagency assessment mission took place 19-25 October in 14 states - Bayelsa, Kogi, Adamawa, Delta, Edo, Niger, Taraba, Benue, Anambra, Jigawa, Plateau, Kwara, Kebbi and Jigawa. Initial finding show that many communities are completely washed away and inaccessible, especially in Bayelsa, Kogi and Delta. Many public infrastructure such schools, health centres, roads and bridges have been completely destroyed. Most of the IDPs have lost their livelihood and in 82% of the communities visited, the food insecurity is severe or very severe. There is a high risk of outbreak of epidemics, populations having very limited access to clean water and to adequate sanitation.

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