North-East Nigeria Contingency Plan

Humanitarian Country Team

The Rainy Season and Military Operations
Responding to the Most Urgent Needs
June to September 2018

This document was compiled on behalf of the Humanitarian Country Team in Nigeria during April and May 2018.

The Ongoing Humanitarian Crisis in North-east Nigeria
The humanitarian crisis in north-east Nigeria remains severe: 7.7 million people are in need of humanitarian assistance in Borno, Adamawa and Yobe, the three most affected states. 6.1 people are being targeted for life-saving humanitarian assistance, and the Humanitarian Response Plan for 2018 appeals for $1.05 billion.

The crisis is a protection crisis, first and foremost, with civilians bearing the brunt of the crisis with widespread displacement, abuse and violations of international humanitarian and human rights law. Today, 1.8 million people are displaced in the three states. With the latest military offensive displacement is on the rise. About 130,000 people have arrived to locations in Borno State – having left their home or previous location - since November 2017, largely as a result of the insecurity and military operations. This includes displaced who are coming from areas that are ‘inaccessible’ to international aid organisations. Many are fleeing hostilities between the Nigerian armed forces and non-state armed groups and arriving in local government area headquarters towns as well as in areas where humanitarian assistance is being provided.

Severe Humanitarian Needs as a result of the Military Operations
A dramatic rise in displacement has been witnessed since last November 2017 largely due to the ongoing military operations, with over 130,000 new arrivals since that time, and a further 115,000 people are expected to arrive. Prior to November last year, the average numbers of arrivals were about 1,400 people a week. Since November the weekly average has risen to 3,500 a week. Many new arrivals, come with nothing and in poor condition with health problems and numerous cases of malnutrition.

➤ The humanitarian community is seeking $42.8 million to respond to the life-saving needs of 115,000.

Severe Humanitarian Needs as a result of the Rainy Season
With respect to the annual rainy season planning, some 536,000 people are expected to be affected by extreme weather between June and September. Each year, impassable roads impede and delay distribution of relief items, requiring better prepositioning of supplies. Camps for internally displaced people can be flooded, damaging shelters, educational and health facilities. Hygiene and sanitation become challenging and there is a high risk of contamination of water, adding to the risk of water-borne diseases.

➤ To address these time critical urgent needs we are calling for $33.6 million to prepare and respond to 463,000 people in Priority 1 locations that are estimated to be most impacted during the rainy season.

Key Ask

US$76.4 million is required to serve over 578,000 people who are at high risk of displacement due to extended military operations and whose vulnerabilities are expected to be exacerbated by the rainy season, in Borno, Adamawa and Yobe States.

1 IOM Displacement Tracking Matrix, June 2018
2 Funding for some sector activities is already allocated or in the pipeline.
3 Includes people in Priority 1 locations potentially impacted by extreme weather and estimated people displaced due to extended military operations.
1. Humanitarian Situation and Caseload

1.1 Extended military operations

- There are an estimated 115,000 people from hard-to-reach areas who are at risk of displacement in Borno State as a result of extended military operations through the rainy season.

Since military operations began in October 2017, the trend of new arrivals coming to accessible locations across Borno State has increased significantly, and at an alarming rate that has overwhelmed humanitarian capacity. From late November 2017 to June 2018, there has been an estimated 130,000 newly arrived individuals across Borno State for reasons including heightened insecurity and military operations, with a weekly average of 4,500 individuals who are largely coming to LGA Headquarters from areas considered hard to reach. Prior to November 2017, the weekly average of new arrivals was 1,400.

Displacement is likely to further increase from June to September, as a result of evolving conflict dynamics, including the unanticipated military operation ‘Last Hold’, as well as other various environmental/seasonal dynamics. ‘Last Hold’ is a joint military operation between the Multi-National Joint Task Force (MNJTF) and the Nigerian armed forces, and is slated to last for four months and coincides with the rainy season (June to September). Typically, military operations in north-east Nigeria largely cease during the rainy season, resulting in a deceleration of displacement. While the 2018 HRP takes into account the 930,000 individuals in hard-to-reach areas, this unanticipated military operation and subsequent large-scale movements of population over the rainy season were not expected and humanitarian partners require an injection of resources to prepare and respond adequately.

While it is difficult to anticipate the exact humanitarian needs resulting from new arrivals from hard-to-reach areas, the past months have shown that emergency health, food security, nutrition, shelter, NFIs, water, sanitation and hygiene (WASH) and protection assistance are frequently required upon arrival. These new arrivals are often fleeing conflict and insecurity and, as a result, some are in poor health conditions, including with gunshot wounds and other related injuries and illnesses. Many are forced to leave all their possessions behind as they flee, and have reported that their livelihoods have been destroyed. October 2017, UNICEF nutrition teams have attempted to improve their understanding of needs by disaggregating the data of new arrivals from those living in areas already receiving assistance. A preliminary analysis of middle upper arm circumference (MUAC) screening from 19,485 children in eight LGAs of Borno state suggests particularly high levels of malnutrition for children arriving in Dikwa and Ngala, with proxy SAM rates as high as 13 per cent and proxy GAM (global acute malnutrition) rates as high as 49 per cent. The nutrition situation of new arrivals in Pulka and Rann is also a concern.

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4 This data is currently being validated at a technical level by the Nutrition Sector
Further, while the lack of humanitarian access in hard-to-reach areas makes it challenging to provide any detailed assessment of humanitarian needs, proxy indicators suggest that the situation is precarious in these locations. UNICEF’s mid-upper arm circumference (MUAC) nutrition screenings on more than 4,000 newly arrived children in five locations in Borno State, found 6 per cent (264 children) to suffer from severe acute malnutrition (SAM), while 20 per cent (842 children) were found to suffer from moderate acute malnutrition (MAM). In comparison, malnutrition rates among the 370,000 children screened by the Nutrition sector in March 2018, stood at 1 per cent SAM and 9 per cent MAM.

Initial planning and discussions on the potential influxes have taken place with military leadership through the OCHA Civil-Military Coordination (CMCoord) Unit, with the ISWG and the OCHA Information Management Unit. Based on these conversations and the analysis of hard-to-reach population data, locations that will likely see high levels of displacement are Damasak (Mobbar LGA), Baga (Kukawa LGA), Monguno (Monguno LGA), Ngala/Gamboru (Ngala LGA), Rann (Kala/Balge LGA), Dikwa (Dikwa LGA), and Banki (Bama LGA). Large-scale displacement will also likely continue in Pulka and Gwoza (Gwoza LGA).

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5. MUAC screening provides only a proxy indicator on the nutritional situation, and does not constitute a scientific survey based on standard assessment methods.
6. Carried out between October 2017 and April 2018.
7. UNICEF’s rapid nutrition screening data is still undergoing review by the nutrition sector’s data validation sub-group, and is subject to change before official publication.
8. Displacement analysis was triangulated with estimated inaccessible population figures that were derived from a baseline population dataset available through the joint polio eradication programme by FMoH/WHO/UNICEF, known as the Vaccination Tracking System (VTS). The VTS triangulates satellite imagery to estimate trace-of-life and real-time population counts, including settlement lists from the Borno State Government. The estimates were derived...
1.2 Rainy Season Contingency Plan

- An estimated 536,000 people could potentially be impacted during the rainy season (June to September) in Borno, Adamawa and Yobe States.

Throughout the rainy season, people are often forced to move which exacerbates existing vulnerabilities. Roads become impassable thereby impeding humanitarian access and causing delays in relief distributions. There is higher food insecurity and malnutrition linked to these elements as well as market disruptions, damage of food supplies and loss of livelihoods. Despite efforts made in recent months to improve drainage, camps for internally displaced persons (IDPs) can be flooded and property, shelters, educational and health facilities can be severely damaged or destroyed. There is an increase in the risk of spread of water-borne diseases including cholera, malaria and hepatitis E, as well as an overall deterioration of the hygiene and sanitation situation and an increased risk of contamination of safe drinking water. Additionally, vulnerabilities further increase as individuals are forced to resort to negative coping mechanisms, freedom of movement is further restricted and protection-related risks increase.

In line with the seasonal planning outlined the 2018 Humanitarian Response Plan (HRP), the Operational Inter-Sector Working Group (OISWG) developed a Rainy Season Contingency Plan\(^9\) to ensure adequate and coordinated multi-sector preparedness and response. The multi-sector plan aims to define preparedness activities, including pre-positioning of cargo, and ensure that response activities are in line with the identified humanitarian risks caused by the rainy season. The plan derives analysis from flood mapping data, 2017 lessons learned, and the Displacement Management Systems (Camp Coordination and Camp Management, CCCM) and Shelter/Non-food Items (NFIs) sector’s modelling of flood-prone sites\(^10\). It prioritises the 536,000 individuals into three priority levels; Priority 1 includes an estimated 463,000 internally displaced and host community persons living in areas that are hard to reach by road during the rainy season and who experience other high-risk factors\(^11\). These locations include Rann, Ngala, Dikwa, Banki, Baga/Kukawa/Cross Kauwa and LGAs in Yobe State affected by the cholera outbreak. As the onset of the rainy season is just a few weeks away, humanitarian partners require an injection of resources to ensure preparedness activities.

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\(^9\) Sector-specific plans are available upon request and include: Logistics Sector Rainy Season Contingency Plan; Food Security Sector-Specific Rainy Season Plan; Joint Health/WASH Sector Cholera Response Plan for Yobe State; Joint Health/WASH Sector Cholera Preparedness Plan for Borno State; Health Sector Meningitis Response Plan; and the CCCM & Shelter Sector-Specific Rainy Season Contingency Plan.

\(^10\) Specifically: lessons learned from the 2017 in terms of access constraints as well as internally displaced persons (IDP) camps affected by storms or flash floods; modelling of flood-prone IDP sites done by the CCCM and Shelter/NFIs sector; and historical floods in Adamawa and Yobe based on NASA/NRT Global Flood Mapping (https://floodmap.modaps.eosdis.nasa.gov/Africa.php).

\(^11\) Additional factors were taken into consideration, including the cholera outbreak in Kukawa LGA in Borno and Bade, Yusufari, Bursari, Karasuwa LGAs in Yobe.
2. Sector preparedness and response activities and financial requirements

$42.8 million

is urgently needed to ensure sufficient preparedness and response activities and enable life-saving assistance for 115,000 IDPs who will likely move between June to September due to ongoing military operations.

$33.6 million

is required to ensure sufficient preparedness and response activities to enable humanitarian assistance to the 463,000 individuals in Priority 1 locations that are estimated to be most impacted during the rainy season.

Extended military operations

To ensure life-saving humanitarian assistance for the new arrivals, the OISWG developed a response plan to assess capacities and gaps for immediate life-saving assistance in key locations. This response plan falls under the 2018 HRP and is aligned with existing sector strategies and plans including the 2018 Rainy Season Contingency Plan, CCCM reception management strategies, as well as the CMCoord Guidance and Humanitarian Access Strategy.

To inform this response plan, a likely displacement scenario was developed as follows:

- An estimated 115,000 IDPs from hard-to-reach areas expected to move to the following key locations – Damasak (Mobbar LGA), Baga (Kukawa LGA), Monguno (Monguno LGA), Ngala/Gamboru (Ngala LGA), Rann (Kala/Balge LGA), Dikwa (Dikwa LGA), Banki (Bama LGA), and Pulka and Gwoza (Gwoza LGA).

The table below details core life-saving activities for various sectors and the financial requirements that urgently need to be allocated.

<table>
<thead>
<tr>
<th>Displacement Management Systems (CCCM)</th>
<th>Food Security</th>
</tr>
</thead>
<tbody>
<tr>
<td>$15.3 M</td>
<td>$9.2 M</td>
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<tr>
<td>ACTIVITIES</td>
<td>ACTIVITIES</td>
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<tr>
<td>• NFI stockpiling and distribution</td>
<td>• Immediate life-saving food assistance (through the most appropriate modalities – wet feeding, in-kind or cash/vouchers)</td>
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<tr>
<td>• Emergency shelter stockpiling and distribution</td>
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<tr>
<td>• Reception management</td>
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<table>
<thead>
<tr>
<th>Health</th>
<th>Nutrition</th>
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</thead>
<tbody>
<tr>
<td>$12.0 M</td>
<td>$1.4 M</td>
</tr>
<tr>
<td>ACTIVITIES</td>
<td>ACTIVITIES</td>
</tr>
<tr>
<td>• Health screenings upon arrival and primary health care</td>
<td>• Treatment of severe and moderate acute malnutrition (SAM and MAM)</td>
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<td>• Mobile health teams</td>
<td>• Infant and young child feeding information sessions for mothers</td>
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<tr>
<td>• Disease surveillance and immediate risk assessments in communities for the timely mitigation and response to outbreaks</td>
<td>• Blanket supplementary feeding programme</td>
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<td>• Vaccination/immunization campaigns</td>
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<thead>
<tr>
<th>Protection (including Gender-based Violence and Child Protection)</th>
<th>Water, Sanitation and Hygiene (WASH)</th>
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</thead>
<tbody>
<tr>
<td>$2.2 M</td>
<td>$2.7 M</td>
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<tr>
<td>ACTIVITIES</td>
<td>ACTIVITIES</td>
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<tr>
<td>• Registration and profiling</td>
<td>• Emergency water provision</td>
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<td>• Referral to specialized services</td>
<td>• Emergency sanitation interventions</td>
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<tr>
<td>• Material assistance including dignity kits</td>
<td>• Hygiene promotion campaigns</td>
</tr>
<tr>
<td>• Protection monitoring</td>
<td>• WASH NFIs for SAM cases</td>
</tr>
</tbody>
</table>

12 Funding for some sector activities is already allocated or in the pipeline.
13 For Pulka and Gwoza - Figure derived from ETT analysis and weekly average of new arrivals to Gwoza LGA from October 2017 – April 2018.
Responding to the most urgent needs, June to September 2018

Rainy season contingency plan

The sector summaries detailed in the multi-sector contingency plan emanate from sector-specific plans. A core set of preparedness and response activities have been identified to optimise the speed and volume of critical assistance immediately following the onset of a flood emergency in priority locations\(^{14}\). These activities focus on practical actions to improve inter-sector response, accountability and predictability. The table below details core activities per sector and the financial requirements for Priority 1 locations\(^{15}\).

<table>
<thead>
<tr>
<th>Sector / Contingency Plan</th>
<th>Financial Requirements</th>
<th>Activities</th>
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</table>
| Displacement Management Systems (CCCM) | $8.6 M | - Reinforcement and upgrade of identified vulnerable makeshift shelters and construction of new shelters  
- Identification and mapping safe areas in case of flooding, site preparation and backfilling |
| Early Recovery and Livelihoods | $0.5 M | - Facilitating debris and waste management activities to compliment drainage management  
- Facilitating activities to rehabilitate flood-damaged community basic infrastructure |
| Education | $1.7 M | - Prepositioning school materials  
- Mobilisation of school communities  
- Reinforcement of facilities to prevent damage |
| Food Security | $1.9 M | - Pre-positioning adequate food commodities  
- Immediate life-saving food assistance (through the most appropriate modalities – wet feeding, in-kind or cash/vouchers)  
- Emergency agriculture and livelihoods assistance |
| Health | $3.7 M | - Pre-positioning of adequate health supplies and kits  
- Immediate risk assessments in communities for the timely mitigation and response to outbreaks  
- Vaccination/immunization of children under the age of 5 for major vaccine preventable diseases |
| Logistics | N/A | - Establishment of common storage facilities for prepositioning in eight locations  
- Identification of alternative transport and movement options |
| Nutrition | $6.5 M | - Pre-positioning adequate therapeutic food commodities  
- Infant and young child feeding (IYCF) counselling sessions and hygiene promotion  
- Management of acute malnutrition for children aged 6-59 months  
- Blanket supplementary feeding programme (BSFP) for children and pregnant and lactating women  
- Mobile team identification, equipping and training to support outreach activities |
| Protection (including Gender-based Violence and Child Protection) | $8.9 M | - Case management services, including family tracing and reunification (FTR) services  
- Pre-positioning of material assistance, including dignity kits  
- Protection mainstreaming and monitoring for key sectors  
- Identification and referral of vulnerable individuals including PSS  
- Support with evacuation plan for persons displaced by flooding and awareness raising |
| Water, Sanitation and Hygiene (WASH) | $1.9 M | - Pre-positioning of adequate WASH supplies and kits  
- (Re-)establishing WASH facilities and services in high-risk areas prior to the onset of the rainy season |

\(^{14}\) It is important to note that not all sectors focused planning on only priority areas, but instead have made modifications to the plan in order to ensure that it aligns with their sector-specific response and contingency plans.  

\(^{15}\) Funding for some sector activities is already allocated or in the pipeline.