



Nigeria

Humanitarian Situation Report



SITUATION IN NUMBERS (IOM, Oct 2015)

Highlights

- According to IOM's DTM Round VI report (October, 2015), there are an estimated 1.87 million IDPs as a result of the insurgency located in the three North East states of Borno, Yobe and Adamawa (including close to 1.1 million children). This presents a 5% decrease in the total number of displaced people due to the insurgency when compared to the numbers of displaced people reported in August 2015.
- As of 5th November, there has been a total of 949 cases of cholera with 17 deaths and a case fatality rate (CFR) of 1.8% recorded since the 7th October. There has been a steady increase in the proportion of cases located in surrounding communities – 54% of all cases compared to 33% previously reported.
- 56,737 children have been reached with psychosocial support services in 147 communities and 22 IDP camps in the three North East states affected by the crisis, through a network of 474 trained community volunteers.
- An additional 213 unaccompanied and separated children (119 boys, 112 girls) have been identified, bringing the total number of unaccompanied and separated children whose cases are being managed by a team of social workers and case workers trained on child protection case management to 1,392 across the three states.
- The efforts made during the Back to School campaigns in Yobe and Borno states are yielding appreciated results. As a result of these campaigns that started at the end of September 2015, a total of 170,432 children (85,634 girls and 94,798 boys) previously out of school have now been enrolled.
- From January to September 2015, 51,860 children under five with SAM were newly admitted for treatment in the states of Adamawa, Borno and Yobe and 214,917 children were screened with MUAC in IDP camps and host communities. Systematic screening is conducted in IDP camps once every week. The proportion of children found with severe acute malnutrition among screened children in IDP camps is 3.2%, which is similar to the overall estimates in the host community.
- As of 30 September 2015, UNICEF has received around \$14.8 million USD against its 2015 HAC requirements of \$26.5 million USD (56% of total requirements); with a funding gap of 44% remaining.

1 November 2015

1,978,950

IDPs as a result of the insurgency in Nigeria located in 10 States (Adamawa, Borno, Yobe, Bauchi, Gombe, Nasarawa, Taraba, Kaduna, Plateau and Abuja)

1,135,917

Estimated IDPs under 18 years as a result of the insurgency in Nigeria located in 10 States (Adamawa, Borno, Yobe, Bauchi, Gombe, Nasarawa, Taraba, Kaduna, Plateau and Abuja)

1,873,459

IDPs as a result of the insurgency in Nigeria located in 3 North East states (Adamawa, Borno and Yobe)

1,069,745

Estimated IDPs under 18 years as a result of the insurgency in Nigeria located in 3 North East states (Adamawa, Borno and Yobe)

IDPs as a result of the insurgency by state:

1,606,406 in Borno
144,302 in Yobe
122,750 Adamawa

Returnees in Adamawa

320,365 IDPs returned to northern Adamawa

UNICEF Appeal 2015*

US\$ 26.5 million

*Humanitarian Action for Children (HAC)

Situation Overview & Humanitarian Needs

Since 2011, the population of the North East of Nigeria has been affected by the insurgency between Jama'atu Ahlis Sunna Lidda'awati wal-Jihad, commonly known as 'Boko Haram', and governmental forces. The government declared a State of Emergency (SoE) on 14 May 2013 in the three North Eastern states of Borno, Yobe, and Adamawa and imposed curfews. The Senate has not yet formally extended the State of Emergency from November 2014 onwards.

According to IOM's DTM Round VI report (October, 2015), there are an estimated 1.87 million IDPs as a result of the insurgency located in the three North East states of Borno, Yobe and Adamawa representing a 5% decrease in the total number of displaced people due to the insurgency as compared to numbers of displaced persons reported August 2015 through the DTM. There is also some decrease in the number of IDPs related to the insurgency in Borno state (3%) and more significantly in Yobe state (26%). In Adamawa state, however, there has been a 4% increase in IDPs. The decrease in Borno and is largely due to the military liberating some Local Government Areas, including Askira, Uba and Gwoza, with some IDPs deciding to return home. In Yobe, the decrease is due to the return of IDPs back to the Tarmuwa LGA, from where they were displaced after attacks by insurgents and the increase in Adamawa is due to some refugees being repatriated from Cameroon and Central African Republic as well as mass displacement following insurgent attacks in Madagali LGA.

There are also 320,365 IDP returns in Adamawa, up from 262,324 IDPs reported in August. Ninety-two percent of the IDP population live in host communities with the remaining 8 percent living in camps. Children make up 57.4 percent of the IDP population with 28 percent being children of 5 years old or younger.

The number of IDPs in Gubio Camp has doubled to 10,700 IDPs in the past two months due to the relocation of 5,430 IDPs by the state government of Borno from Yola in Adamawa state and the spontaneous movement of 1,000 IDPs from Baga in Borno state. In Adamawa, the number of IDPs located in the 5 formal camps has decreased from 10,377 to 7,618 people as a result of the return of IDPs to their respective communities, organized by the state government.

The cholera outbreak in Maiduguri in Borno state has affected 10 IDP camps and some communities in the surrounding areas. The number of camps affected by the outbreak has doubled since the last situation report. As of 5th November, there has been a total of 949 cases with 17 deaths and a case fatality rate (CFR) of 1.8% recorded since the 7th October. While there has been a reduction in the number of cases, there has been a steady increase in the proportion of cases located in surrounding communities – 54% of all cases compared to 33% previously reported. With the reduction in cases, the government has recommended the closure of the Cholera Treatment Centre (CTC) so the bed space can be used to accommodate other referrals. Case management will be focused at clinic level and efforts to contain the outbreak concentrated on community mobilization, hygiene promotion and active surveillance in IDP camps and surrounding communities.

The Borno state High Powered Committee (HPC) that leads the effort to reopen public schools closed for over a year, intends to relocate IDPs in 9 schools (7 secondary and 2 primary) within Maiduguri. Over 55,000 IDPs will be moved to camps that have been identified with the space to accommodate more people. These IDP camps include, Bakasi, Dalori, Teacher's Village, Farm Centre and Bocolis. The HPC has requested additional support for the relocation of IDPs from humanitarian partners on the ground. The provisions of adequate infrastructure and basic services is urgently needed in camps receiving additional IDPs.

Preliminary findings of the multisector rapid assessment conducted from 7-14th September in Yobe and Borno states by the National Bureau of Statistics (NBS) with the support of UNICEF were presented to humanitarian partners through their respective sectors. The findings have been used to contribute to the 2016 Nigeria Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP). The full assessment report will be finalized following the HNO/HRP process.

Humanitarian leadership and coordination

UNICEF actively participates in the Humanitarian Country Team and the Inter-Sector Working Group (ISWG). The HCT provides strategic leadership, policy development and engagement with the Federal Government and meets under

the leadership of the UN Resident Coordinator on a monthly basis. The ISWG promotes sectoral response and coordination. UNICEF leads the Education, WASH and Nutrition sectors as well as the Child Protection sub-sector.

The Child Protection Case Management Information System was adopted by the CPSWG as an inter-agency strategy to respond to child rights violations in humanitarian situations enabling sector partners to report and respond to child protection concerns such as separation from family and caregivers, physical and sexual violence, psychosocial distress, child labour and trafficking.

As part of the roll out of the harmonized child protection system, staff from organizations carrying out child protection case management (International Rescue Committee, Save the Children and COOPI), as well as from the Federal Ministry of Women Affairs and Social Development and State Ministries from Borno, Yobe, Adamawa and Gombe states were trained on the Child Protection Case Management Information System from 27th – 30th October 2015.

Now that the Child Protection sector is an established sub-sector working group, it will be incorporated as a specific chapter in the HNO and be separately reflected in the 2016 HRP with its own sector objectives, activities and indicators, under the overall umbrella of the Protection sector. This is an improvement from the 2015 Nigeria SRP where Child Protection was incorporated within the general objectives of the Protection sector. The current division will enhance the visibility of CP concerns in the humanitarian crisis.

The Global Education Cluster has deployed a Coordinator and Information Management Officer (IMO) from the Rapid Response Team (RRT) to provide support to the Education in Emergency Working Group (EiE WG). Support will focus on the development of the HNO and HRP, training at the national and sub-nation levels of EiE WG partners on HRP monitoring tools and other information management tools needed to support sector coordination.

Fortnightly Nutrition in Emergencies (NiE) Working Group meetings are held in Abuja and Borno while monthly meetings are held in Yobe and Adamawa. Nutrition partners, including the Federal Ministry Health, State Ministry of Health, NAFDAC, NBS, USAID /FFP, INGOs including ACF, CRS, FEWS NET, IMC, Save the Children, IRC, ADRA, WFP, OXFAM, have participated in the development of the HNO and HRP.

UNICEF is working in the 3 states (Borno, Adamawa, and Yobe) to support State Ministries of Health in the coordination of emergency health response in IDP camps and in host communities with high concentration of IDPs. In Borno state, UNICEF is providing support to the State Primary Health Care Development Agency (SPHCDA) to coordinate monthly coordination meetings with all humanitarian partners. UNICEF in collaboration with Federal Ministry of Water Resources coordinated the partners' validation of HNO in preparation for the development of the 2016 HRP. UNICEF and WHO are also working to strengthen the state's coordination and response capacity regarding the cholera outbreak in Maiduguri. As part of response for the ongoing cholera outbreak in Maiduguri, UNICEF supported the activation of weekly joint WASH/Health coordination meetings and at the national level, UNICEF and WHO issue daily joint sitreps on respective sector response activities.

UNICEF continues to provide a co-leadership role for WASH sector coordination at the national and sub-nation levels. UNICEF co-chairs the WASH Sector Emergency Working Group with the Federal Ministry of Water Resources (FMWR) at the national level. At the sub-national level, UNICEF co-chairs the WASH Sector Emergency Working Groups with the State Ministries of Water Resources (MoWR). The sub-national working groups in Adamawa, Yobe and Borno meet bi-weekly with sector partners, including international and national NGOs, SEMA and the national water and sanitation authorities. UNICEF's WASH Specialist in Borno state is providing support to ensure the Working Group meets more regularly.

Summary Analysis of Programme Response

Sector	Sector Response			UNICEF and IPs		
	2015 Target	Total Results	% Target Achieved	2015 Target	Total Results	% Target Achieved
WATER, SANITATION & HYGIENE						
# of conflict affected people including IDPs and host communities provided with access to safe water per agreed standards	462,504	250,574	54%	224,254	182,615	81.4%
# of conflict affected people benefitting from improved sanitation	136,762	95,360	69.7%	87,381	53,733	61.5%
# of conflict affected persons benefitting from hygiene promotion messages	655,000 ¹	523,212	79.9%	276,000 ¹	220,796	80%
EDUCATION						
# Displaced children access education in a protective and safe learning environment	452,620	79,372 ²	17.5%	181,048	46,359	25.6%
# Conflict affected school aged children reached with pedagogic materials	905,240	102,810 ³	11.4%	362,095	94,397	26.1%
HEALTH						
# of conflict affected pregnant women and children under 5yrs that have received LITNs	N/A	N/A	N/A	387,034	38,917	10.1%
# of conflict affected people reached with emergency PHC services	N/A	N/A	N/A	392,034	469,575	119.8%
NUTRITION						
# Children <5 screened using MUAC	434,376	240,917	55.5%	347,501	214,917	61.8%
# Children <5 with SAM admitted to therapeutic feeding programmes	75,859	51,860	68.4%	75,859	51,860	68.4%
% Children <5 with SAM who recovered under treatment	>75%	82%	N/A	>75%	82%	N/A
CHILD PROTECTION						
# of conflict affected children reached with psychosocial support	92,400	74,281	80.4%	53,000 ⁴	56,737	107.1%
# of conflict affected children referred to specialist support services where required	3,050	225	7.4%	500	91	18.2%
# of unaccompanied and separated children identified	3,500 ⁵	2,875	82.1%	2000	1,392	69.6%
# Separated and unaccompanied IDP children reunified with families or placed in alternative care arrangements ⁶	2,292	662	13.4%	1,727	657	38.0%

¹ Sector target and UNICEF target on this indicator to be reviewed by WASH Sub-working Group to reflect beneficiaries reached and gaps in coverage (as applicable)

² Not all sectors partners have provided update for the reporting period- this is partial data for this reporting period

³ Not all sector partners have provided update for the reporting period- this is partial data for this reporting period

⁴ UNICEF Target to be reviewed and adjusted for 2016 planning to reflect increased beneficiary reach

⁵ Sector target to be reviewed in the next Child Protection Sub Working Group meeting to reflect increased beneficiary reach.

⁶This is an aggregate indicator for the time being recognizing that there may be different needs and responses as the situation evolves

WASH

In Borno, UNICEF continues to support the Rural Water and Sanitation Agency (RUWASA) to ensure operation and maintenance of generators to sustain water supply to 50,536 IDPs (10,334 men, 16,575 women, 10,032 boys and 13,595 girls) in Dalori, Government College, NYSC, Arabic Teachers College, Women Teachers College and Teachers Village IDP camps. UNICEF in collaboration with RUWASA and Borno State Environmental Protection Agency (BOSEPA) have completed about 80% of sand filling at NYSC IDPs camp to mitigate the flooding incidence in the camp and prevent outbreaks of WASH related diseases. UNICEF/RUWASA have improved IDP access to safe drinking water in Dalori IDP camp through the construction of two water distribution stands fitted with 10 outlets each.

As part of the cholera containment strategy, WASH partners in collaboration with UNICEF C4D developed the capacity of 250 volunteer community mobilizers (VCMs) from Jere and MMC LGAs on the use of cholera prevention IEC materials. The training culminated in house to house hygiene awareness creation and the distribution of 90,720 English and Hausa flyers and posters in 27 wards. VCMs were also sensitized on the use of Aquatabs, including detailed user and safety instructions in local languages prior to distribution to 10,000 households in Jere and MMC LGAs. RUWASA with UNICEF's support have installed 86 hand washing facilities with 0.05% chlorinated water in various locations in Sanda Shehu Kyarimi, Farm Centre, MOGCOLIS, Gubio Road, CAN Centre, Yerwa, NYSC, Teachers Village, Arabic Teachers Village, Women Teachers College, Government Girls College and Government College IDP camps to promote handwashing practice. At Gubio, Bakassi, CAN Centre, Sanda Shehu Kyarimi and Yerwa IDP camps as well as Goni Damgari host community, 13,412 people (male 3,191, female 4,129, boys 3,169, and girls 2,923) were sensitized on cholera prevention messages and practical handwashing with soap.

In Goni Damgari host community, 1,000 households were sensitized on the use of Aquatabs using the local language and received 10 Aquatabs each. Twenty ECHO funded boreholes were drilled in partnership with RUWASA at Juddumri, Alakaramti, Mammanti, and Molei Shuwari host communities in Galtimari ward in Jere LGA and are awaiting pump installation. Further work on the boreholes were suspended due to security reasons. Two solar motorized boreholes were completed at Farm Center and Teachers Village IDP camps; and 112,359 IDPs continued benefit from UNICEF's collaboration with BOSEPA in the areas of solid waste management, disinfection of toilets, fumigation as vector control and general environmental sanitation in 14 IDPs camps. In 7 IDP camps and Goni Damgari host community, 38,995 people (10,533 male, 10,168 female, 7,586 boys and 10,708 girls) have benefitted from the sustained chlorination of drinking water.

In Adamawa state, UNICEF in collaboration with RUWASA and WASH in Emergency Working Group partners continue to monitor the functionality of WASH services in IDP camps. In Saint Theresa IDP camp, 772 people benefitted from the repair of two hand pump boreholes by RUWASA with the support of UNICEF.

In Yobe State, IDPs in Kaisasa and Kukakareta camps were registered for the distribution of hygiene kits by Yobe RUWASA in partnership with UNICEF. Similar exercises were completed at Pompamari and Bukar Ali IDP camps.

Education

Through the Back to School campaign in Yobe and Borno, a total of 170,432 children (85,634 girls and 94,798 boys) previously out of school have now been enrolled – the results for Adamawa are still being compiled. The large enrolment of children mainly at primary 1 level surpasses the reported 150,000 out of school children for the 3 North East states targeted. The Back to School campaign included the involvement of key stakeholders in the education, information and communication sectors, use of traditional and community-based structures, radio jingles, community announcers and community engagement at all levels. Monitoring of school attendance is on-going to ensure that newly enrolled children attend school. Trained school monitors from the Quality Assurance Department of State Universal Basic Education Board (SUBEB) and Ministry of Education (MoE) in the three states will conduct regular monitoring visits to randomly selected schools. UNICEF staff on the ground in the three states are also actively engaged in school monitoring.

An additional 80 tents (72msq) with capacity to accommodate 8,000 children have been delivered to MoEs and SUBEBs in Adamawa (20), Borno (20) and Yobe (40) to support the increased number of children expected to attend school as the result of the Back to School campaign.

Health

UNICEF is supporting the State Ministry of Health and the State Primary Health Care Development Agency (SPHCDA) to provide integrated primary health care (PHC) services to IDP camps and host communities in Borno, Yobe and Adamawa states.

To date in Borno, a total of 271,480 IDPs (52,379 men, 91,204 women and 127,897 children) have benefitted from various PHC services offered through the 20 IDP camp clinics and outreach clinics in 65 host communities. Immunization activities in the camps reached 46,726 children aged between 6 months to 15 years with measles vaccines; 34,644 children aged between 14 weeks to 5 years were immunized with Inactivated Polio Vaccine (IPV); 61,467 children under 5 years with Oral Polio Vaccine (OPV); 46,255 children aged between 6 months to 5 years received Vitamin A; and 42,350 children aged between 6 months to 5 years received deworming tablets. Antenatal Care (ANC) services were provided by skilled attendants reaching 8,246 pregnant women and 947 deliveries performed in the camps. Long lasting mosquito nets have been distributed to the camps reaching 25,150 mothers and children under five years of age. UNICEF, with support from USAID, is planning a distribution of 300,000 LLINs together with an intensive sensitization campaign. The translations of IEC materials into the local languages are currently being finalized.

An outbreak of measles was reported in Gubio camps among the newly arrived IDP returns from Yola. A total of 123 cases were reported with 12 deaths and a case fatality rate (CFR) of 9.7%. A majority of the cases (70%) had never been immunized with measles vaccine (zero dose) and a mass measles campaign was conducted reaching a total of 3,340 children 6 months to 15 years.

UNICEF continues to support the state in improving referral services by covering the cost of fuel for 6 ambulances deployed to the IDP camps, the provision of incentives to drivers and the supply of essential drugs and supplies to the 3 designated referral hospitals in the state. To date, 618 patients with various medical conditions have been transported by the ambulances to designated referral centres.

In Yobe, integrated PHC services provided to two permanent camps and 40 selected host communities through clinics and outreach services has so far benefitted 138,685 people (28,977, men, 32,903 women and 76,805 children). Measles immunization has reached 37,591 children between the ages of 6 months to 15 years; 15,235 children aged between 14 weeks to 5 years were immunized with Inactivated Polio Vaccine (IPV); 35,191 children under five years with Oral Polio Vaccine (OPV); 31,076 children aged between 6 months to 5 years received Vitamin A; and 30,457 children aged between 6 months to 5 years received deworming tablets. Long lasting mosquito nets have been distributed to the camps reaching 6,780 mothers and children under 5 years of age.

In Adamawa, UNICEF supports the provisions integrated PHC services to five IDP camps and 1 transit camp as well as 226 host communities. To date, 59,410 people (12,071 men, 17,731 women and 29,608 children) have benefitted from these services. In the last month, 1,532 children aged between 6 to 59 months were supplemented with Vitamin A and 9,431 children dewormed. In the last month, ANC services were provided to 4,336 women of which 292 received tetanus toxoid vaccination and 104 women delivered by skilled birth attendants. A total of 1,392 long lasting mosquito nets were distributed, bringing the total of nets distributed to 6,984.

Child Protection

The programme is currently delivering psychosocial support in 147 communities and 22 IDP camps through 474 trained community volunteers. From January to September, 56,737 children (26,003 girls; 30,734 boys) were reached representing 107% of the annual target of 53,000 children. Of the children reached, 29,517 (52%) have been supported in their communities of Damaturu and Potiskum in Yobe; Biu, Hawul, Bayo, Kwaya Kusar, as well as in host communities in Maiduguri in Borno; and in Fofure, Sangare, Hong, Gireri and Mubi South in Adamawa.

The Unaccompanied and Separated Children (UASC) programme targets both formal camps and local government areas (LGAs). An additional 231 unaccompanied and separated children (UASC) have been identified (112 girls; and 119 boys) – 74 and 157 children in Adamawa and Borno respectively. To date, 1,392 UASC have been identified in the two states, of which 657 children are in supervised alternative care. Fifty-six children (31 girls; 24 boys) have also been referred to specialist services, for a total of 91 children referred to date.

In Adamawa, members of the Community Based Child Protection Committee have been able to support 150 children through mediation with families and referral of cases of parent/child relationship problems as well as children engaging in commercial sexual activities. In Borno, 289 foster parents were trained (226 females; 63 males).

The rapid assessment of the situation and needs, as well as the risks, of children born out of sexual violence is underway in Borno State. The assessment is being conducted in collaboration with International Alert and IOM. The findings of the assessment will inform the development of programmes that ensures support and safety for this highly vulnerable group. A perceptions assessment of children associated with armed groups is expected to begin in November.

The third quarter Global Horizontal Note covering July to September 2015 was submitted to the Specialist Representative to the Secretary General on Children and Armed Conflict, documenting the six grave violations of children’s rights, as per Security Council Resolution 1612.

Nutrition

In September, UNICEF and partners treated 8,447 children for Severe Acute Malnutrition (SAM) in Adamawa, Borno and Yobe states. Since the beginning of the year, a total of 51,860 children were treated for SAM. This is 68% of the annual target of 75,859 children for the 3 North East states. Of the children discharged during the reporting period, a total of 32,139 (89%) were reported as cured, 6,081 (15%) defaulted from the program and 566 (1%) died. The performance indicator of the program remains within the SPHERE standards expect for defaulter rate which is slightly above the target of <15%. This is mainly due to dynamic population movement in the area particularly among IDPs.

Compared to the same period last year, 9,760 more children were treated this year (figure 1). This is mainly due to expansion in the CMAM program, both in IDP camps and host communities. There are 278 CMAM sites established across the 3 states, including 20 sites in IDP camps.

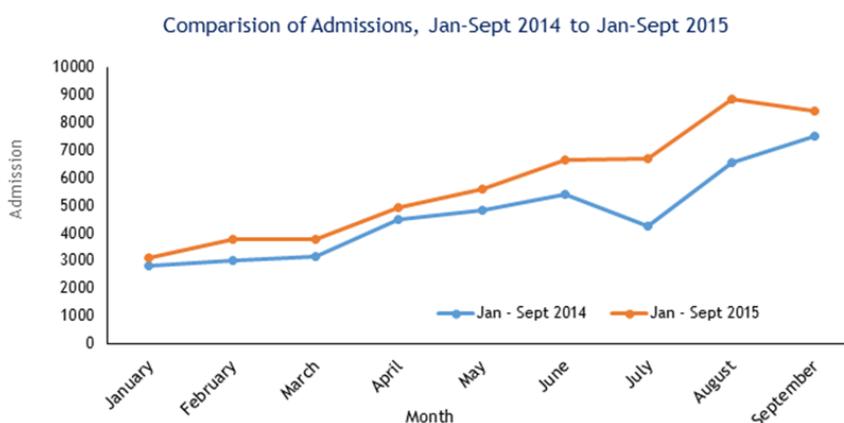


Figure 1: Comparison of trends in admission, Jan to Sept 2014 to Jan to Sept 2015

During the reporting period, 214,917 children were screened with MUAC in IDP camps and host communities. This is 62% of the annual target of 347,501 children with 75,707 children were screened in September. The sharp increase arose from the expansion of routine screening in IDP camps and host communities. Systematic screening is conducted at IDP camps once every week. The proportion of children found with severe acute malnutrition among screened children in IDP camps is 3.2%, which is similar to the overall estimates in the host community. A survey conducted in September 2015, which is a representative of 11 LGAs in Borno and 15 LGAs in Yobe shows that 3.2% and 2.9% children in Borno and Yobe states respectively are affected with SAM.

A total of 34,646 pregnant and lactating women received counselling on Infant and Young Child Feeding (IYCF), of which 12,269 were counselled in IDP camps.

UNICEF is continuing the distribution of multiple micronutrient powders in IDP camps and host community. A total of 4,822 children 6-23 months received Multiple Micronutrient Powder (MNP) during the reporting period. MNP is provided to improve the complementary food that the child consumes at household level. Distribution of MNP is also integrated with the host community food distribution implemented by FAO and other partners to increase the nutritional value of complementary foods to children 6 to 24 months. Training for community volunteers is on-going especially for IYCF services and screening activities in both the IDP camps setting and in host communities. The major programming gap is adequately trained community human resources for support of IYCF and community sensitization on nutrition and related programs.

HIV and AIDS

In October, HIV counselling and testing was conducted for 209 IDPs in 4 camps in Adamawa state; and includes 101 adults (63 male and 38 female) 75 adolescents (28 male and 47 female) 24 children (14 male and 10 female) and 9 pregnant women. One positive individual was referred and enrolled for treatment in Yola Specialist Hospital.

From January to October, 6,477 IDPs have accessed HIV Counselling and Testing (HCT) services in IDP camps in Adamawa state. A total of 483 pregnant women were screened with 29 women referred for Antiretroviral Treatment (ART) and 13 positive pregnant women referred for PMTCT services.

Media and External Communication

UNICEF Nigeria assisted a BBC television mission to Maiduguri, reporting a story about children affected by the conflict and malnutrition. Following ongoing releases by the Nigerian military of children and women who had been held by Boko Haram, UNICEF Nigeria has conducted interviews with UN Radio and with Radio France International. UNICEF issued a joint press release and held a joint press conference with General Electric to announce their US\$1 million donation to UNICEF to support displaced children in Borno State. Through social media channels, UNICEF has also highlighted the situation of children and women affected by the conflict as well as the need for education, especially of girls, and efforts to get children into schools in areas affected by the insurgency.

Funding

As of 31 October 2015, UNICEF has received around \$14.8 million against the \$26.5 million in the 2015 HAC requirements. Details are provided in the below table.

UNICEF NIGERIA CO FUNDING REQUIREMENT					
Sector	Total 2015 Requirements (HAC)	Funding required for assistance conflict-affected population (180 day plans)	Funding available (HAC)	Funding Gap (2015)	
				USD	% Unfunded
Nutrition	6,100,000	2,275,924	7,504,495	-1,404,495	123%
Health	4,000,000	4,126,098	2,179,440	1,820,560	46%
WASH	3,900,000	4,959,515	2,353,600	1,546,400	40%
Child Protection	3,810,000	3,644,743	1,844,077	1,965,923	52%
Education	7,500,000	3,901,942	886,291	6,613,709	88%
Sector Coordination	1,200,000	209,857	-	-	100%
Total	26,510,000	19,118,079	14,767,903	11,742,097	44%

Next SitRep: 01/12/2015

Who to contact for further information:

Jean Gough
Representative,
UNICEF Nigeria
Tel: +234 803 402 0870
Email: jgough@unicef.org

Samuel Momanyi Nyambati
Deputy Representative
UNICEF Nigeria
Tel: +234 803 535 0009
Email: smomanyi@unicef.org

Dominic Stolarow
Emergency Manager
UNICEF Nigeria
Tel: +234 803 403 5235
Email: dstolarow@unicef.org