Highlights

- From 25 April to 15 May, IOM Emergency Tracking Tool (ETT) has reported arrival of over 2,700 new IDPs in Bama, around a thousand in Gwoza and over a thousand in Monguno, Kala Balge and Chibok.
- The IOM Emergency Tracking Tool (ETT) (9-15 May) reported the arrival of an estimated 2,411 new IDPs in Banki, over 1,600 new IDPs in Gwoza and over 2,000 IDPs left Gwoza, Chibok and Banki for Maiduguri.
- A mass malnutrition screening campaign in MMC reached 175,699 children with a total of 1,912 children identified with SAM, of which 418 were already in the program and the remaining 1,494 SAM children were referred for treatment.
- A total of 38,212 children under 5 with severe acute malnutrition (SAM) have been admitted into the therapeutic feeding program, of which, 4,349 children admitted during current reporting period.
- UNICEF along with the government and other health sector partners assessed the suspected case of Hepatitis E reported in Damasak, Mobbar LGA, which tested negative.
- A total of 1.65 million consultations have been made in the Primary Health Centers (PHC) facilities in camps and host communities in 2017, of which 190,204 were reached during this reporting period.
- UNICEF psychosocial support has reached to over 38,000 children in need with 3,890 reached during this reporting.
- UNICEF supported the State Universal Basic Education Board (SUBEB) to reach 25,000 children through the distribution of school bags.

UNICEF and Partners Response

<table>
<thead>
<tr>
<th>UNICEF Target</th>
<th>Cumulative results</th>
<th>Sector Target</th>
<th>Cumulative results</th>
</tr>
</thead>
<tbody>
<tr>
<td># of conflict affected people provided with access to safe water per agreed standard</td>
<td>1,028,000</td>
<td>95,772</td>
<td>1,977,987</td>
</tr>
<tr>
<td># Children &lt;5 with SAM admitted to therapeutic feeding programmes</td>
<td>220,190</td>
<td>38,212</td>
<td>314,557</td>
</tr>
<tr>
<td># of conflict affected people reached with emergency primary health care (PHC) services</td>
<td>3,919,357</td>
<td>1,654,085</td>
<td></td>
</tr>
<tr>
<td># of conflict affected children reached with psychosocial support (PSS)</td>
<td>375,000</td>
<td>38,402</td>
<td>650,000</td>
</tr>
<tr>
<td># of conflict affected children accessing education in a protective and safe learning environment</td>
<td>1,260,000</td>
<td>420,470</td>
<td>1,600,000</td>
</tr>
</tbody>
</table>

01-15 May 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)

1.69 million
IDPs in Borno, Adamawa and Yobe states, over 56 per cent are children (DTM Round XV, March 2017)

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

UNICEF Appeal 2017
US$ 146.9 million
*Humanitarian Action for Children (HAC), does not include inaccessible areas of Borno
Situation Overview & Humanitarian Needs

IOM DTM Round XV (March 2017) estimates, a total of 1.69 million people are still internally displaced across the three northeastern states of Adamawa, Borno and Yobe, of which 84 per cent are in Borno alone. Children represent 56 per cent of the total IDP population and nine per cent are infants under a year old. The number of identified returnees increased from 1.1 million during Round XIV to 1.15 million people1. Adamawa had the highest number of returnees at 655,122, followed by Borno at 451,972 and Yobe at 44,333. Food remains the greatest unmet priority need cited by 69 per cent of IDPs surveyed in sites, followed by non-food items at 16 per cent.

The IOM Emergency Tracking Tool (ETT) (9-15 May) reported the arrival of an estimated 2,411 new IDPs in Banki who came from Cameroon. Gwoza received over 1,600 people able to flee Boko Haram during counter insurgency activities carried out by the Nigerian Army and over 2,000 IDPs left Gwoza, Chibok and Banki for Maiduguri.

These new arrivals have significantly increased the pressure on the existing WASH infrastructure. The government has decided to close down some IDP camps (to date NYSC and Damare camp in Adamawa) resulting in some IDPs moving to other camps and some IDPs returning to their communities looking for farmland. With the merger of the Damare camp population with Malkohi camp in addition to the Nigerian refugees returning from Cameroon and Niger to Malkohi and Fufore IDP camps, the education and WASH infrastructure is reaching its limits. In Borno, there are significant increases in WASH needs, between 16 to 95 per cent, being reported in Kala Balge (95 per cent), Mobbar (91 per cent), Ngala (80 per cent), Chibok (78 per cent), N’ganzi (66 per cent), Magumeri 60 per cent), Dikwa (28 per cent), Monguno (22 per cent), Mafa (18 per cent) and Gwoza (16 per cent). UNICEF is expanding partnerships with NGO partners to meet immediate response needs.

The current population in Pulka, Gowza LGA, is around 38,000 people. To decongest Banki IDP camp, plans are underway to relocate 15,000 IDPs from Banki to Pulka which will put existing water infrastructure under severe stress. Discussions are underway with the authorities and WASH sector partners to immediately connect the new settlements to existing water sources and identify additional water sources to be able to cope with the influx of people. UNICEF is expanding its partnerships with NGOs to be able to respond to future population movements.

A storm in Maiduguri, on May 6, caused significant damage in 27 IDP camps, destroying around 362 shelters and partially damaging around 831 shelters, 26 latrines blocks and 114 education facilities (108 in Borno and 6 in Yobe). With the onset of the rainy season a flood vulnerability mapping was carried out in the IDP camps in Borno and an estimated 59 IDP camps (out of 164) are at risk of flooding, potentially affecting 70,5862 households (328,000 persons), including 66,000 children under five. The shelter and camp coordination sector is working on drainage issues in camps and UNICEF is prepositioning dewatering pumps to sites with high risk of water-logging.

UNICEF along with the government and other health sector partners assessed the suspected case of Hepatitis E reported in Damasak, Mobbar LGA, among Nigerian returnees from the Niger Republic. The outbreak in Difa, Niger, started in January 2017 and to date 165 cases have been reported with 25 mortalities. Of the 165 reported cases in Difa, 40 Nigerians are suspected of being infected. A surveillance team comprising of the government health staff, UNICEF, WHO

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1. IOM DTM Nigeria Round XV Report, March 2017
2. CCCM-DTM sector, April 2017
and other health partners have put in place an active surveillance system, and the one suspected case in Nigeria tested negative. The government-led task force with key health sector partners are developing a preparedness plan with UNICEF focusing on improving WASH services in the affected areas and social mobilization, specifically working on a community sensitization programme and the production of communication materials. A new case of meningitis has been reported in Yola, Adamawa during this reporting period and UNICEF has provided medicines to the health department for treatment.

Humanitarian leadership and coordination

UNICEF co-leads with the Government the WASH, nutrition and education sectors as well as the child protection sub-sector; 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.

Based on the assessment carried out in Dikwa by UNICEF and MSF France indicating the need to meet the Sphere standards in the camps, the WASH sector is targeting the completion of eight solar powered and three hand pump boreholes along with 190 latrines and distribution of 3,000 hygiene kits to the affected people by end of May 2017.

Humanitarian strategy

In 2017, UNICEF is scaling up delivery of an integrated package of humanitarian interventions to affected populations in Borno, Yobe and Adamawa states, through a combination of static and mobile responses in IDP camps, host communities and newly liberated areas. This work is being done in coordination with the Government, other United Nations agencies, and non-governmental organizations (NGOs). The package includes nutrition services such as SAM treatment, promotion of infant and young child feeding (IYCF) and provision of micronutrient supplementation through community outreach, support to health facilities of immunization and maternal, new-born and child. Combined with health week campaigns, while also improving primary health care service outreach and in WASH, rehabilitation and construction of safe water access points and sanitation facilities along with hygiene promotion, including in health facilities, schools and child-friendly spaces. Child protection activities include psychosocial support for children (including in safe spaces and schools), services for unaccompanied and separated children and reintegration support for children and women associated with Boko Haram. Education activities include establishment of temporary learning spaces, additional classrooms, support to teachers, and distribution of learning materials for students.

UNICEF is also scaling up and improving the outreach and quality of response by encouraging partners to move towards mobile outreach interventions integrating health and nutrition responses to increase coverage. UNICEF is diversifying and strengthening its partnerships to increasingly work with reliable NGO partners to target both IDPs in host communities (including the host community populations) and IDPs living in newly accessible areas. Additional investment is being made in supporting NGO programme costs and strengthening their operational capacity to scale up and improve quality and timeliness of the response.

Summary analysis of programme response

Health: A total of 190,204 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 the reporting period. A total of 78,418 curative medical consultations took place, with malaria being the most common condition treated (malaria 21,616, acute respiratory infection 11,918, acute watery diarrhoea 8,395, measles 281 and other medical conditions 36,208). Preventive health care actions enabled 72,465 children and pregnant women to be immunized with various antigens (including measles vaccination for 2,060 children aged 6 month-15 years), the provision of vitamin A supplementation to 15,291 children and deworming tablets provided to 17,410 children. A total of 4,185 pregnant women were reached with ante-natal care (ANC), 1,342 safe deliveries were carried out and post-natal care provided to 1,093 women in this reporting period.

UNICEF supported the Borno State Primary Health Care Development Agency (SPHCDA) to train 123 health workers and outreach team members, working in the newly accessible areas, on emergency PHC services and Integrated Management of Childhood Illnesses (IMCI), including the treatment of meningitis. To support the scaling up of health interventions in Borno, UNICEF provided MDM with 15 Nigeria Health Kits (which will meet health needs of 7,500 people for three months), 300,000 sachets of oral rehydration salts (ORS) and 50,000 micronutrient tablets for pregnant women to support their 4 IDP camp clinics in Maiduguri and Damboa. UNICEF also provided 20,000 safe delivery kits to health facilities in Borno and during this reporting period 1,200 kits were distributed and used by women to safely deliver their babies.
**Nutrition:** A total of 38,212 children with severe acute malnutrition (SAM) aged 6-59 months have been admitted into the therapeutic feeding program, of which, 4,349 children were admitted during the reporting period. A 2-day training covering screening, referral, data collection and reporting procedures was provided to 970 people (451 screeners, 451 data collection officers, 45 supervisors and 23 field officers). Subsequently, they supported an eight-day (2nd to 10th May) mass screening in MMC reaching 175,699 children (6-59 months) who were screened for malnutrition. A total of 1,912 children were identified with SAM, of which 418 (21.9 per cent) were already in the program while the remaining 1,494 (78.1 per cent) SAM children were referred to community-based management of acute malnutrition (CMAM) sites for treatment.

A total of 105,870 children aged 6-23 months (38 per cent UNICEF 2017 target) have been reached with micronutrient powder (MNP). In the reporting period, 43,092 children 6-23 months, who were not receiving supplementary food were reached with MNP and IYCF messages were provided to caregivers of all children under two years during the mass nutrition screening in MMC-Jere.

**WASH:** A total of 7,857 people were reached with improved water sources through the rehabilitation of three broken hand pump boreholes in Adamawa state. The daily trucking of 53,000 litres of water reached 7,857 people in Damboa (1,767) and Pulka (6,090). In Mashamari, Jere LGA, 100 emergency latrines were constructed reaching 5,000 IDPs. WASH kits were distributed to 30,291 people in Borno, Yobe and Adamawa and an additional 9,197 people were also reached with house to house and group hygiene promotion (both in camps and IDP host communities) in the three states.

To improve the quality of WASH services, UNICEF is supporting partners to reduce the waiting time at water points through the extension of existing water supply systems, installation of additional water storage tanks and in camps with large populations a generator will added to complement the solar powered water system.

To respond to the increasing needs in the WASH sector due to new arrivals, UNICEF has entered into standby partnerships with ACF, Solidarites International, DRC and Oxfam.

**Child Protection:** UNICEF and its implementing partners provided basic life skills and recreation-based psychosocial support (PSS) to 3,890 children in Borno. Through UNICEF support, the Borno state Ministry of Women’s Affairs and Social Development (MWASD) and NGO partners CHAD, Plan International and COOPI registered 458 unaccompanied and separated children (UA/SC) (203 boys and 255 girls) and 542 children at risk (203 boys and 339 girls) and provided support for family reunification where possible and placed the others in alternative care.

UNICEF and its implementing partner EYN provided reintegration support to 358 children (177 girls and 181 boys) and 64 women associated with armed groups in Bama, Maiduguri and Monguno. The numbers include 268 children (135 girls and 133 boys) and 64 women released from administrative custody on 10 April 2017 in Maiduguri. Immediate reintegration assistance was provided to these children, which includes family reunification, the provision of clothes, beddings, shoes and water containers as well as referrals to psycho-social support services and educational support in temporary learning spaces.

UNICEF, in collaboration with Plan International and GOGOGJI, conducted community entry/advocacy visits and established seven community-based child protection committees in Gwoza, Borno. The community-based child protection committees monitor child protection needs within the community and then draw upon their resources to respond to the children and families affected. UNICEF’s partner WINN conducted a sensitisation meeting on child protection in Angwan Gabar community in Briyel ward, Bayo LGA, to increase the capacity of parents and other caregivers to better protect and care for children affected by armed conflict, reaching 186 people (126 men and 60 women). UNICEF co-facilitated a training for focal points of UN/INGOs on prevention of sexual exploitation and abuse (PSEA) in line with the action plan to ensure that focal points are well-trained and knowledgeable on PSEA issues.

UNICEF, in collaboration with the Borno MWASD conducted focus group discussions (FGDs) with 25 women and 20 girls in Bakassi IDP camp and Madinatu host communities to engage them and promote their participation in peace-building, including assisting reintegration of conflict-affected girls and women to their communities. The FGDs were conducted as part of the pre-conference activities for the Women, Peace and Security Conference, which is being organized in June 2017 by UNICEF in collaboration with the Federal MWASD, UN Women and Embassy of Norway. A discussion paper has been drafted in preparation of the conference. Similarly, a one-day dialogue and workshop was conducted by UNICEF and the Borno MWASD with 50 religious and traditional leaders and it was agreed to continue with the engagement with the religious and traditional leaders.

**Education:** During this reporting period UNICEF supported the State Universal Basic Education Board (SUBEB) to reach 25,000 children (50 per cent girls) through the distribution of school bags: 10,000 in Pulka, 10,000 in Rann and 5,000 in Damask. Seventy new temporary learning spaces (TLS) were established (50 TLS in Pulka and 20 TLS in Damask) reaching over 3,500 children (1,530 girls and 1,970 boys). To improve the quality of teaching a total of 350 teachers in Borno (115 female and 235 male) from 18 host community schools were trained on child-centred pedagogy.
Following the storm in Maiduguri, on 6 May, 114 facilities were identified as being damaged. The repairs of 40 damaged TLS in 7 IDP camps in MMC/Jere and 6 damaged TLS in Yobe are on-going and will be completed within two weeks. The remaining structures will be repaired by the first week of June. A three day workshop to review the current education strategy, delivery modalities and explore options and alternative ways to scale up education response concluded on 13th May and a revised strategy is being developed.

**Communication for Development (C4D):** A total of 1,032 new-borns in three states in northeast Nigeria received OPV zero dose and routine immunization as a result of tracking by Volunteer Community Mobilisers (VCMs). In response to the current meningitis outbreak, UNICEF held sensitization meetings with religious, community and traditional leaders, education sector stakeholders as well as LGA Chairmen and Officials in the three affected states to support the mobilization of communities to be vaccinated against meningitis. An improvement in the turnout at the vaccination centres was observed after these meetings which can be partly attributed to efforts of these leaders in mobilizing their communities following the UNICEF sensitization meetings.

In response to the Lassa fever outbreak, UNICEF conducted social mobilization and preventive campaigns in 12 affected states. Communication materials were developed and radio jingles were aired on 16 local FM radio stations. In addition, communities were mobilized through local structures such as religious institutions, town announcers and through VCM networks for other interpersonal communication approaches to sensitize them. The spread of disease has now been significantly curbed with no new infections reported after the preventive campaign.

UNICEF supported an education stakeholders’ advocacy and communication materials development workshop in Maiduguri to lobby religious, traditional and community leaders in order to obtain their commitment to support initiatives aimed at encouraging school enrolment. As a follow up to this, pre-tested communication material is being developed and will be further disseminated in the Borno state.

**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 be US$ 57.88 million including US$ 31.55 million carry-over funds from 2016, representing a 61 per cent funding gap. Child Protection is critically underfunded at 79 per cent along with health at 81 per cent and WASH at 66 per cent. The funding gap is also having a negative impact on the implementation of integrated programmes, especially health and WASH, which are essential to address the underlying causes of malnutrition.

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*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 target</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>57,082</td>
</tr>
<tr>
<td>Proportion of children 6-59 months with severe acute malnutrition recovered</td>
<td>&gt;75%</td>
<td>83.4%</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>96,791</td>
</tr>
<tr>
<td>Number of children 6-23 months in the affected areas receiving multiple micronutrient powder</td>
<td>561,078</td>
<td>105,870</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>1,763,711</td>
<td>4,147,161</td>
</tr>
<tr>
<td>Number of people reached with emergency primary health care services</td>
<td>3,919,357</td>
<td>1,654,085</td>
</tr>
<tr>
<td>Number of families reached with LLITNs</td>
<td>653,226</td>
<td>572</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>763,860</td>
</tr>
<tr>
<td>Number of people with access to improved sanitation facilities</td>
<td>418,000</td>
<td>214,710</td>
</tr>
<tr>
<td>Number of people reached through hygiene promotion Campaigns/ received WASH hygiene kits</td>
<td>1,114,238</td>
<td>427,776</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>101,034</td>
</tr>
<tr>
<td>Number of children and women associated with armed groups/victims of SGBV supported with reintegration services</td>
<td>5,500</td>
<td>1,051</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>3,9946</td>
</tr>
<tr>
<td>Number of children reached with Mine Risk Education</td>
<td>104,000</td>
<td>52,217</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>420,820</td>
</tr>
<tr>
<td>Number of school-aged children reached with learning materials</td>
<td>1,600,000</td>
<td>71,824</td>
</tr>
</tbody>
</table>

1 UNICEF provides RUTF to all the nutrition sector partners in the three northeast states. Current results have been adjusted (from this report onwards) to reflect UNICEF results from the CMAM facilities where UNICEF’s support goes beyond the provision of RUTF

4 This indicator reflects the number of consultations made.

5 Including victims of forced marriage and sexual violence and children born out of sexual violence.

6 Corrigendum: Numbers in previous report had error in it, a correction has been made in this result table.