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 nearly 1.1 million children.

• In Maiduguri in Borno state, the Cholera Treatment Centre (CTC) was closed at the end of November, after the treatment and discharge of all remaining patients. There have been no reported new cases of cholera in IDP camps and surrounding communities as of the 1st December.

• A total of 1,678 UASC have so far been identified, of which 719 children (242 boys, 490 girls) are living with trained foster parents. An additional 151 community volunteers have been trained on psychosocial support, increasing the number of trained community volunteers delivering psychosocial support to children in the child friendly spaces to 625.

• On the 23rd November, 15 secondary schools were reopened. This marks a resumption of schooling at secondary level after more than a two-year suspension. Children from 19 additional schools located in high-risk areas are also attending the reopened schools.

• A total of 62,685 children under five with severe acute malnutrition (SAM) were admitted to therapeutic feeding programme between January and October in IDP camps and health facilities in host communities in Adamawa, Borno and Yobe states.

• Twenty ECHO funded boreholes drilled in partnership with RUWASA in 3 host communities in Jere LGA in Borno state, were installed with hand pumps and accessed by 12,607 IDP and host community members (3,376 men, 3,509 women, 3,021 boys and 3,607 girls).

• As of 30 November 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 December 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 Liddawi wal-Jihad (JAS), 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 states.

Programme accessibility to the 3 North East states remains a challenge due to the current unpredictable security environment. Large areas of Borno and Yobe state and to a lesser extent Adamawa state have been assessed as inaccessible to humanitarian activities as the military conduct large scale counter-insurgency operations. The nature of the conflict has changed from large coordinated attacks by insurgent elements on major urban centres to attacks by smaller groups against isolated settlements and areas with little security presence. Disparate insurgent groupings remain active in Borno, Yobe and northern Adamawa states, although officially the insurgents no longer control any Local Government Areas (LGAs).

In Maiduguri in Borno state, the Cholera Treatment Centre (CTC) was closed at the end of November, after the treatment and discharge of all remaining patients. There have been no reported new cases of cholera in IDP camps and surrounding communities as of the 1st December. Community sensitization and hygiene promotion as well as active surveillance continue and have been intensified to prevent further cholera outbreaks. There have been a total of 1,039 cases with 18 death since the first reported case on 7th September. The cumulative case fatality rate (CFR) has significantly reduce from 6.4% at the beginning of the outbreak to 1.7% as of 1st December.

As a result of efforts made by the Borno state High Powered Committee (HPC) and high level advocacy by UNICEF, the promise made by the Governor of Borno state during a visit by the Norwegian Ambassador to reopen secondary schools has been realized. On the 23rd November, 15 secondary schools were reopened. This marks a resumption of schooling at secondary level after more than a two-year suspension. Children from 19 additional schools located in high-risk areas are also attending the reopened schools. In some cases, 3-4 schools from the high risk areas have been merged with a single reopened school.

In follow-up to the new enrolments recorded in October, monitoring of attendance is ongoing in Borno and Yobe states. Challenges faced by schools in Borno state include the punctuality of teachers, the availability of learning spaces to accommodate children and prevent overcrowding as well as the availability of education supplies to support learning. In order to track out of school children (OOSC) in IDP camps and host communities, a profiling exercise has been undertaken in four LGAs (MMC, Jere, Konduga and Biu).

At Pompomari camp in Yobe state, attendance in class has waned for a number reasons, including the preparation of breakfast at home, the relocation of families out of camps, the loss of interest in education by parents and the preference of older children to engage in economic activity. In Damare School, which meets the education needs of IDP children located in NYSC camp in Adamawa state, attendance and punctuality have been affected by the late preparation of communal meals in the camp. There is a need to advocate for the regular and predictable preparation of camp meals to help prevent the disruption of school attendance.

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 Sub Working Group is operating at national level and in Borno state. Child protection is a standing item on the PSWG agenda in Adamawa and Yobe. The Child Protection sector has finalised its sector
objectives, activities, indicators and monitoring framework for the 2016 Humanitarian Response Plan, which now also includes mine risk education to girls and boys in four North East states (includes Gombe state). The 5Ws sector monitoring and reporting tool will be adjusted to reflect the indicators of the Child Protection sector response plan, with technical assistance from the newly arrived Child Protection Information Management Officer.

The Borno State Coordination Committee of the Safe Schools Initiative have been engaged with the High Powered Committee (HPC) on the re-opening of secondary schools. UNICEF’s Borno state Field Office coordinated a meeting with the HPC and humanitarian partners to discuss fast tracking the process of re-opening schools. A Coordinator and Information Management Officer (IMO) was provided by the Global Education Cluster to support the Education Sector in the development of the 2016 HRP. New tools have also been introduced to better facilitate information gathering and sharing within the Education in Emergency Working Group (EiEWG).

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 2016 HNO and HRP.

UNICEF is working in the 3 North East states 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 continues to provide co-leadership role for WASH sector coordination at the national and sub-national 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, Borno, and Yobe states meet bi-weekly with sector partners, including international and national NGOs, SEMA, and field offices of national water and sanitation authorities. Efforts are being made to make the Yobe WASH sector Emergency Working Group meet more regularly. UNICEF in collaboration with Federal Ministry of Water Resources (WASH sector lead) coordinated the partners’ development of the 2016 HRP.
## Summary Analysis of Programme Response

<table>
<thead>
<tr>
<th>Sector</th>
<th>Sector Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2015 Target</td>
<td>Total</td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td>Results</td>
</tr>
<tr>
<td># of conflict affected people including IDPs and host communities provided with access to safe water per agreed standards</td>
<td>462,504</td>
<td>265,941</td>
</tr>
<tr>
<td># of conflict affected people benefitting from improved sanitation1</td>
<td>136,762</td>
<td>221,749</td>
</tr>
<tr>
<td># of conflict affected persons benefitting from hygiene promotion messages</td>
<td>655,000</td>
<td>536,150</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Displaced children access education in a protective and safe learning environment</td>
<td>452,620</td>
<td>79,372</td>
</tr>
<tr>
<td># Conflict affected school aged children reached with pedagogic materials</td>
<td>905,240</td>
<td>102,810</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of conflict affected pregnant women and children under 5yrs that have received LITNs</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td># of conflict affected people reached with emergency PHC services</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Children &lt;5 screened using MUAC</td>
<td>434,376</td>
<td>264,328</td>
</tr>
<tr>
<td># Children &lt;5 with SAM admitted to therapeutic feeding programmes</td>
<td>75,859</td>
<td>62,685</td>
</tr>
<tr>
<td>% Children &lt;5 with SAM who recovered under treatment</td>
<td>&gt;75%</td>
<td>82%</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of conflict affected children reached with psychosocial support</td>
<td>92,400</td>
<td>76,068</td>
</tr>
<tr>
<td># of conflict affected children referred to specialist support services where required</td>
<td>3,050</td>
<td>284</td>
</tr>
<tr>
<td># of unaccompanied and separated children identified</td>
<td>3,500</td>
<td>3,401</td>
</tr>
<tr>
<td># Separated and unaccompanied IDP children reunified with families or placed in alternative care arrangements6</td>
<td>2,292</td>
<td>662</td>
</tr>
</tbody>
</table>

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1 Includes general environmental sanitation, solid waste disposal, disinfection, etc.
2 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). Targets stated are presently proposed for discussion.
3 Not all sectors partners have provided update for the reporting period- this is partial data for this reporting period.
4 Not all sector partners have provided update for the reporting period- this is partial data for this reporting period.
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.
In Adamawa state, UNICEF continues to support the Rural Water Supply and Sanitation Agency (RUWASA) to monitor the functionality of WASH services in IDPs camps. In Fufore camp, 40 SanPlat latrines and 40 showers have been constructed and now accessed by 1,620 IDPs. Also in this camp, 601 IDPs have benefited from the distribution of hygiene kits. In Malkohi camp, 2 hand pumps were rehabilitated to restore full access to water supply.

In Yobe state, 1,200 IDP households in Kukareta camp and host community benefitted from the distribution of purification tablets for the treatment of their water.

In Borno state, 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 and RUWASA provided 2,500 IDPs that recently arrived in Bakassi camp with access to safe drinking water through the construction of one solar powered borehole scheme. UNICEF in collaboration with Borno State Environmental Protection Agency (BOSEPA) continues to remove and dispose solid waste, disinfect toilets, fumigate for vector control and conduct general environmental sanitation in 14 IDPs camps to the benefit of 112,359 IDPs.

BOSEPA and RUWASA with UNICEF support have completed about 80% of sand filling at NYSC IDPs camp to mitigate flooding incidence and prevent outbreaks of WASH related diseases. In Dalori, Teachers Village and CAN Centre camps, 3,650 IDPs also benefited from improved access to safe sanitation facilities through de-sludging of 73 latrine pits.

Sustained chlorination of drinking water have benefitted 47,014 IDPs (12,675 men, 13,829 women, 9,731 boys and 10,779 girls) in 7 IDP camps (Goni, Kachalleri, NYSC, Government Girls College, CAN Centre, Women Teachers College, and Sanda Kyarimi). School children (1,441 in total – 1,341 boys and 1,435 girls) received information on key hygiene messages including dangers on cholera at Bakassi, NYSC and Women Teachers College IDPs camps. At Gubio Road and Bakassi camps, 2,279 IDPs (678 men and 809 women) received information on key hygiene messages.

Twenty ECHO funded boreholes drilled in partnership with RUWASA in 3 host communities (Juddumri, Alakaramti, mammanti and Molei Shuwari) in Jere LGA, were installed with handpumps and accessed by 12,607 IDP and host community members (3,376 men, 3,509 women, 3,021 boys and 3,607 girls), 1,200 households hosting IDPs benefitted from the provision of safe sanitation facilities in 5 communities (Ajajari, Juddumri, Molei Shuwari, Umarari and Galtimari). In Galtimari, 351 households (351 men, 351 women and 595 children) benefitted from the distribution of 351 sets of hygiene kits with ECHO visibility materials.
**Education**

Monitoring of school attendance for the newly enrolled learners is ongoing in Borno and Yobe states. In Adamawa state, the recent change in leadership at the Ministry of Education has affected the implementation rate of SSI. The new Honourable Commissioner for Education is gradually being oriented on SSI and the support it requires. A new plan to fast track stepdown activities associated with the enrolment drive to the LGA level has been developed and is planned to start on the 7th December.

In Borno and Yobe states, where challenges related to encouraging sustained school attendance have been identified, efforts are ongoing to address these issues. In Borno state, for example, the Director of School Services (SUBEB) and the Executive Secretary Bama Local Government Education Authorities (LGEA) have been engaged to monitor teacher attendance and punctuality.

Temporary learning spaces (TLS) are being assembled by SUBEB, using tents provided by UNICEF. At Dalori and Bakassi camps, 10 tents each have been provided and are currently benefiting 1,000 pupils (583 boys and 417 girls) and 1,000 pupils (528 boys and 472 girls), respectively. Other camps benefitting from distributed tents, include Gubio Road (10), Teachers Village (5) and Farm Centre (5). In 3 IDP camps (Dalori, Bakassi and Biu), 175 teachers have been trained in basic pedagogy and methodology and classroom PSS.

As a result of the mapping exercise of out of school children (OOSC) conducted in 14 camps in Borno state, 26,297 OOSC (13,498 boys and 12,717 girls) have had their education needs identified. In a similar exercise carried out in host communities where an estimated 92% of IDPs reside, an additional 43,266 IDP OOSC (23,299 boys and 20,057 girls) in 4 LGAs (MMC, Jere, Konduga and Biu) have also had their educational needs identified. The data gathered has been used by education authorities to inform the allocation of learners to appropriate classes.

Damaturu and Potiskum LGAs in Yobe state have received 14 tents (7 each), 16 blackboards (8 each), 10 School-in-a-box kits (5 each). School bags with school supplies including exercise books, pencil, blue pens, sharpeners, erasers, rulers and colour pencils have also been received in Damaturu (1,750) and Potiskum (1,550).

**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 state, a total of 321,495 IDPs (58,443 men, 110,763 women and 152,289 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 50,735 children aged between 6 months to 15 years with measles vaccines; 37,195 children aged between 14 weeks to 5 years were immunized with Inactivated Polio Vaccine (IPV); 69,220 children under 5 years with Oral Polio Vaccine (OPV); 49,658 children aged between 6 months to 5 years received Vitamin A; and 44,692 children aged between 6 months to 5 years received deworming tablets. Antenatal Care (ANC) services were provided by skilled attendants reaching 11,137 pregnant women and 1,326 deliveries performed in the camps. Long lasting mosquito nets have been distributed to the camps reaching 25,400 mothers and children under five years of age.

The outbreak of measles in the Gubio camp has been controlled with only 5 cases reported in the reporting period with no deaths. Since the beginning of the outbreak, a total of 128 cases were reported with 12 deaths and case fatality rate (CFR) of 9.3%. All children aged between 6 months to 15 years have been immunized. To prevent further outbreak, immunization will continue for newly arrived IDP children.

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, 894 patients with various medical conditions have been transported by the ambulances to designated referral centres.
The provision of Integrated PHC services has commenced in Kukareta IDP camp, located in Yobe state. The number of dedicated outreach teams has been increased from 12 to 15 to increase access to services in 40 host communities with large IDP populations, spread across 15 LGAs. To date, a 169,861 people (36,912 men, 39,783 women and 93,166 children) have benefitted from Integrated PHC services. Measles immunization has reached 39,071 children between the ages of 6 months to 15 years; 16,183 children aged between 14 weeks to 5 years were immunized with Inactivated Polio Vaccine (IPV); 40,215 children under five years with Oral Polio Vaccine (OPV); 34,752 children aged between 6 months to 5 years received Vitamin A; and 34,270 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 of Integrated PHC services to five IDP camps and 1 transit camp as well as 226 host communities. To date, 68,318 people (14,571 men, 20,656 women and 33,091 children) have benefitted from these services. In the last month, 1,620 children aged between 6 to 59 months were supplemented with Vitamin A and 5,941 children dewormed. Also in the month, ANC services were provided to 424 women of which 223 received tetanus toxoid vaccination and 64 women delivered by skilled birth attendants. A total of 572 long lasting mosquito nets were distributed, bringing the total of nets distributed to 7,556. Within the reporting month, a measles outbreak was recorded in Fufure IDP camp, one of the five camps in the state. Three cases were recorded and over 198 eligible children were immediately vaccinated for measles.

Child Protection

An additional 151 community volunteers have been trained on psychosocial support, increasing the number of trained community volunteers delivering psychosocial support to children in the child friendly spaces from 474 to 625. From January to October, 59,651 children (32,255 boys and 27,396 girls) were reached representing 113% of the annual target of 53,000 children. Of the children reached, 29,940 (50%) have been supported in communities of Damaturu and Potiskum in Yobe state; Biu, Hawul, Bayo, Kwaya Kusar as well as in host communities in Maiduguri in Borno state; and Fufure, Sangare, Hong, Girei and Mubi South in Adamawa state.

The Unaccompanied and Separated Children (UASC) programme targets both the formal camps and local government areas (LGAs). In Adamawa, Fufure, Girei, Yola North and Yola South LGAs are being reached. An additional 265 UASC have been identified, bringing the total number of UASC so far identified to 1,678, of which 719 children are in supervised alternative care with trained foster parents.

UNICEF in partnership with International Alert conducted a rapid assessment on the status of women/girls associated with JAS and children born out of sexual violence in North East Nigeria to inform programming and policy making. The research was designed and carried out in collaboration with the Borno State Ministry of Women Affairs and Social Development and IOM. The research focused on perception of community towards children born out of sexual violence and their mothers as a result of the conflict in the North East, the impact of this perception on accessing services and reintegration, and the risks to returning women/girls and their children. The findings will be shared with stakeholders in early December at an Experts’ Workshop.

In order to strengthen the Monitoring and Reporting Mechanism (MRM) on the grave violations of children’s rights, UNICEF facilitated establishment Working Groups on Children and Armed Conflict in Borno and Adamawa states. The Yobe State Working Group will be established in December. Further, UNICEF identified three local CBOs in Adamawa and Borno states to strengthen community-based networks for MRM, focusing on hard to reach LGAs.

Two research projects on children associated with armed groups will begin in January with the Nigeria Stability and Reconciliation Programme – one focusing on children associated with the Civilian Joint Task Force and vigilante groups and the other focusing on children associated with JAS. The assessments will enable UNICEF to design appropriate community-based reintegration and peacebuilding programs for affected children.
Nutrition

Since the beginning of the year, a total of 62,685 children were admitted to the community-based management of acute malnutrition (CMAM) program in both IDP camps and host communities in Adamawa, Borno and Yobe states. This is 82% of the annual target of 75,859 for the 3 target states. In October, UNICEF and partners have admitted 10,477 children with SAM to the CMAM programme. A total of 46,521 children were discharged from the program during the reporting period. Of the children discharged, 38,295 (82.3%) were cured, 6,857 (14.7%) defaulted from the program and 678 (1.5%) died. Nine new CMAM sites were established in Borno state, and 60 health workers and 148 community volunteers were trained to support the program.

A total of 238,328 children were screened with the use of MUAC in IDP camps. This is 69% of the annual target of 347,501 children. 7,247 children were identified with severe acute malnutrition (SAM) and 7,091 were admitted to the program (98%), while the remaining 2% did not receive the service. This could be due to dynamic movement of IDPs in the area.

During the reporting period, a total of 41,678 pregnant and lactating women received counselling on infant and young child feeding (IYCF). Thirty-nine IYCF support groups were formed and training provided to 156 support group members. Additionally, 39 health workers were trained on IYCF in Emergencies (IYCF-E) in Borno state in order to provide the required support needed for pregnant and lactating women.

The distribution of multiple micronutrient powders (MNP) in IDP camp and host community is continuing. Overall, 6,585 children 6-23 months have received MNP. The distribution of MNP was scaled-up to an additional 11 camps and rolled out in 9 health facilities. A total of 35 health workers were trained to provide the service.

Media and External Communication

UNICEF, Procter & Gamble Nigeria and USAID issued a joint press release and held a joint press conference to announce in-kind donations of hygiene and sanitary supplies and batteries to UNICEF to support displaced communities in Borno state. This resulted in high levels of media coverage within Nigeria. UNICEF’s November 10 video about a midwife working with IDPs in Borno state reached more than 50,000 people through social media channels.

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.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Total 2015 Requirements (HAC)</th>
<th>Funding required for assistance conflict-affected population (180 day plans)</th>
<th>Funding available (HAC)</th>
<th>Funding Gap (2015)</th>
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<tr>
<td></td>
<td>USD</td>
<td>% Unfunded</td>
<td>USD</td>
<td>% Unfunded</td>
</tr>
<tr>
<td>Nutrition</td>
<td>6,100,000</td>
<td>2,275,924</td>
<td>7,504,495</td>
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<tr>
<td>Health</td>
<td>4,000,000</td>
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<td>WASH</td>
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<td>Child Protection</td>
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<td>Education</td>
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<td>Sector Coordination</td>
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<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>26,510,000</td>
<td>19,118,079</td>
<td>14,767,903</td>
<td>11,946,592</td>
</tr>
</tbody>
</table>

Next SitRep: 01 January 2016

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