Highlights

- As of 30th September, the reported number of suspected cholera cases has decreased to less than 50 per day due to the ongoing response from UNICEF and other partners. The cumulative number of cholera cases stands at 4,294, with 59 deaths (CFR = 1.4%).
- In 2017, a total of 3.3 million medical consultations have taken place in the primary health centres in camps and host communities, including 206,193 conducted during this reporting period.
- Counselling on infant and young child feeding (IYCF) reached 324,956 mothers/caretakers in Adamawa, Borno and Yobe since the beginning of 2017, with 109,540 reached during this reporting period.
- Access to safe water was provided to 59,700 people during this reporting period in Borno, Yobe and Adamawa States.
- UNICEF provided critical child protection services to almost 139,000 boys and girls severely affected by the armed conflict since the beginning of 2017, with 11,318 reached during the reporting period.

UNICEF and Partners Response

<table>
<thead>
<tr>
<th>UNICEF</th>
<th>Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNICEF Target</td>
<td>Cumulative results</td>
</tr>
<tr>
<td># of conflict affected people provided with access to safe water per agreed standard</td>
<td>1,028,000</td>
</tr>
<tr>
<td># Children &lt;5 with SAM admitted to therapeutic feeding programmes</td>
<td>220,190</td>
</tr>
<tr>
<td># of conflict affected people reached with emergency primary health care (PHC) services</td>
<td>3,919,357</td>
</tr>
<tr>
<td># of conflict affected children reached with psychosocial support (PSS)</td>
<td>375,000</td>
</tr>
<tr>
<td># of conflict affected children accessing education in a protective and safe learning environment</td>
<td>1,260,000</td>
</tr>
</tbody>
</table>

16-30 September 2017

8.5 million
Projected number of people in need of humanitarian assistance in the north east states of Borno, Adamawa and Yobe for 2017 (Humanitarian Response Plan, 2017)

1.62 million
IDPs in Borno, Adamawa and Yobe states, over 56 per cent are children (DTM Round XVIII, August 2017)

4.4 million
Children in need of humanitarian assistance (HAC 2017)

UNICEF Appeal 2017
US$ 146.9 million
2017 FUNDS AVAILABLE

2016 Carry forward: US$ 31.5 M
Funding gap: US$ 53.3 M
Funds received: US$ 62.0 M
Situation Overview & Humanitarian Needs

The IOM DTM Round XVIII (August 2017) estimates that a total of 1.62 million people are still internally displaced across the three northeast states of Adamawa, Borno and Yobe, of whom 85 per cent are in Borno alone. This represents a decrease of about 4 per cent as compared to Round XVII (June 2017). Children represent 56% percent of the total IDP population.

Population movement within the LGAs continues with the IOM DTM ETT reporting 3,706 new arrivals registered in 14 LGAs in Borno and 4 LGAs in Adamawa (ETT Report: No. 33, 34). The population movement has been attributed to poor living conditions, improved security, and influxes from villages to towns due to continuing military actions and attacks by Boko Haram, the priority needs of refugee returnees and the IDPs remain shelter, health and nutrition services, provision of food and access to sanitation.

As of 30th September, the cumulative number of suspected cholera cases reported stands at 4,294, with 59 deaths (CFR = 1.4%): 2,097 cases in the Muna corridor (Jere LGA); 700 cases in Dikwa; 1457 cases in Monguno; 34 cases in MMC and 6 in Mafa. Out of the 133 samples taken, 111 (83%) were RDT positive and 99 (74%) were culture positive. However, since 23rd October, total number of suspected cases reported continued to decrease and are now less than 50 per day. Sixteen suspected cholera cases were reported at the CBN quarters in MMC and are currently being investigated.

In Yobe and Borno, schools reopened on 11 September with schools in Adamawa due to open on 3 October. Overall, 57% (774) of public schools remain closed in the inaccessible areas of Borno while in Yobe 3% (31) of schools are closed in Gujba and Gulani LGAs close to the border with Borno. During the reporting period 15 schools in cholera affected areas postponed reopening by one week to ensure all have a minimum level of WASH facilities in place (chlorinated water, handwashing stations with soap and sanitary latrines) ahead of their re-opening on 19 September. In Ngala IDP Camp Primary school, 13 out of the 14 TLSs constructed based on the old design were destroyed by heavy storms; in addition, 5 out of 15 TLS in Pulka Alpha IDP camp school were damaged by heavy winds during the school vacation while the remaining 10 are currently being occupied by the refugee returnees from Cameroon.

Humanitarian leadership and coordination

UNICEF co-leads with the Government the WASH, nutrition and education sectors as well as the child protection subsector; it is also an active member of the health sector. Regular information sharing takes place with the Emergency Operations Centre (EOC) in Abuja and in Maiduguri, alongside other UN agencies and line ministries. UNICEF continues to strengthen coordination, increase operational capacity at the field level, expand NGO partnerships, engage community-level social mobilizers and strengthen existing UNICEF programming systems to reach the most vulnerable.

To strengthen the education sector coordination 2 IMOs have been recruited and they are currently supporting the ongoing HNO/HRP development and will support the forthcoming Joint Education Needs Assessment (JENA). The Education sector, with support from UNICEF, established a Strategic Advisory Group (SAG) to facilitate timely and effective decision making outside the wider coordination meetings.

As a final step for the Global Case Management Task Force mission, the CPSWG with support from UNICEF conducted a three day “Inter-Agency Child Protection Information Management System (CPIMS) Workshop” in Maiduguri, attended by 15 NGOs and officials from the line Ministries of Women Affairs and Social Development at Federal level in Abuja as well as in the three Northeast states of Borno, Adamawa and Yobe. The main outcomes from the workshop include: the definition of programmatic priorities; the development of an action plan and the creation of a Case Management Task Force in each State.

Humanitarian strategy

UNICEF continues to scale up delivery and quality of the humanitarian response to affected populations in Borno, Yobe and Adamawa states in coordination with the Government, other United Nations agencies, and non-governmental organizations (NGOs). UNICEF is targeting the most vulnerable populations distinguishing service provision between IDPs and the host communities; in locations where both are present they have equal access to the services supported by UNICEF.

For a more effective scale up modality, UNICEF has diversified and strengthened its partnerships. Alongside Government, UNICEF has increased partnerships with reliable NGO partners and now has 33 programme agreements: Nutrition 15; Education 3; WASH 5; Health 3; Child Protection 6; and C4D 1. In conjunction with the diversification of partners, UNICEF is also strongly promoting outreach and mobile strategies in nutrition to ensure greater accessibility to nutrition services for populations that live far from the fixed sites to increase admissions. UNICEF has supported SPHCDA to set up 35 outreach sites in Borno (MMC 21; Jere 9; Mafa 3 and Konduga 2) and 26 in Yobe (Barde 3; Karasuwa 3; Jakusko 4; Nguru
To improve the quality of the response UNICEF is increasingly integrating its approach, especially amongst Health/Nutrition/WASH and where possible multi-sector programme agreements have been developed with NGOs. This has included increased community mobilization to ensure that the software components of the programmes receive increased attention through WASHCOMs for the operation and maintenance of water points, community mobilization to clean latrines and demand creation for health/nutrition services. The integration of WASH facilities into schools is another critical component of this approach along with integrating Child Protection activities into the school environment, especially training for teachers on PSS for use in the classroom.

The Rapid Response Mechanism is being strengthened to enhance the humanitarian community’s capacity to respond in a timely, coordinated and predictable manner to the needs of populations made vulnerable by displacement, disease and/or natural disasters in the northeast of Nigeria. The aim is that within 48 hours of receiving and verifying alerts on affected populations, the RRM is activated to rapidly assess needs and deliver a minimum package of life-saving support through pre-designated partners with prepositioned stocks. The mechanism forms the initial emergency first line response, which is then quickly followed-up by sector-specific responses that are coordinated through the Inter-Sector Working Group led by OCHA.

Programme monitoring has been strengthened with the implementation of a two-pronged strategy for field monitoring: a) programme implementation monitoring by the programme sections; and b) complementary monitoring of response quality, gaps and emerging issues conducted by independent field monitors in collaboration with the affected populations.

Summary analysis of programme response

Health: A total of 206,193 medical consultations were made in UNICEF supported health facilities providing integrated primary health care (PHC) services in both camps and host communities in Adamawa, Borno and Yobe during this reporting period. A total of 82,293 curative medical consultations took place, with malaria being the most common condition treated (malaria 31,795; acute respiratory infection 14,196; acute watery diarrhea 8,995; measles 140 and other medical conditions 27,202). In Yobe, 140 mosquito nets remaining from USAID’s donation in kind were distributed to 70 families (2 per family). In addition, 7 pregnant women in Adamawa State each received a mosquito net through the ANC clinics.

A total of 120,419 preventive medical consultations were made immunizing 74,532 children and pregnant women with various antigens (including measles immunization for 4,812 children aged 6 months - 15 years); the provision of vitamin A supplementation to 13,075 children and the provision of deworming tablets to 15,060 children. A total of 12,940 pregnant women were reached with ante-natal care (ANC); 1,749 safe deliveries were carried out and post-natal care was provided to 1,732 women during this reporting period.

In Madagali, Adamawa, UNICEF is supporting 7 Community Oriented Resource Persons (CORPS) in Gulak ward and 10 CORPS in Bebel ward who provide outreach health services to communities whose health facilities (in Bakin, Dutse and Bengo) were destroyed by Boko Haram. The outreach service provides diagnosis and simple treatment of malaria, diarrhoea, pneumonia and screening for malnutrition.

Nutrition: During the reporting period 12,861 children with severe acute malnutrition (SAM) were admitted for treatment in 392 UNICEF supported outpatient therapeutic programme (OTP) sites in the three northeast states. Overall, the performance indicators for the community management of acute malnutrition are within Sphere standards (88.0 per cent cure rate, 9.0 per cent defaulter rate, 2.2 per cent non-respondent and 0.8 per cent death rate). The 7 UNICEF supported in-patient facilities admitted 80 SAM cases with medical complications during the reporting period, of which 39 were stabilized and transferred to OTPs.

In 27 LGAs (19 in Borno and 8 in Yobe) a total of 875,651 children 6-59 months were screened for malnutrition out of which 11,458 (1.31 per cent) were identified with SAM and 58,541 (6.69 percent) with MAM. All children identified with SAM were referred to CMAM treatment facilities.

Preventive nutrition activities reached 8,569 children 6–23 months with micronutrient powders (MNP) and 109,540 mothers/caretakers were reached with counselling on infant and young child feeding (IYCF) in Adamawa, Borno and Yobe.

WASH: A total of 274,251 people living in Cholera affected and at-risk areas benefitted from camp cleaning/ garbage collection and cleaning and sanitation of 6,290 latrines in 32 camps in Ngala, Monguno, Mafa, Dikwa, Jere, Maiduguri and Konduga. This is a recurrent activity that covers 63% of the IDPs living in camps within predefined critical cholera hotspots. UNICEF plans are underway to expand this service to more camps and reach 74% of the IDP population.
UNICEF’s support to urban water systems through blanket chlorination continues reaching an estimated 4.3 million people living in Borno, Adamawa and Yobe states. This precautionary measure was initiated at the outset of the rainy season as a preventive measure against cholera and other water-borne diseases.

As part of UNICEF’s Cholera response strategy in Borno, UNICEF, in partnership with CIDAR, continued to provide safe water to 300,000 people in Jere and MMC through the chlorination of 660 community water points. UNICEF, in collaboration with CIDAR, NEWSAN and RUWASSA, continues to ensure the sustainability of water systems through effective operation and maintenance (including chlorination) reaching 35,600 IDPs: 18,200 IDPs in Muna Garage El Badawe; 9,150 IDPs in Custom House 1 and 2 and 8,357 IDPs in El Miskin Center. Furthermore, UNICEF, in collaboration with CIDAR ensured bucket chlorination of the 80m³ water being trucked daily by Malteser to 5,000 people living in Muna Garage, Custom House and Custom House 2.

During the reporting period in Borno and Yobe, UNICEF supported RUWASSA and DRC to rehabilitate 4 large solar boreholes and construct 66 hand pump boreholes reaching 59,700 people in Borno: Maisandari (17,200), Bolori (8,600) and Gwange (8,600); Banki (5,000); Dikwa: Agric (500) and Sangaya (500) IDP Camps; Adamawa: Maiha (6,200); Hong (6,300); Gombi (5,600) and Yola South (1,200).

UNICEF supported RUWASSA to construct 40 emergency latrines in Muna Garage El Badawe IDP camp providing access to sanitation facilities to 2,000 IDPs. In Bama, 350 latrines were desludged reaching 17,500 people. Desludging is required at a frequency of every 2 months.

Campaigns on Cholera prevention and key hygiene WASH messages were carried out in Borno reaching 58,000 IDPs: Banki (43,000); Arabic Camp (2,000) and Sangaya (13,000). To complement the hygiene promotion, UNICEF provided 4,257 WASH kits containing Jerry Cans, Soaps, Sanitary pads and Aquatabs to 25,542 people (4,257 HHs) in Custom House (957); Custom House 2 (542); Muna Garage IDP Camp (2,258) and El-Miskin Center (500). UNICEF also provided 600 people (100 HHs) in Hulere community in Yola North with WASH NFIs containing Jerry cans, Buckets, Cups, Kettles and Laundry soap.

**Child Protection:** During the period under review, critical child protection services reached 11,212 children (52% girls) and 106 women, bringing the total beneficiaries reached since the beginning of the year to 138,989. The period recorded an 8 per cent increase due to commencement of psychosocial support activities by CHAD in Mobbar and Mafa LGAs in Borno state. Two hundred and forty-five unaccompanied and separated children (152 boys and 93 girls) were identified and are being supported through case management. In addition, 176 children and women (39 boys, 79 girls and 58 women) formerly associated with armed groups and survivors of Boko Haram conflict related sexual violence benefited from socio-economic reintegration assistance.

A total of 10,764 children adolescents (52% girls) received psychosocial support services through child friendly spaces/adolescent clubs and life skills activities in partnership with the State Ministries of Women Affairs and Social Development (MWASD) in Borno and Adamawa and Ministry of Youth, Sports and Culture and NEYIF in Yobe state. In partnership with CHAD, 303 unaccompanied and separated children (168 boys and 135 girls) and 121 other at risk children (65 boys and 56 girls) in Konduga, Monguno, Maiduguri, Jere and Ako were supported through case management, which included family reunification as well as placing some of the children in alternative care arrangements.

In Borno state, 145 children (35 boys and 110 girls) formerly associated with armed groups and 106 women survivors of conflict related sexual violence and other children at risk of recruitment and other forms of violence received socio-economic reintegration services through UNICEF’s partnership with EYN and International Alert in Maiduguri MMC, Damboa, Monguno and Askira Uba. The services provided included: provision of education materials and enrolment into schools; enrolment into skills training activities such as cap making; tailoring; soap making; welding; production of cosmetics; butchery; carpentry and sweater weaving.

During this reporting period, UNICEF implementing partners, WINN and EYN reached a total of 1,670 community members (645 men, 662 women, 171 boys and 192 girls) through community awareness sessions on how to better protect children with a particular focus on prevention of recruitment and use of children by armed groups in Bama, Dikwa, Bayo, Damboa Monguno and Askira Uba LGAs.

UNICEF supported the MWASD to conduct a Training of Trainers (TOT) for 45 master trainers (26 males, 19 female) drawn from UNICEF’s implementing partners on the use of the adolescent expression kit, a life skills based resource for addressing the risks that adolescents may face during conflict situations. In addition, 3 step-down trainings, drawing the participation of 61 community volunteers from across the CFS in Maiduguri and Jere has so far been completed, enabling the roll out of the adolescent expression kit to 14 locations covered by the programme.
**Education:** SUBEB leads the enrolment campaign in all three states at the beginning of the school year with support from UNICEF. Awareness raising and community level engagement activities have been conducted in all three states leading up to the official launch of the enrolment drive campaign, which the Government is due to initiate very soon in Yobe and Borno. The enrolment drive campaign has targeted communities around all open schools in Borno (585 public schools and 25 IDP camps), Yobe (1,029 public schools) and Adamawa (781 public schools). Awareness raising messages have been broadcast across all three states through radio and television. School Based Management Committees have conducted meetings with traditional and religious leaders on the importance of education, especially for girls, so they will motivate parents during religious and traditional gatherings such as at Friday prayers, naming ceremonies, to enrol their children into school.

Data on school enrollment is still being compiled as it only began in mid September and will be included in future SitReps as the data from SUBEB becomes available. To date, schools are reporting anecdotally high enrollment which is a positive indication of education being a priority both for state government and for parents.

During the enrolment campaign, UNICEF is supporting 750,000 children to access quality learning and motivate regular school attendance, including through the distribution of 500,000 school bags to students. During the reporting period, in Borno Teachers’ Village IDP camp, UNICEF distributed 2,000 school bags and repaired 3 damaged prefabricated classrooms earlier provided by PCNI creating learning spaces for 150 children.

Teachers’ attendance has significantly improved with SUBEB monitoring the IDP camp schools in MMC and Jere.

**Communication for Development (C4D):** In response to the Cholera outbreak, Communication for Development (C4D) along with other Sectors, partners and government agencies, scaled up the mass media and inter-personal communication campaign for preventing the spread of Cholera and sharing information on how to care for affected people.

During the reporting period, the social mobilization campaign expanded from covering the most cholera affected camps of Muna Garage and CTC Dala camps to nine most at-risk camps and ultimately to 28 High Risk camps in Dikwa, Jere, Konduga, MMC and Monguno LGAs. Plans are ongoing to cover Bama, Damasak and Mobbar LGAs by mid-October. The social mobilization activities are based on the results of risk assessments to address gaps in information and knowledge as well as counter rumours and misconceptions. More efforts are also being put in place to convert knowledge into practice in Muna Corridor because of the continuing number of cases being reported in the area. The selection of the camps to target was informed by the epidemiological analysis from the Emergency Operating Center (EOC).

**Funding**

In 2017, UNICEF is requesting US$ 146.9 million to reach more than four million people, including 2.1 million children. Funds available amount to US$ 93.5 million including US$ 31.5 million carry-over funds from 2016, representing a 36 per cent funding gap. This main sectors that are underfunded are Health (70 per cent) and Child Protection (60 per cent).

*Funds available includes funding received against current appeal as well as carry-forward from the previous year.*

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### Annex A: Summary Analysis of Programme Response against 2017 HAC targets

<table>
<thead>
<tr>
<th>Sector</th>
<th>Sector Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sector target</td>
<td>Sector total results</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care for specified period of time</td>
<td>314,557</td>
<td>187,229</td>
</tr>
<tr>
<td>Proportion of children 6-59 months with severe acute malnutrition recovered</td>
<td>&gt;75%</td>
<td>84.4%</td>
</tr>
<tr>
<td>Number of caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding</td>
<td>731,332</td>
<td>740,587</td>
</tr>
<tr>
<td>Number of children 6-23 months in the affected areas receiving multiple micronutrient powder</td>
<td>561,078</td>
<td>415,764</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children 6 months - 15 years vaccinated against measles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with emergency primary health care services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of families reached with LLITNs</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people provided with access to safe water per agreed standards</td>
<td>1,977,987</td>
<td>1,422,387*</td>
</tr>
<tr>
<td>Number of people with access to improved sanitation facilities</td>
<td>418,000</td>
<td>595,534*</td>
</tr>
<tr>
<td>Number of people reached through hygiene promotion campaigns/ received WASH hygiene kits</td>
<td>1,114,238</td>
<td>761,334*</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children reached with psychosocial support (including through CFS and child clubs)</td>
<td>650,000</td>
<td>236,717</td>
</tr>
<tr>
<td>Number of children and women associated with armed groups/victims of SGBV(^1) supported with reintegration services</td>
<td>5500</td>
<td>3,696</td>
</tr>
<tr>
<td>Number of unaccompanied and separated children supported (case managed, including those supported in alternative care arrangements)</td>
<td>12,000</td>
<td>7,794</td>
</tr>
<tr>
<td>Number of children reached with Mine Risk Education</td>
<td>104000</td>
<td>82,545</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of school-aged children including adolescents reached by schools/temporary facilities in safe learning environment</td>
<td>1,600,000</td>
<td>429,086</td>
</tr>
<tr>
<td>Number of school-aged children reached with learning materials</td>
<td>1,600,000</td>
<td>100,406</td>
</tr>
</tbody>
</table>

\(^1\) Including victims of forced marriage and sexual violence and children born out of sexual violence.

* Due to the delay in consolidating sharing WASH Sector partner figures, current figures show WASH sector results as of 31 July 2017 plus UNICEF results as of 30 September 2017