NIGERIA

REGIONAL REFUGEE RESPONSE PLAN

January- December 2016



Credits

UNHCR wishes to acknowledge the contributions of partners and all staff in the field and at Headquarters who have participated in the preparation of the narrative, financial and graphic components of this document.

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For more information on the Nigeria crisis go to: Nigeria Information Sharing Portal

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FOREWORD BY

THE REGIONAL REFUGEE COORDINATOR



In 2015, the Lake Chad Basin Region witnessed increasing waves of violence followed by massive displacement. The Islamist terrorist group Boko Haram expanded its insurgency from north-eastern Nigeria, where to date over 2,2 million people are internally displaced, to neighboring Cameroon, Chad and Niger, killing there over 550 civilians and uprooting some 195,000 people. As a result, the affected countries, who are hosting over 215,000 Nigerian refugees, reacted by defending their populations, imposed security restrictions and declared a state of emergency. Hence, humanitarian and protection space was reduced as the Lake Chad Basin gradually turned into a military no-go zone. Still, the deteriorating security conditions in the region went almost unnoticed in other parts of the world.

In 2015, thanks to the ongoing support by donors, 23 RRRP partners were able to assist over 215,000 Nigerian refugees and provided humanitarian support to host community members. Out of the US\$ 174,409,924 required for 2015, US\$ 87,317,003 were received, covering 50 per cent of the needs.

The Nigeria 2016 Regional Refugee Response Plan (RRRP) advocates for the needs of 230,000 Nigerian refugees and nearly 285,000 persons in host communities, in Cameroon, Chad and Niger.

I am proud to say, that this RRRP also presents a remarkable list of achievements made in 2015. Despite the challenging circumstances we faced, the dedication and cooperation among humanitarian partners and governments in assisting the people we care for was remarkable and will serve as a solid foundation for our work in 2016. I am also pleased to see that UNHCR's coordination role and leadership in the refugee response is fostering the spirit of partnership among agencies, governments and NGOs.

UNHCR's Refugee Coordination Model aims to ensure that refugees and asylum seekers, the most vulnerable among displaced populations, receive the protection and assistance they are entitled to. The Nigeria 2016 RRRP outlines prioritized needs and planned response strategies identified and agreed upon by humanitarian actors in the Lake Chad Basin, and last but not least the funding needs of 28 UN agencies and NGOs involved.

We are hopeful that you will enable us to continue providing protection and life-saving assistance to the people we care for, and once again, count on your support.

Thank you!

Liz Kpam Ahua

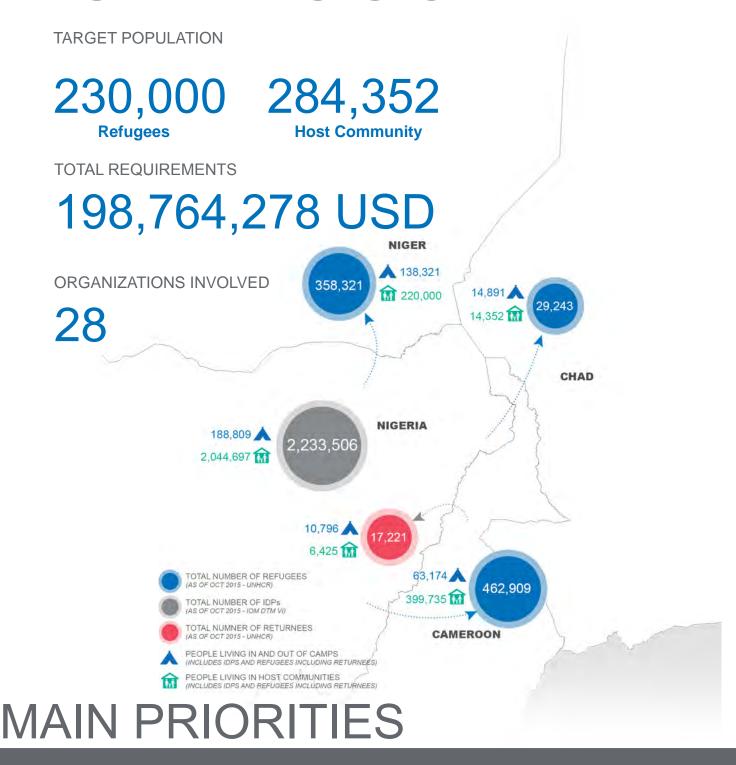
Regional Refugee Coordinator and Regional Representative

UNHCR

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STRATEGIC OVERVIEW



Ensure protection, including access to asylum:

- Conduct and maintain civil registration
- Increase access to asylum
- Enhance child protection

Ensure access to humanitarian assistance and promote the transition to a more sustainable response through the reinforcement of basic services.

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Encourage selfreliance and environment protection.

- Strengthen access to livelihood
- Promote environment protection

REGIONAL OVERVIEW

Introduction

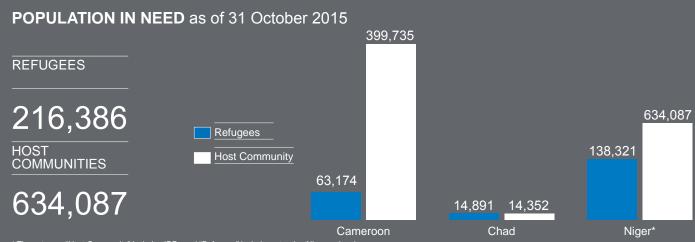
Violence in northern Nigeria and across the Lake Chad Basin has intensified in 2015 and the situation continues to deteriorate. Many people fleeing widespead and indiscriminant attacks on civilians are seeking safety in neighbouring countries, but the spillover of terror and economic instability is compounding the refugee crisis, and the humanitarian situations in Cameroon, Chad and Niger continue to deteriorate. In 2015, the terrorist group Boko Haram expanded its attacks across the region and has continued to commit indiscriminate attacks against civilians, including numerous suicide bombings, looting, extractions and abductions, which have fuelled fear. mistrust and suspicion among the affected populations and led to the harassment and stigmatization of certain groups. Attacks throughout the year have further led to the scaling-up of miltary operations in all affected countries, including by the Multinational Joint Task Force, and continued tightening of security measures. such as road blocks, military deployment, burga bans, curfews and so called humanitarian evacuations in the Lake Chad Region, especially from Cameroon. These measures have resulted in further forced displacement and a considerable number of Nigerian nationals who were and are being returned to their home country. UNHCR and other humanitarian actors have repeatedly emphasized with Governments that such return

operations, if not voluntary, may be in contravention of international protection principles and even constitute an act of refoulement.

The Lake Chad Region is characterized by a harsh living environment with difficult topographic conditions, extreme poverty, weak public services and food insecurity, due among other factors, to limited crop production and farming opportunities, water shortage and challenges related to the provision of energy such as firewood. Intensified insecurity, military operations and displacements across the region have disrupted trade, fishing, farming and other income generating activities, laying the ground for an economic crisis, and further exacerbating the humanitarian situation. Furthermore, the high density in certain areas as well as poor sanitation resulting from make-shift settlements makes these areas susceptible to epidemic outbreaks.

The Nigeria 2016 Regional Refugee Response Plan (RRRP) outlines the strategy to protect and assist refugees and other vulnerable people affected by the ongoing conflict in north-eastern Nigeria and the Lake Chad Basin. It promotes the transition from emergency assistance to more durable solutions by supporting respective national development plans in the Lake Chad Basin region. The RRRP is a coordinated effort by UN agencies and non-governmental organization (NGO) partners, and also serves as a joint platform for advocacy and fundraising for all actors involved.

The 2016 RRRP contains country chapters for



^{*} The category "Host Community" includes IDPs and "Refugees" includes returning Niger nationals

Cameroon, Chad, and Niger, with detailed information on achievements made and challenges faced in 2015. It presents harmonised planning figures on refugees and members of impacted host communities in all three countries, as well as on returning Niger nationals and internally displaced persons (IDPs) in Niger, outlining the most urgent protection and humanitarian needs of people affected by the situation in the region. Moreover, the country chapters include detailed sector plans jointly developed by response partners, and the respective financial requirements of each partner in the interagency response. The coordination structures in each country, based on UNHCR's Refugee Coordination Model (RCM), are also presented.

2015 Achievements

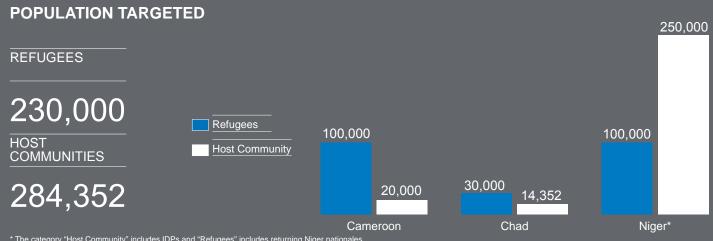
Under the framework of the Nigeria 2015 RRRP, which is 50 per cent funded, UN agencies and NGOs, in collaboration with the Governments of Cameroon, Chad and Niger, delivered protection and humanitarian assistance to the increasing numbers of refugees and other people fleeing violence and insecurity in northeastern Nigeria. Selected cumulative achievements (as of 1 October 2015) for the three countries are summarized below:

Protection – The provision of civil registration and documentation, including birth and marriage certificates, continued in the camps in Cameroon and Chad. In Cameroon, more than 45,000 refugees have been registered and over 1,400 birth certificates have been issued, and profiling of refugees living in host communities was completed.

This supported substantively the planning of and refugees' access to humanitarian assistance, and contributed to the prevention of statelessness and the identification of people with specific needs (PWSN).

Partners strengthened multi-sectoral assistance to PWSN, including survivors of sexual and gender-based violence (SGBV) and children-at-risk. In Chad, 176 unaccompanied and separated children were provided with temporary care arrangements. Some 9,834 PWSN have been assisted in the camp in Cameroon, including more than 1,180 elderly people, 590 unaccompanied and separated children, 447 disabled people and 250 SGBV survivors. The establishment of a gender-based violence information monitoring system in Niger also improved assistance to SGBV survivors. To reduce protection risks for children, such as forced recruitment, seven child-friendly spaces offering age and gender appropriate activities were established in Cameroon and Chad. In addition, capacity-building activities were organized on SGBV, child protection, and refugee rights and protection. Humanitarian actors conducted protection monitoring in detention centres, and followed-up on the cases of 52 detained refugees.

Humanitarian assistance - Camps for refugees as well as internally displaced people (IDPs) were established and maintained in Cameroon, Chad and Niger. Relocation to these camps is voluntary, given that some refugees prefer to live in the community. In Cameroon, refugees are encouraged to move to a transit centre for improved security screening and registration before relocating to the camp. Partners provided shelter, shelter repair kits, food and non-food items (NFIs) to affected populations including refugees, IDPs, and members of host communities, prioritizing vulnerable persons. For example in Niger, 45,500 people benefitted from emergency shelters and 1,100 households were provided with transitional metallic shelters, while approximately 210,000 people received non-food items (NFIs). A total of 1,114 emergency



^{*} The category "Host Community" includes IDPs and "Refugees" includes returning Niger nationales

shelters were constructed for some 7,300 refugees in Dar Es Salam refugee camp. In Cameroon, 3,500 family shelters and 31 community shelters were constructed in Minawao camp. Up to 5,000 refugees received food aid in the camp in Chad, and 17 rounds of food distributions took place for refugees in Cameroon since October 2013.

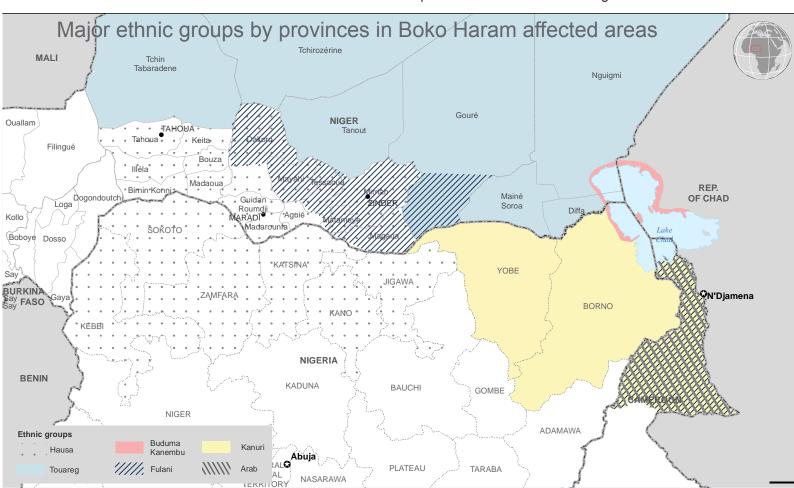
Improved access to basic services - Partners constructed, rehabilitated and equipped health centres; and organized vaccination campaigns, training and awareness-raising activities, including on hygiene and sanitation. For instance, in Cameroon, until August 2015, partners provided more than 24,560 health consultations and 395 birth deliveries, treated over 1,630 people with mental health issues, referred 783 complex cases to hospitals and conducted vaccination campaigns, covering over 90 per cent of the affected population. In Niger, mobile clinics enabled the delivery of medical assistance, including vaccinations and prenatal care, to people in insecure and remote areas. Furthermore, some 185,000 people took part in sensitization activities and received hygiene kits. In Chad, prevention of mother-to-child transmission and HIV treatment were implemented in health facilities.

Refugees in Cameroon were integrated into the epidemics response plan and a contingency and

emergency preparedness and a response plan against cholera is also in place.

Nutrition services and treatment for malnutrition were provided in all affected countries. As a result, 11,189 children and 1,391 pregnant or lactating women received additional food rationsand 2,663 malnourished children were admitted to programs in Cameroon. As of July 2015, around 11,850 malnourished children received nutritional care in Niger.

Partners constructed and rehabilitated water and sanitation infrastructure in camps and host villages, and established water management committees. For example, in Chad, eight water management committees were established and 21 wells were constructed, which increased the water supply of the camp to 43 litres/person/day. In addition, 330 communal latrines, 188 family latrines 100 garbage bins and 12 garbage pits were constructed. Despite natural constraints, drinking water distributions enabled the provision of 14 litres/ person/ day in the camp in Cameroon with the construction of 32 boreholes, 37 water points and water trucking. The camp now has 2,437 latrines, (20 persons/latrine), 762 showers (36 persons/shower), 34 waste pits (1,326 persons/waste pit) and 600 waste bins, (20 households/waste bin). Among the achievements of WASH partners in Niger was the improvement of access to drinking water for some



91,400 affected people, and more than 57,600 people benefitted from access to improved sanitation facilities.

Access to education was improved through the rehabilitation and construction of classrooms and schools, the distribution of school materials and equipment, and capacity building for teachers. In Niger, 18,212 children affected by the conflict benefitted from the school in the box programme, and three distance learning centres were established for children who do not speak French. In Cameroon, one secondary school was converted into a bilingual school with the support of the Ministry of Education. In addition, an accelerated training program for drop-outs and children aged 5 years was implemented to facilitate their reorientation into school. In Chad, two primary schools with 16 classrooms each were opened in Dar Es Salam camp for refugee, IDP and host community children; 16 community teachers were recruited, providing education to 1,134 students (435 girls and 699 boys). A mass information campaign on education, training for some 90 teachers, and the construction of 47 classrooms in Cameroon contributed to an increase in the number of enrolled students from around 6,000 in 2014 to over 10,000 in 2015.

Support for self-reliance - Partners organized vocational and skills training, distributed agricultural and other production kits, and conducted livelihood activities for affected populations including refugees and members of host communities. For example, 160 students were enrolled in vocational training and 150 people received livelihood support in Cameroon. Up to August 2015,

partners supported some 200 refugee households with agricultural projects, 150 in crop farming, 100 in fishing activities and 48 women with small commerce projects in Chad. Moreover, in Niger, RRRP partners conducted the first distribution of gas in two camps.

Promotion of peaceful coexistence and environmental protection - Partners implemented a range of activities to promote peaceful coexistence between refugees and impacted communities, such as providing assistance and training, the construction or rehabilitation of local infrastructures, and measures to minimize environmental degradation in host communities.

Examples of the latter include the distribution of gas for domestic use in two camps in Niger and distribution of fuel-efficient stoves in Cameroon.

2015 Challenges

The key challenges for the response in 2015, some of which continue to persist, are the following:

Humanitarian access and presence - Access to refugees, IDPs and returning Nigerien nationals is limited in some areas of the Lake Chad Region due to logistical constraints and insecurity. Some areas are inaccessible, given the dispersed character of islands and very poor road infrastructure. In addition, general insecurity caused by the Boko Haram insurgency and their presence in areas where refugees, other affected populations, and humanitarian actors are living has led to restrictions in the movements of all humanitarian actors. This constrains protection monitoring,

2015 MAIN ACHIEVEMENTS



24,854

children have been screened and treated for Severe Acute Malnutriion or Moderate Acute Malnutrition in Cameroon (11,000), Chad (about 2,000) and Niger (11,854)



107,415

people benefitted of sanitation facilities in Cameroon (48,740), Chad (1,020) and Niger (57,655)



53,335

households received a shelter (emergency shelter, family shelter or family tent) or a shelter kit in Cameroon (5,179), Chad (1.156) and Niger (47,000) registration and the provision of humanitarian assistance. The number of experienced humanitarian partners is limited, and capacity to deliver adequate levels of assistance and protection is low.

Limited freedom of movement, insecurity and multiple displacements - The presence of, and risks associated with, Boko Haram elements as well as military operations in all affected countries, and related security measures such as evacuations and the militarization of certain zones, have led to further forced displacements. The unpredictable movements of people of concern further challenged the planning and provision of protection and assistance. Security measures adopted by the affected Governments restricted freedom of movement of people in particular when the latter were suspected of belonging to Boko Haram jeopardizing access to livelihood activities.

Access to basic services – The lack of public services and infrastructure restricts access to basic services, including in education, health, and nutrition. Access to education is also complicated by language differences between refugees and host communities. Access to water remains a major challenge in Minawao camp, Cameroon, due to overcrowding of the site and insufficient groundwater. The situation is further compounded by the extremely fragile socio-economic context of the Sahel region, which features chronic food

insecurity, epidemics, limited natural resources, an arid climate, and drought. Competition for limited natural resources and basic services can lead to tension between hosting and displaced populations.

Regional humanitarian needs

Despite many achievements in 2015, urgent needs remain. The RRRP outlines the most immediate and prioritized needs of refugees, IDPs, members of impacted host communities, and returning nationals from Niger. Needs are based on surveys and rapid, multi-sectoral needs assessments, in which an Age, Gender and Diversity sensitive and participatory approach is applied.

Given the presence of armed elements and military operations in the Lake Chad Region, as well as the perception by local populations that some refugees are affiliated with Boko Haram, both access to and the civilian and humanitarian character of asylum has to be ensured. Most displaced people do not have identity documents that prove their nationality, and the capacity of authorities to ensure civil registration and



documentation is often limited. These factors heighten the risk of statelessness among displaced populations. In Niger, 70,000 people are estimated to be at high risk of statelessness.

People with specific needs, including SGBV survivors, children at risk and people with disabilities, are particularly affected by the nature of the violence and limited access to basic services and assistance. Children are at risk of forced recruitment by armed groups, detention, violence, and exploitation. Furthermore, they are often separated from their families or caregivers, and are at greater risk of resorting to negative coping mechanisms. They may also be suffering from trauma and other mental health issues. Due to social and cultural practices, many people are reluctant to report incidents of SGBV. Survivors and people at risk also face challenges in accessing assistance, such as legal aid and psychosocial support. In light of this, all PWSN need to be identified and assisted on multiple levels, thus conferring particular importance to registration and profiling. Communities tend to be weak, but play an important role in identifying and responding to the needs of PWSN and therefore have to be empowered.

These protection concerns are further compounded by the difficult living conditions and poor access to essential services. For example, in Cameroon, Minawao camp is accommodating more than twice the number of refugees that it has capacity for. By October 2015, more than 23,000 refugees had arrived in the camp since the beginning of the year, doubling the population. Given the mounting suicide attacks by the insurgents, new refugees continue to arrive at the transit centre every day and are in need of emergency shelters. Access to water is also severely limited. In Niger, 60 per cent of the refugee and displaced population do not have access to potable water and lack water points in 76 per cent of host villages. In Cameroon, more than 50 per cent of the water supply of Minawao camp is covered by water trucking with 14 litres provided/person/day, six litres below standards. Sanitation needs are also pronounced; in Niger, 89 host villages require more than 100 latrines each while in Chad, the latrine ratio is 51 persons/communal latrine hole in Dar Es Salam camp, well below the standard ratio of 20:1.

The affected population continues to suffer from food insecurity. In Niger, according to authorities, more than 60 per cent of the population in the Diffa region is food-insecure, and the global acute malnutrition (GAM)

rate among affected children is of 28 per cent. Among refugee children in the camps, the GAM rate stands at 12.3 per cent in Cameroon, and 11.6 per cent in Chad. This situation has important public health implications, including but not limited to a high under-five mortality rate, and a high risk of epidemics. Health facilities are critically overstretched and lack medicines, equipment, and qualified human resources. Reproductive health and HIV services are limited. In Cameroon, at least one refugee dies in health care per week.

Not all affected children are attending school. Around 60 per cent of refugee children arriving at Minawao camp in Cameroon, and 81 per cent of the 539 children aged 6 to 11 years old surveyed in Chad, have never been enrolled in school. There is a shortage of classrooms, education materials, and qualified teachers, as well as remedial programmes for children who have dropped out of school.

More opportunities to engage in livelihood activities must be identified. Refugees lack the financial means to start a business. A large number are pastoralists or farmers who no longer have their tools. They have limited access to land and are challenged by the semi-arid climate and scarce water resources in the region. Livestock share limited grazing land, which has a negative impact on the environment. Competition for natural resources is also leading to tensions with host communities. Moreover, the use of wood as the primary source of domestic energy is depleting forest capital and accelerating environmental degradation. In Diffa, for example, it is estimated that the volume of wood exploitable for energy will diminish by almost 29 per cent by 2023.

Regional response strategy

The Nigeria 2016 RRRP aims to provide protection and humanitarian assistance to 230,000 Nigerian refugees in Cameroon, Chad and Niger, including Niger nationals who returned to Niger, as well as to more than 514,350 IDPs and members of impacted host communities in these countries.

The prioritized, cross-cutting strategic objectives and their respective interventions for the 2016 RRRP are:

Ensure protection, including access to asylum.

Conduct and maintain civil registration, and provide

documentation and capacity building for national authorities to ensure refugees' access to protection, basic services and humanitarian assistance, allow population profiling, and minimize risks of statelessness. In Cameroon, UNHCR together with the Government plans to carry out a biometric verification exercise and to establish a biometric identity management system.

Increase access to asylum, including by advocacy with national security forces for the respect of the non-refoulement principle, protection monitoring in border areas. Moreover, training on refugee protection and human rights will be provided. In Cameroon, emphasis will be put on advocating that robust screening mechanisms be established to ensure the voluntariness of refugee returns to Nigeria.

Promote the civilian and humanitarian character of asylum in close collaboration with national authorities and security forces, to prevent the presence of armed elements in or around the camps.

Strengthen SGBV prevention and response mechanisms, including: the identification, documentation and provision of multi-sectoral assistance to SGBV survivors (e.g. medical assistance,

psycho-social support and legal aid); as well as training and awareness-raising on SGBV for national authorities, security forces, refugees, communities and other relevant stakeholders.

Enhance child protection through improving the identification and monitoring of children at risk; conducting Best Interest Assessments and Determinations, family tracing and reunification; constructing child-friendly spaces; and implementing other targeted child-protection activities in accordance with the best interest of the child.

Assist people with specific needs with multi-sectoral referral mechanisms. Humanitarian actors will also conduct awareness-raising campaigns on the specific needs, and advocate for improved access to government services, including welfare provisions.

Support peaceful coexistence to minimize tensions between refugees, IDPs and impacted communities by taking all affected populations into account in assistance projects and programmes, conducting awareness-raising and training on conflict mediation, and by providing opportunities for positive community interaction.



PROTECTION SECTOR

OBJECTIVE: To improve the quality of registration/profiling and issuance of legal documents

INDICATOR: 100% of persons of concern (PoCs) registered on an individual basis OBJECTIVE: To reduce the risk of SGBV and to improve the quality of the response

INDICATOR: 100% of reported SGBV survivors received appropriate support

OBJECTIVE: To strengthen the protection of children

INDICATOR: 100% of Unaccompanied minors (UAM) have been identified and supported

Ensure access to humanitarian assistance and promote the transition to a more sustainable response through the reinforcement of basic services.

Strengthen access to quality education at all levels, including through: the maintenance, improvement or construction of education infrastructure; advocacy and provision of support for recruitment, deployment and capacity building of teachers; and the distribution of teaching materials and school kits. Pre-school activities and literacy opportunities, including for adults, will be organized. In close coordination with local authorities, partners will ensure the monitoring and supervision of

pedagogical activities. Alternative education platforms including distance education will be explored or expanded.

Maintain and improve health and nutrition services

through: the provision of drugs and equipment; construction and rehabilitation of respective infrastructures; capacity building for health, sanitation and nutrition staff; and vaccination campaigns. In order to reduce the prevalence of malnutrition and other diseases, awareness-raising activities will be implemented.

Nutrition assessments will be carried out to measure

the progress and impact of nutrition programmes and activities.

Enhance water, sanitation and hygiene infrastructure, including through: constructing boreholes; providing water trucking; constructing and refurbishing latrines; developing waste management strategies as well as strengthening awareness-raising and community

participation in sanitation activities.

Provide food, NFIs and shelter to meet the basic needs of affected populations, prioritizing the most vulnerable.

The access road to the camp will be rehabilitated to ensure uninterrupted service delivery, including during the rainy season. Cash assistance will be provided in some areas, where feasible.



EDUCATION SECTOR

OBJECTIVE: To ensure optimal access to education to the persons of concern (PoCs)

INDICATOR: 41,200 children enrolled in primary education



FOOD SECURITY SECTOR

OBJECTIVE: To enhance the provision of adequate food assistance to sustain persons of concern (PoCs)

INDICATOR: 175,000 people receiving food assistance on a monthly basis



HEALTH & NUTRITION SECTOR

OBJECTIVE: To improve the health status of the persons of concern (PoCs)

INDICATOR: To reduce the crute mortality rate up to the standards rate of <1 (per 1,000 population/month)

OBJECTIVE: To strengthen the prevention and response of malnutrition

INDICATOR: Prevalence of Global Acute Malnutrition (GAM) reached the standard <5% (6-59 months children)



SHELTER & NFI SECTOR

OBJECTIVE: To establish, improve and maintain shelter and infrastructures

INDICATOR: 100% of households living in adequate dwellings

OBJECTIVE: To provide sufficient basic and domestic items to the persons of concern (PoCs)

INDICATOR: 44,217 household will receive Non-Food Items (NFI)



WATER, SANITATION & HYGIENE PROMOTION SECTOR (WASH)

OBJECTIVE: To increase and maintain adequate supply of potable water

INDICATOR: A minimum of 20 litres/person/day of potable water are available in the refugee camps

OBJECTIVE: To ensure persons of concern (PoCs) live in satisfactory condition of sanitation and hygiene

INDICATOR: 16,642 latrines constructed

Encourage self-reliance and environment protection.

Strengthen access to livelihood opportunities, including for agriculture, fisheries and entrepreneurial activities, and through the provision of vocational and skills training. Humanitarian partners will also promote refugee access to micro-financing, and to land and other natural resources. Moreover, in partnership with Governments and development partners, refugees will be progressively integrated into existing developmental programmes and initiatives.

Promote environment protection through trainings and awareness-raising on key environmental issues, and using energy-efficient practices. In Niger, projects will be implemented to ensure access to domestic energy. Environmental protection will aim to prevent desertification and promoting peaceful co-existence, as well as increase the economic capacities of beneficiary households.



LIVELIHOODS & ENVIRONMENT SECTOR

OBJECTIVE: To improve self-reliance and livelihoods

INDICATOR: 76,888 persons will recive production kit/support



Regional coordination

The host Governments of Chad, Cameroon and Niger have the primary responsibility to assist and protect refugees. In cooperation with the host Governments and their line ministries and departments, and under the framework of the Refugee Coordination Model (RCM), the RRRP is led and coordinated by the Regional Refugee Coordinator (RRC) for the Nigeria situation. The Plan reflects the collective efforts of governments, UN agencies and NGOs and the inclusive coordination structures that are in place in all three countries.

In Chad, UNHCR continues to coordinate the refugee response together with the Chadian Government. Regular inter-sector and sector coordination meetings are organized in the capital N'Djamena and in the border area of Lake Chad, Bagasola, with the Commission Nationale d'Accueil et de Réinsertion des Réfugiés et des Rapatriés (CNARR) as lead of refugee coordination activities at the local level together with local administrative authorities. Furthermore, NGOs and UN agencies are also engaged as co-leads: UNICEF is co-lead in Child Protection; Croix Rouge Tchad is co-lead in WASH; UNFPA is co-lead in GBV; IMC and MSF-Suisse is co-lead in Health activities.

The sector coordination spans from participatory AGDM needs assessments with the participation of refugees and partners to facilitate a full analysis of priorities and gaps and harmonized approaches to interventions, to implementation, monitoring and reporting of activities.

In Cameroon, upon request of the Humanitarian Country Team (HCT) in April 2014, UNHCR extended the scope of coordination through established refugee sectoral groups to also addressing the needs of IDPs and their host communities. The HCT's proposal was endorsed by an agreement between the High Commissioner and the Emergency Relief Coordinator in line with the "Joint OCHA-UNHCR Note on Mixed Situations -Coordination in Practice". The Humanitarian Coordinator remains accountable for the non-refugee related response, while UNHCR maintains its responsibility and accountability for the refugee response. All sectors are led by a Government entity and co-led by UN agencies. All the humanitarian partners on the ground in Maroua, including local authorities, national and international NGOs, are actively participating in the various coordination meetings. There is also a bi-monthly multi-sectoral operations team meeting with all sector

leads and co-leads, which is chaired by UNHCR. Once a month, UNHCR is holding a Multi-Sector Operations Team in Yaoundé, to discuss matters to the refugee response operations at national level.

In Niger, the Governor of the Diffa region created a Regional Committee for the Coordination and Management of Refugees and Returnees in July 2014, which is composed of Regional Directors, Department Prefects, the President of the Regional Council and representatives of humanitarian actors. It constitutes the main coordination framework. In 2015, a Management Unit working with the Governor was established to support humanitarian action, especially concerning international protection of refugees, the prevention of statelessness, assistance to refugees, IDPs and Niger nationals returning from Nigeria, to provide a link between humanitarian actions, activities related to rehabilitation (including short and medium term rehabilitation) and the Governmental Strategy, as planned for in the Programme for Economic and Social Development in Niger (PDES 2012-2015). An interagency coordination committee, with an OCHA-UNHCR co-lead and directly linked to the Humanitarian Country Team is in charge of the evaluation of the needs and of the elaboration of the response, and is working closely with the Regional authorities.

At the sectoral level, authorities and humanitarian actors have created nine thematic groups (security, shelter, reception-registration, food insecurity, protection, health, nutrition, WASH and education). These thematic groups regularly meet on the ground in Diffa to discuss progress and lessons learned.

FINANCIAL REQUIREMENTS

by Agency & Country

ORGANIZATION	CAMEROON	CHAD	NIGER	TOTAL REQUIREMENTS (USD)
ACF			2,952,500	2,952,500
ACTED			1,957,050	1,957,050
ADRA			146,284	146,284
ASOL	433,427			433,427
Care International			166,769	166,769
CISP			3,799,382	3,799,382
COOPI			2,802,100	2,802,100
FAO	400,000	1,000,000	2,750,000	4,150,000
Help / Welthungerhilfe			2,500,000	2,500,000
IEDA Relief	50,000		482,757	532,757
IMC	273,764	105,000		378,764
INTERSOS	820,478			820,478
IOM	500,000			500,000
IRC			3,234,000	3,234,000
LRC			1,200,000	1,200,000
Oxfam			1,344,107	1,344,107
Plan International	5,042,724		1,095,081	6,137,805
Public Concern	100,103			100,103
Save the Children			7,097,331	7,097,331
UNDP	400,000		3,427,210	3,827,210
UNESCO		30,000		30,000
UNFPA	458,500	275,000	725,000	1,458,500
UNHCR	27,898,311	16,889,844	17,549,521	62,337,676
UNICEF	4,418,003	2,210,738	9,427,162	16,055,903
UNOCHA			185,000	185,000
UN Women	1,476,000		1,242,000	2,718,000
WFP	13,546,942	8,766,429	47,011,812	69,325,183
WHO	543,000	1,016,375	1,014,574	2,573,949
Total	56,361,252	30,293,386	112,109,640	198,764,278

by Sector & Country

SECTOR	CAMEROON	CHAD	NIGER	TOTAL REQUIREMENTS (USD)
Protection	9,774,784	2,679,529	11,724,902	24,179,215
Education	5,049,015	2,054,526	6,134,561	13,238,102
Food security	13,303,403	8,766,429	45,187,304	67,257,136
Health and Nutrition	6,748,754	3,856,149	14,203,293	24,808,196
Livelihood and Environment	6,803,053	4,716,709	12,813,391	24,333,153
Shelter and NFI	9,338,531	6,738,143	11,762,420	27,839,094
WASH	5,343,712	1,481,901	9,365,095	16,190,708
Inter-Agency coordination/ Information sharing			918,674	918,674
Total	56,361,252	30,293,386	112,109,640	198,764,278

CAMEROON REFUGEE RESPONSE PLAN

STRATEGIC OVERVIEW

TARGET POPULATION



CAMEROON TOTAL NUMBER OF REFUGEES TOTAL NUMBER OF IDPs (AS OF OCT 2015 - IOM DTM VI) OTAL NUMNER OF RETURNEES PEOPLE LIVING IN AND OUT OF CAMPS PEOPLE LIVING IN HOST COMMUNITIES

REPUBLIC

REPUBLIC OF CONGO

MAIN PRIORITIES

Ensure protection for Nigerian refugees, including access to asylum and the civilian and humanitarian character of asylum: Advocacy with national authorities for

- improved access to asylum
- Securitization of Minawao camp
- Peaceful coexistence mechanisms to prevent and resolve tensions



Ensure the basic needs of refugees at Minawao cmp are met and encourage the resilience of refugee and host communities:

- Access to water will be improved
- Access to shelter will be enhanced
- Health services will be improved
- Education at all levels will be promoted

COUNTRY OVERVIEW

Introduction

Background

With violence intensifying in north-eastern Nigeria in 2015, the number of refugees seeking safety in Cameroon has also increased. As of September 2015, Cameroon hosts over 60,000 Nigerian refugees in villages and in Minawao camp, where up to 200 persons continue to arrive per week. Minawao camp, constructed with capacity for 20,000 people, is hosting more than 47,000 refugees, including 53 per cent women and 61 per cent children and has by far exceeded its capacity. There is an urgent need to provide shelter solutions for new arrivals and improve the living conditions of current residents. In light of the ongoing violence and the planned increase in military operations in 2016, more refugee arrivals are expected.

A profiling exercise revealed that out of the over 60,000 Nigerian refugees an estimated 15,000 of them live in host communities. Violence and insecurity in northern Cameroon have severely limited humanitarian access to refugees living in host villages, in particular in Mayo-Tsanaga, Mayo-Sava and Logone-et-Chari. Due to security measures imposed by the Government of Cameroon in the Far North in July, an increasing number of Nigerian refugees living in host communities have expressed their wish to be accommodated in Minawao camp, as the camp is considered to be safer.

2015 Achievements

Main achievements in Cameroon include:

- All refugees in Minawao camp were provided with food assistance, non-food items, shelter, and access to basic services.
- Civil registration continued in the camp and documentation for over 45,000 refugees was issued, including marriage certificates and over 1,400 birth certificates.
- Despite security constraints, profiling of refugees living in host communities was completed, and border monitoring was conducted in accessible zones.
- Protection monitoring and response activities were undertaken, enabling the provision of assistance to: refugees in detention; over 250 victims of sexual and gender-based violence (SGBV); and to nearly 10,000 persons with specific needs, including 447 persons with disabilities.
- Some 590 unaccompanied and separated children (UASC) were provided with care.
- Despite natural constraints, the provision of drinking water reached an average of 14 litres/person/day.
- Refugees were integrated into the epidemics response plan; vaccinated; and an emergency



REFUGEES

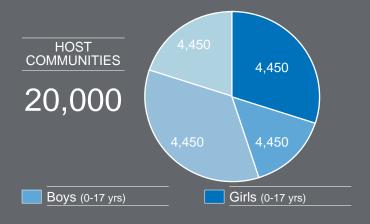
4,450

4,450

4,450

Men (18 and above)

Women (18 and above)



preparedness and response plan against cholera was set up.

- The Cameroonian security forces helped to ensure the security of Minawao camp, and a transit centre was opened to undertake security screening of new arrivals.
- Social and community infrastructures were improved, in particular schools, and conflict resolution mechanisms were strengthened.

2015 Challenges

Key challenges for the refugee response in Cameroon are outlined below:

- Minawao camp continues to grow, despite the camp operating far beyond capacity. Access to water remains a key challenge, due in part to low levels of groundwater.
- Limited access to out-of-camp refugees along the border between Nigeria and Cameroon (Far North), due to insecurity.
- The Government of Cameroon implemented various security measures in 2015, which limited the freedom of movement of refugees. This negatively impacts their access to livelihood

- activities and limits their potential for socioeconomic integration.
- Refugees can be perceived as a vector of insecurity and may often be suspected of having links to Boko Haram. Suspected terrorist cases are referred to military tribunals, but the judicial procedure is complex.
- Access to education remains a challenge due to a shortage of teachers and infrastructure.
- The situation in the region is worsened by recurring public health epidemics, high rates of malnutrition, and recurring food insecurity.

Identified needs

The Nigeria 2016 RRRP will protect and assist 100,000 Nigerian refugees in Cameroon, including an expected 80,000 refugees in camps and 20,000 refugees living out-of-camp, as well as 20,000 members of impacted communities living in the five villages around Minawao camp. The 2016 panning figure for Nigerian refugees is based on arrival trends over the last two years, and projections of arrivals for the most likely scenario: that Boko Haram insurgents will continue to carry out



indiscriminate attacks against civilians and engage in activities including looting, abductions and suicide attacks on both sides of the border. The projected arrival of some 35,000 Nigerian refugees in 2016 will depend on the evolution of the security situation along the border, in particular access to asylum and territory.

The needs of Nigerian refugees in Cameroon remain high. With Minawao camp operating beyond its capacity, there is need to explore opportunities to decongest the existing camp and increase the absorption capacity. The complex security situation and ongoing terror attacks necessitates the strengthening of security to ensure the civilian and humanitarian character of asylum. Protection monitoring mechanisms also need to take into account this context.

Main protection concerns include: ensuring access to asylum and the respect of refugee rights; conducting civil registration and providing documentation for refugees; identifying and providing assistance to persons with specific needs, child protection issues, and SGBV prevention and response. The forced recruitment of women and children by Boko Haram to carry out suicide attacks and reported cases of forced returns highlight the particular protection needs of women and children in northern Cameroon. An in-depth assessment of children's rights and child protection needs is required. Peaceful coexistence of refugees and impacted host communities should continue to be promoted. In addition, there is a need to strengthen the knowledge and capacity of humanitarian partners on international protection issues.

Information collected through protection monitoring in the camp suggests that certain groups are considering to return spontaneous to Nigeria as soon as the security situation in their places of origin stabilizes and becomes conducive for returning in safety and dignity. These groups include students, health personnel, administration officials, and teachers.

Humanitarian needs persist in all sectors. These include strengthening the prevention of and response to malnutrition, disease surveillance and response; improving access to primary health care; enhancing access to education on a non-discriminatory basis; and improving access to water through sustaining sources. Sanitation and shelter infrastructure in Minawao camp need to be improved and a more participatory approach implemented. Furthermore, livelihood opportunities and the promotion of self-reliance and socio-economic integration of refugees in the community are required.

Strategic overview for the response

Humanitarian response partners will pursue opportunities to increase the absorption capacity of Minawao camp, and to ensure the basic needs of refugees at Minawao camp are met across all sectors. Education opportunities for refugee children at the camp will be further expanded, and the resilience and self-reliance of refugee and host communities will be promoted where possible. Subject to access to the concerned areas, protection monitoring and response to out-of-camp refugees will be stepped up.

In addition, the capacity of Government authorities to provide refugee protection and assistance will be further strengthened providing training and institutional support.

In light of the identified needs and the ongoing political and social situation in northern Cameroon, the 2016 response plan for Nigerian refugees will consist of the following main objectives:

Ensure protection for Nigerian refugees, including access to asylum and the civilian and humanitarian character of asylum

Advocacy with national authorities for improved access to asylum and respect for the principle of non-refoulement will be reinforced. Border monitoring mechanisms will be improved.

Securitization of Minawao camp and construction of 35 km access route in collaboration with national authorities will be carried out.

Peaceful coexistence mechanisms to prevent and resolve tensions between refugees and host communities reinforced and supported, and a participatory assessment conducted to identify potential sources of tension. In addition, awareness raising activities will be carried out creating opportunities for refugees and the impacted community to interact. Furthermore, impacted communities will be included in receiving assistance. Trainings on various methods of conflict mediation will be conducted.

Civil registration and documentation of refugees improved and maintained, including through the issuance of birth, marriage and death certificates. Identification of and assistance to persons with specific needs improved, including to elderly persons and persons with disabilities or psycho-social needs, and a system for inter-sectorial referrals established. Humanitarian actors will advocate for their improved integration in health services provided by the Government.

Child protection enhanced through improved identification and targeted child-protection activities and assistance in accordance with the best interest of the child.

SGBV prevention and response, including through the provision of specific assistance to SGBV survivors, strengthening of identification and reporting mechanisms, and awareness raising and capacitybuilding for all stakeholders.

Age, gender and diversity mainstreaming (AGDM) integrated within the refugee response of all actors.

Ensure the basic needs of refugees at Minawao camp are met and encourage the resilience of refugee and host communities

Humanitarian assistance will include distributions of food and non-food items.

Access to water will be improved through the construction of a permanent water supply system, piping water from a river near Mokolo to the camp and surrounding villages.

Hygiene and sanitation will be enhanced through construction and refurbishment of latrines, the

establishment of a waste management strategy for solid waste and greater participation of refugees in health and sanitation activities.

Access to shelter will be enhanced through the construction, improvement and maintenance of shelter and related infrastructure, as well as the increased participation of refugees in shelter activities. The possibility to introduce cash or vouchers as an assistance modality will be analyzed. With Minawao camp operating far beyond capacity, together with the Government and its partners, UNHCR will continue to explore opportunities to decongest the existing camp and to increase the absorption capacity for newly arriving refugees.

Health services will be improved by increasing the reception capacity of health centres and access to treatment through the construction and refurbishment of centres, and capacity building for health, sanitation and nutrition staff on key topics. In order to help reduce the prevalence of malnutrition and other diseases, awareness raising activities will be organized in the camp and neighbouring villages and a nutrition assessment will be conducted in the camp to measure the progress made and the impact of the activities.

Education at all levels will be promoted, including advocacy for the deployment of additional camp teachers and construction of school classrooms and distribution of school kits. Pre-school activities and literacy opportunities, including for adults, will be organized. In close coordination with the Ministère de l'Education de Base (MINEDUB) and the Ministère des



MAIN PROTECTION CONCERNS

- Ensuring access to asylum and the respect of refugee rights;
- Conducting civil registration and providing documentation for refugees;
- Identifying and providing assistance to persons with specific needs, child protection issues, and SGBV prevention and response. The forced recruitment of women and children by Boko Haram to carry out suicide attacks and reported cases of forced returns highlight the particular protection needs of women and children in northern Cameroon.
- An in-depth assessment of children's rights and child protection needs is required.
- Peaceful coexistence of refugees and impacted host communities should continue to be promoted.
- There is a need to strengthen the knowledge and capacity of humanitarian partners on international protection issues.

Enseignements Secondaires (MINESEC), partners will ensure the monitoring and supervision of pedagogical activities.

Self-reliance and livelihood support will be provided through trainings for refugees and members of impacted communities on relevant vocational skills and via income-generating activities will be provided. Humanitarian partners will also advocate for refugees' access to land, promote access to micro-finance loans, distribute agricultural kits and raise awareness. Trainings for refugees and members of impacted communities will be organized on key environmental issues such as energy efficient practices.

Partnership and coordination

UNHCR established coordination mechanisms to respond to the initial refugee influx. The increased cross-border incursions of Boko Haram resulted in internal displacement of populations living in a refugee-hosting area, and the Humanitarian Country Team (HCT) in April 2014, asked UNHCR to extend the scope of its established sector assisting and protecting refugees to also include the coordination of the response for internally displaced persons (IDPs) and their host communities. In light of its strong presence

and operational capacity in northern Cameroon, UNHCR agreed to take on this additional coordination responsibility, in accordance with the "Joint OCHA-UNHCR Note on Mixed Situations – Coordination in Practice." The High Commissioner and the Emergency Relief Coordinator have endorsed the HCT's proposal accordingly.

The coordination of the overall humanitarian response for all impacted populations in the Far North has been delegated to UNHCR's Head of Sub-Office Maroua. The Humanitarian Coordinator remains accountable for the non-refugee related response. Meanwhile, UNHCR maintains its accountability for the refugee response. All sectors are operational; each sector is led by a Government entity and co-led by one or two UN agencies. UNHCR chairs the bi-monthly multi-sector operations team meeting with all sector leads and co-leads.

HUMANITARIAN ACTORS

- ASOL Afrique Solidarité Suisse
- FAO Food and Agriculture Organization
- IEDA Relief
- IMC International Medical Corps
- INTERSOS
- IOM International Organization for Migration
- Plan International
- Public Concern
- UNDP United Nations Development Program
- UNFPA United Nations Population Fund
- UNHCR United Nations High Commissioner for Refugees
- UNICEF United Nations Children's Fund

- UN Women
- WFP World Food Programme
- WHO World Health Organization

PLANNED RESPONSE



Current situation

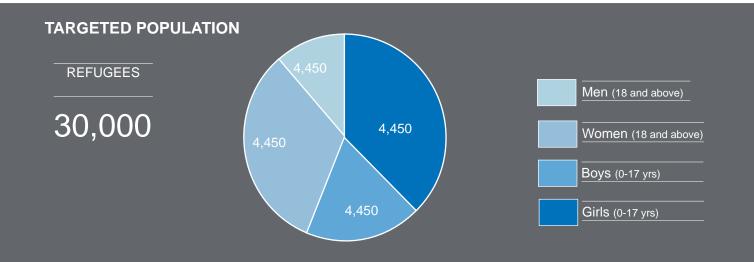
The protection context for Nigerian refugees in Cameroon remains challenging. Growing insecurity in the border zones limits humanitarian access to refugees living in communities, and refugees also face difficulties in accessing Minawao camp. There is growing distrust of refugees, freedom of movement has been restricted in some areas, and cases of refoulement have been reported. In 2015, the Government of Cameroon helped to provide security to refugee convoys and at the Minawao camp, where a transit centre was opened in July to facilitate the screening of new arrivals.

As of August 2015, over 45,000 refugees have been registered at Minawao camp and over 1,400 birth certificates have been provided through State structures. About 9,834 persons with specific needs have been identified and provided with specific assistance in the camp, including 1,188 elderly persons, 590 unaccompanied and separated children (UASC), and 447 disabled persons. Humanitarian actors also

identified and provided assistance to over 250 SGBV survivors.

In 2015, child protection coordination mechanisms were established and seven child-friendly safe spaces were constructed. A mass information campaign was organized on access to education (and 47 classrooms were constructed), leading to an increase in the number of enrolled students from around 6,000 in 2014 to over 10,000 in 2015. In addition, capacity building activities were organized on SGBV, child protection and refugee rights and protection. Humanitarian actors conducted protection monitoring in detention centres and provided legal assistance and follow up to 52 detained refugees.

Despite significant achievements, important challenges remain. Due to the ongoing insecurity, monitoring refoulement and ensuring access to asylum remains difficult. Humanitarian partners lack the capacity to meet the psycho-social support needs of all refugees, especially of women and children, who were targeted by Boko Haram militants. Child-protection mechanisms in Minawao camp lack the capacity to address the needs of the growing number of arrivals, and a number



of refugee children born in Cameroon have not yet been registered with the authorities. Due to social norms and taboos, many persons are reluctant to report SGBV incidents and seek appropriate assistance. While access to refugees in detention is granted, monitoring and follow-up of detained refugees, including children, who are suspected of having links to Boko Haram remains a challenge.

Prioritized sector needs

The prioritized needs in the protection sector include: Despite the difficult security context, the Government needs to preserve access to asylum and respect for the rights of refugees; conducting civil registration and providing documentation for refugees at Minawao camp; identifying and assisting to people with specific needs; strengthening child protection mechanisms; and enhancing SGBV prevention and response. There is a need to promote the peaceful coexistence of refugee and impacted communities and to identify and mitigate possible sources of community tension.

For refugees living outside the camp, identifying, tracking and following-up on their protection needs through systematic protection monitoring in the three departments hosting refugees (Mayo-Tsanaga, Mayo-Sava and Logone-et-Chari), and coordinating the response, especially with regard to providing assistance and psychosocial support for vulnerable people including survivors of sexual and gender-based violence and children, remain priorities.

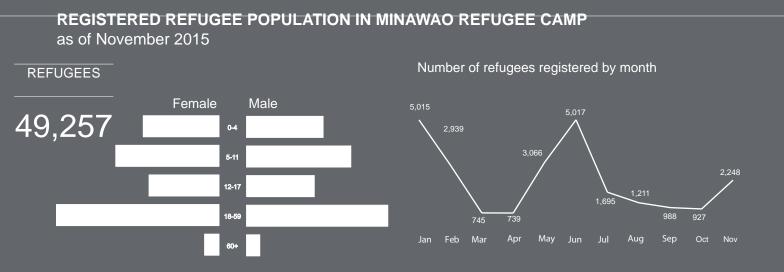
Sector response plan

The main objective of the protection response in 2016 is to enhance refugees' access to asylum and rights through strengthened cooperation and advocacy with Government authorities, including for the respect for the non-refoulement principle, and improved border monitoring mechanisms.

The civil registration and documentation of refugees will be improved and maintained through the registration and provision of identity documents to all refugees and new arrivals, including the issuance of birth, marriage and death certificates. Registration will also serve as a means to help mitigate the risk of statelessness.

Assistance provided to people with specific needs will be strengthened, including provision of appropriate assistance to the elderly, people with disabilities, and people in need of psychosocial support. In addition, humanitarian actors will advocate for the integration of people with specific needs into Government services. A system for inter-sectorial referrals will be established. Child protection will be enhanced through improved systems for identification, registration and documentation, as well as through conducting Best Interest Determinations and capacity building for actors working with children. Greater emphasis will be placed on ensuring the effective participation of children in assessments and child protection activities. In addition, humanitarian actors will engage in promoting improved access to education for refugee children and access for youth to vocational training.

SGBV prevention and response mechanisms will be strengthened through the provision of multi-sectoral assistance to SGBV survivors, optimized identification



and reporting mechanisms, awareness-raising activities and capacity building for all actors involved, as well as the promotion of access to assistance and education on a non-discriminatory basis.

Community mobilization and participation will be strengthened through the implementation of an AGDM approach, the establishment of community centres and community complaint mechanisms, and the strengthening of community conflict-resolution mechanisms. Measures to promote peaceful

coexistence and the peaceful resolution of conflicts will include conducting participatory assessments among refugee and host communities to identify potential sources of tension, conducting awareness-raising activities, and including impacted communities in targeted assistance.

OBJECTIVE: Quality of registration/profiling and issuance of legal documents is improved INDICATOR: 100% of persons of concern (PoCs) registered on an individual basis

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Registration data updated on a continuous basis	100% of registration data updated during the last year	1,143,940
Birth registration and certificate provided	100% of children registered and issued documentation under regular birth registration procedure	997,476
Issuance of ID and travel documents to PoCs supported	100% of PoCs (aged 18 and above) provided with individual protection documentation	940,393
Reception/Transit centre infrastructure established and maintained	2 reception centre buildings/structures improved or maintained	825,131

OBJECTIVE: Child protection interventions for boys and girls at risk are strengthened and harmonized INDICATOR: 100% of refugee children at risk benefit from specialized child protection services

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Targeted services for refugees children at risk of violence, abuse, exploitation and forced recruitment in Minawao camp and in host communities provided	100% of refugee children identified as being at risk are provided with targeted assistance, including psychosocial support, access to child friendly spaces, life-skills training etc.	805,000
Individual cases of UASC's are identified, documented, assisted, reunited with their families or put in foster families and monitored	80% of UASC for whom a best interest process has been initiated or completed	997,844

OBJECTIVE: Risk of SGBV is reduced and quality of response improved INDICATOR: 100% of reported SGBV survivors receive appropriate support

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Participation of community in SGBV prevention and response enabled and sustained	500 reported incidents of SGBV	275,000
Psychosocial counselling provided	960 persons receiving psychological assistance	570,000
Safe and survivor-centred SGBV procedures and coordination mechanisms functional	2 Inter-agency SOP for SGBV response agreed upon and functioning	360,000

OBJECTIVE: Services for persons with specific needs strengthened INDICATOR: 2,000 persons of concern (PoCs) with disabilities receiving support

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Specific services for PoCs with disabilities provided	2,000 persons with disabilities who receive services for their specific needs	450,000
Specific services for PoCs with psychological needs provided	1,560 reported persons with specific needs receiving psychological support	440,000
Support PoCs with specific needs provided	8,750 PoCs with specific needs receiving support	440,000

OBJECTIVE: Community mobilization and peaceful coexistence with local communities strengthened and expanded

INDICATOR: 70% of persons of concern (PoCs) are represented in leadership management structures

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
The active female participants in the leadership management structure have been strengthened	160 community members engaged in prevention of risk and incidents and response activities	400,000
Participatory approach implemented	25 participatory assessments conducted	400,000
Community self-management supported	24 community self-management structures supported	340,000
Community sensitization campaign implemented	4 community sensitization campaigns conducted	350,000

OBJECTIVE: Potential for voluntary return realized INDICATOR: 100% of persons, among the interviewed who expressed intention to return, have returned voluntarily

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Evaluation and analysis of intentions to return	4 evaluations will be conducted and will target 20,000 PoC	5,000
Return assistance provided	10 000 persons will voluntarily return	35.000

EDUCATION SECTOR

Current situation

Refugee children make up approximately 61 per cent of the more than 45,000 Nigerian refugees living in Minawao camp, as of August 2015. An estimated 22,436 children (3-17 years) are of school age, including 11,168 girls and 11,268 boys. With the violence in the North-East ongoing, and as new refugees continue to arrive to the camp, these numbers are expected to increase, with a corresponding gap in the provision of formal and non-formal education. The education systems in Nigeria and Cameroon differ, notably with regard to the language of instruction, as a French-language curriculum is taught in northern Cameroon. This said, no major problem was experienced as English speaking schools have been established for Nigerian refugee children. Minawao camp currently has one pre-school (8 classrooms). About 5,900 children aged 3 to 17 years are enrolled in pre-school, three primary schools, and in one bilingual secondary school. The rather low enrolment rate can be explained by the fact that most refugee children had either never gone to public schools back home in Nigeria or were attending Koranic schools.

Major achievements of the sector until end of August 2015 include: the construction of three primary schools (27 classrooms) with temporary materials, recognized by the Cameroonian Government; and the conversion of one secondary school (7 classrooms) into a bilingual

school by the Government. In addition, 47 classrooms intended to be permanent are under construction (8 pre-schools, 33 primary and 6 secondary). Teacher training was conducted with support of the Ministry of Education on various topics, including emergency education and pedagogy, with the participation of some 90 teachers. An accelerated training program for drop-outs and children aged 5-years old was implemented during school holidays, with support of the Ministry of Education, to prepare them to join primary school. Two early-childhood care and development centres (ECCD) were set up to enhance the health and educational status of children aged 3-5 years. Fifteen toilets and 40 hand washing facilities were put in place in three primary and one secondary school to prevent cholera. Parents and teachers associations are established and are involved in school governance as well as sensitization campaigns on the importance of education. Furthermore, the Government has deployed four teachers to the camp. The Far North Regional Authority has established sectorial working groups, which meet on a monthly basis.

Key challenges are the limited capacity of infrastructure and human resources. There is a shortage of classrooms, a high teacher/student ratio, insufficient scholastic kits and equipment such as a library or computers. Pre-school capacity is also limited, with only two ECCD and 11 tents established for child-friendly space activities. Many teachers are not teachers by profession and would benefit from further capacity development. About 62 per cent of the children

ACHIEVEMENTS AND WAY FORWARD

2015

22,436

school age children

2016

40,062

children will be in need of education

60% foreseen rate of enrollment

52% attended school

aged between 14-17 years old will not be enrolled in secondary school and may need vocational training.

Also, 92 per cent of adult population (refugees and host communities) will not have access to literacy courses as the project will target only eight per cent of the population.

Prioritized sector needs

Priority needs identified by the Education Sector Working Group are: additional classrooms to be constructed and equipped with benches, office desks, teaching materials and school supplies, etc; the recruitment and capacity-building of teachers, with the support of the Government; reinforcement of early childhood education needs; and the provision of learning and didactic materials, as well as school uniforms.

Sector response plan

In 2016, the Sector Working Group estimates that a total of 40,062 refugee children will be in need of formal education in Minawao camp. In host communities, where the school-aged population is estimated to be around 6,353 children (44 per cent), including 3,313 girls and 3,040 boys, the planned response will target around 740 students.

The main objective of the sector is to ensure optimal access to formal education including childhood, primary, secondary, and adult literacy programmes for refugees and children from the host communities. Access to education at all levels will be promoted to ensure that child rights are fully respected.

The following activities will be prioritized: pre-school activities for young children; the delivery of literacy programmes, including for adults; advocacy with public education institutions for the deployment of teachers in the camp; capacity building and training for teachers; assistance for children sitting formal exams to pay exam fees.

Constructing school infrastructures, including 50 classes for pre-school, 35 permanent classrooms for primary school and 15 permanent classrooms for secondary school, 20 ECCDs and 15 temporary learning spaces; the provision of school kits for refugee

children, impacted communities and teachers; and the monitoring and supervision of pedagogical activities with the technical support of respective ministries.

Communities will be strengthened through the promotion of post-school activities and school management committees, including with the participation of children, parents and other caretakers. The community will also be mobilized around girl's education through awareness-raising activities to promote socio-cultural practices. In order to sensitize parents to the education system, partners will work to enhance parental knowledge of early childhood care and development, and conduct education awareness-raising campaigns in the refugee camp and in host communities.

OBJECTIVE: Population has optimal access to education INDICATOR: 12,854 children attending early childhood education

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Early childhood education provided or supported	5,802 children aged 3-5 years enrolled in early childhood education	1,917,851
Primary education provided or supported	15,300 children aged 6-13 enrolled in primary education	2,344,226
Secondary education provided or supported	3,100 students aged 14-17 enrolled in secondary education	592,260
Adult education provided	3,000 persons aged 18+ participating in Literacy study	94,575

OBJECTIVE: Community is mobilized to ensure education for all INDICATOR: 73,717 girls and women with access to school thanks to community mobilization

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Measures to promote girls' education	Childcare systems facilitate 32,804 women's and girls' access to school	71,800
Community involvement promoted	30,000 persons reached by out of school outreach program	28,303

FOOD SECURITY SECTOR

Current situation

In 2015, all refugees living at Minawao camp received food assistance on a monthly basis. Presently, WFP provides a general household ration, with an enhanced nutrition micronutrient component. Over the last year, malnutrition prevention activities have been scaled up to address growing concerns. A blanket supplementary feeding programme targets all children under five and pregnant or breastfeeding mothers.

Key challenges include limited humanitarian access to the large number of refugees living in host communities which impedes the delivery of food assistance.

Prioritized sector needs

North-eastern Cameroon is facing recurrent food insecurity due to conflict, environmental degradation

and other factors. The main need, therefore, is to assist all refugees to meet their basic dietary needs. A programme and strategy to improve food security and self-reliance remains to be developed. Sector

Response plan

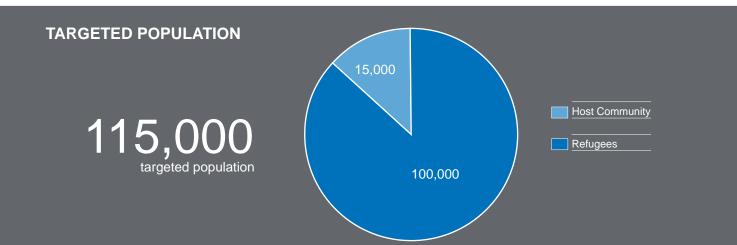
To respond to the food security needs of 100,000 refugees and 15,000 members of impacted communities, humanitarian partners will continue to provide food assistance in order to meet the basic needs of the Nigerian refugees.

During participatory consultations, refugees have requested that food assistance be continued to be given as in-kind provisions. Where feasible, appropriate and requested, cash-based interventions may be considered during the course of 2016.

OBJECTIVE: Ensure the food needs of crisis affected populations or persons of concern (PoC) through context specific responses, including food transfers or cash based transfers

INDICATOR: 115,000 people receiving food assistance on a monthly basis

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Adequate quantity and quality of food assistance provided	115,000 persons receiving food	13,303,403



HEALTH & NUTRITION SECTOR

Current situation

Providing health services and nutrition assistance to refugees in Minawao camp, and some 60,000 people from host communities around the camp, remains challenging. Epidemics of cholera, measles, malaria, meningitis and polio, among others, are recurrent.

The mobile nutritional activities provided by the integrated health centre in Gadala were extended to Minawao camp in March 2015, after a screening conducted in the camp in November 2014 revealed an acute malnutrition rate of 11.6 per cent and a severe acute malnutrition rate of 3.7 per cent. In August 2015, the level of malnutrition, although improved, remained precarious, with a global acute malnutrition rate of 7.7 per cent and a severe acute malnutrition rate of 1.2 per cent.

In 2015, a second health centre was constructed in Minawao camp. Primary health care, reproductive health care, mental health care and the referral of more complex cases to hospitals in Mokolo, Maroua and Yaounde was made available to camp residents. Between January and August 2015, partners provided a total of 24,565 consultations, 395 birth deliveries, treatment and follow up for 1,632 people with mental health issues, referred 783 more complex cases to hospitals for appropriate treatment. On average, 25 refugees are referred each week, and despite all

efforts, at least one refugee has died in care each week. Disease surveillance and epidemic response were strengthened through vaccination campaigns against measles, meningitis, cholera and tetanus, with a coverage rate of over 90 per cent for each campaign. A sector coordination system was established with the Ministry of Health that meets on a weekly basis.

To prevent malnutrition, six rounds of blanket feeding were conducted, whereby 11,189 children aged 6 to 59 months and 1,391 pregnant and lactating women received food rations. 1,102 persons with severe acute malnutrition (SAM) and 1,561 persons with moderate acute malnutrition (MAM) were admitted to programs, of whom 1,030 SAM and 472 MAM patients were rehabilitated. With regard to nutrition surveillance, more than 11,000 children were screened for acute malnutrition during the latest round of the blanket supplementary feeding programme.

One of the key challenges for the health sector is the recurrence of epidemics in Minawao camp and surrounding area. The presence of undetected malnutrition cases in the camp is also of concern.

Prioritized sector needs

The following needs have been identified by the Health and Nutrition sector: strengthened community-based health and nutrition activities (awareness raising,

SECTOR MAIN GAPS



1,2% of Severe Acute Malnutrition (SAM) rate



average of consultations per day in the health

surveillance, screening, follow-up, infant and young child feeding, etc.), including by increasing the number of community workers; rehabilitating and increasing the capacity of a health centre; constructing two new health centres to decentralize services and extend geographic accessibility, in particular for pregnant women, elderly people, people with disabilities, and malnourished children; recruiting additional medical staff (including doctors, nurses, and midwives) to strengthen the quality of health care provided; equipping the hospitals in Mokolo and Maroua, including with qualified medical and paramedical staff, as well as night-shift staff; building the capacity of health and nutrition staff working in the camp, most of whom are recent graduates with little professional experience, and training is necessary to increase staff capacity, in particular on Integrated Management of Childhood Illness (IMCI), Integrated Management of Acute Malnutritiom (IMAM), Infant and Young Child Feeding (IYCF), Emergency Obstetric Care (EMOC), mental health, management of medical emergencies, etc.

On average, 10-20 cases of anemia are registered every month, and more than 50 per cent of refugee deaths are caused by anemia. In addition to other interventions to prevent anemia and other deficiencies, there is a need for micronutrient supplementation programs to prevent deficiencies such as in iron, folic acid, and vitamin A. In order to re-assess the state of nutrition of refugees in Minawao, a comprehensive Standard Expanded Nutrition Survey (SENS) or SMART nutritional survey should be conducted in the camp.

Sector response plan

In light of the needs identified above, the main planned activities will target 80,000 refugees and 60,000 host community members as follows.

Partners will increase the reception capacity of sanitation structures in Minawao camp by rebuilding and enlarging the current health centre with the use of more durable materials. This will create a more favorable working environment and enable the implementation of the necessary global hygiene standards. In addition, new health centres will be built and equipped, including sections for the treatment of malnutrition to accommodate an expected 40 000 new refugee arrivals.

Partners will provide capacity building, including training for health, sanitation and nutrition staff, covering integrated management of childhood illnesses, the prevention and treatment of epidemic-prone diseases, the integrated management of moderate acute malnutrition, psychosocial assistance, etc. Community-based activities will be implemented to help raise awareness on the use of reproductive health services (prenatal consultations and assisted deliveries), the prevention and treatment of sexually transmitted infections and HIV/AIDS.

Activities relating to infant and young child feeding will be developed and implemented in order to help prevent malnutrition among those most vulnerable (0-24 months).

In order to help reduce the prevalence of malnutrition and other disease, awareness raising on good dietary practices, hygiene practices, campaigns will inform refugees and host community members on the use of nutritional products and the use of health facilities. Funds allowing it, partners plan to conduct a nutrition assessment in Minawao camp in order to measure the impact of nutrition programmes and progress made.

OBJECTIVE: Health status of the population improved INDICATOR: Crude mortality rate <1 (per 1,000 population/month)

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Access to primary health care services provided or supported	6 health facilities maintained equipped/constructed/ rehabilitated	2,149,119
Access to essential drugs provided	0 days of stock out of essential drugs	725,299
Capacity development supported	200 health workers trained in collaboration with MoH or other external partners	248,233
Preventative and community-based health care services provided	250 community health workers	188,000
Referral mechanisms established	100% of complicated cases of PoCs referred to secondary and tertiary medical care	188,000

OBJECTIVE: Population has optimal access to reproductive health and HIV services INDICATOR: Persons of concern (PoCs) have access to comprehensive reproductive health services

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Clinical management of rape provided	100% of rape survivors provided with appropriate and timely PEP care	25,000
Comprehensive safe motherhood services provided	8 qualified midwives/MCH staff	734,000
Preventive reproductive health and HIV services provided	100% PoCs have access to male and female condoms	118,854
Capacity development supported	75 persons trained on RH and HIV in collaboration with MoH or other external partners	34,500

OBJECTIVE: Strengthen the prevention & response to malnutrition INDICATOR: Prevalence of global acute malnutrition (6-59 months) <5%

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Appropriate infant and young child feeding practices promoted	100% of infant and young child admitted in feeding programmes targeting 0-24	529,172
Community management of acute malnutrition programmes implemented and monitored	100 new admissions to community management of acute malnutrition programmes	629,971
Capacity development supported	100% of staff trained and supplied with management tools in structures	14,000
Measures to control anaemia and other micronutrient deficiencies undertaken	Reduction in anaemia cases in children U5 in routine medical consultations	40,000

LIVELIHOODS & ENVIRONMENT SECTOR

Current situation

Refugees in Minawao camp have limited opportunities to engage in income-generating activities. Approximately 25 per cent of the refugee population were farmers in Nigeria, but access to land around the camp is very limited, and the semi-arid climate and scarce water resources make it difficult to engage in agricultural activities. Most refugees fled with few possessions, such as materials and equipment for income generation. Younger refugees are particularly vulnerable; about 16 per cent of young refugees aged between 15-24 years have no educational or work engagements, and are exposed to heightened risk of engaging in criminal activities, recruitment by armed groups, among other protection risks.

A total of 150 persons in Minawao camp were supported to develop income-generating activities in 2015. However, the need to strengthen economic activities far exceeds the current capacity, with only one humanitarian partner working on increasing the self-reliance of affected populations. Similarly, while some 160 young students were enrolled in vocational skills training, including carpentry, masonry and sewing, in 2015, this number is far from meeting the need for vocational training for refugees and members of impacted communities identified in 2015.

Significant challenges remain. Access to water and agricultural land is so limited that farming can only take place on a very small scale. This situation also affects members of the impacted communities around the camp. Although a daily market exists next to the camp, refugees lack the financial means to start a business. Security concerns in the Far North, including restrictions on the movement of refugees, limit the ability of Minawao camp refugees to work outside the camp.

Moreover, firewood is often not available and the exploitation of natural resources is a source of tension between refugees and the host communities. Refugee women are often not aware of efficient and environmental energy sources or methods, and tend to use traditional methods that consume high levels of energy. A small number of fuel-efficient stoves were provided to 500 women, and tree planting is planned to mitigate further desertification of the camp area, but this will not serve as an energy source for domestic use.

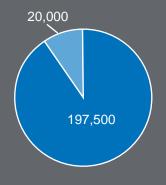
Prioritized sector needs

The following needs identified by the Livelihood and Environment sector can be summarized as follows.

The diversification of agricultural activities (crop production, livestock, agro-forestry) and the identification of viable value chains (e.g. processing of agricultural products) need to be strengthened. Furthermore, refugees need to be enabled to do commerce and get access to markets and to financial services.

SECTOR PRIORITIES

environment activities



persons will have access to agriculture, livestock or fisheries



A livelihoods strategy to improve food security and self-reliance, which includes agriculture, livestock and vocational training, needs to be developed. Partners need to invest in vocational training for youth, create opportunities for employment, and reduce protection risks.

Small-scale agriculture and livestock activities for families with malnourished children need to be enhanced, in order to improve dietary and nutritional practices, and enable refugees to supplement their daily food rations. Energy-saving measures, such as the use of fuel-efficient stoves, need to be promoted.

Sector response plan

The main objective of the sector response in 2016 is to improve the self-reliance and livelihoods of Nigerian refugees living in northern Cameroon, and to ensure they have sufficient access to energy. In 2016, the sector plans to support 80,000 refugees in camps and 20,000 refugees living outside the camp. The main planned activities can be summarized as follows.

The humanitarian community will advocate for the allocation of plots of land to refugees. If refugees

are not granted free access to land, then they will be encouraged to contract land loans with the local communities. Agricultural kits and inputs will be distributed.

RRRP partners will construct and equip vocational training centres and provide training for trainers on carpentry, masonry, sewing and agricultural processing, as well as on the promotion of income generating activities.

Vocational skills training activities will target around 15 per cent of refugees and members of impacted communities. Training on various methods of conflict mediation will be held. Partners will also conduct socioeconomic assessments to enable refugees to identify business opportunities and promote their access to micro-finance loans.

Meanwhile, refugees and impacted communities will benefit from awareness-raising sessions on reforestation, and training on how to produce energy-efficient stoves. Environmental activities, mainly providing access to energy, will target approximately 15 per cent of refugee and impacted community households. Partners will also engage in promoting agro-forestry.

OBJECTIVE: Self-reliance and livelihoods improved INDICATOR: 70% of beneficiaries are self-reliant

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Access to agriculture/livestock/fisheries facilitated	2,500 persons receiving production kits or inputs	1,562,523
Vocational training/technical skills provided	3,000 persons trained	750,000
Financing of income generating activities (IGA)	3,500 IGA financed	981,318

OBJECTIVE: Population has sufficient access to energy INDICATOR: 100% of persons of concern (PoCs) have access to energy

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Training and distribution of fuel efficient stoves to the refugees and communities	3,000 persons receiving improved stoves provided	1,882,020
Organization of campaign to plant one tree for each refugee family	10,000 trees planted by refugee and host community families following campaigns	1,627,191



Current situation

Minawao camp is operating beyond its capacity, and the number of new arrivals to the camp continues to grow. Since the camp first opened in 2013, the population has grown from 7,000 in December 2013, to 21,169 in December 2014, and 45,959 refugees (12,308 households) in September 2015. Approximately 63 per cent of camp residents are under 18 years of age, and 53 per cent are women. Humanitarian actors have mobilized efforts to provide shelter and NFI assistance, but the camp capacity is severely overstretched.

During 2015, the Cameroon government has made 319 hectares available to UNHCR for the reception of refugees. In 2015, 3,500 family shelters were constructed in Minawao camp, 1,648 family tents were installed, and 31 community shelters were constructed. In addition, humanitarian actors conducted one general distribution of NFIs in 2015.

Key challenges include the limited capacity of Minawao camp, which does not provide adequate shelter and NFIs for the average 100 to 200 new arrivals per week. Access routes to the camp are in very poor condition (Zamai-Minawao) and the camp lacks internal roads. This hampers the movement of refugees in the camp, in particular children, who face difficulties to get to school when it rains. Emergency family shelters are being used as transitional shelters. The construction of new emergency family shelters and the expansion of the current absorption

capacity remains a challenge. However, among the biggest challenges of the Shelter sector is the difficulty to access construction materials; wood and other materials need to be transported from Bertoua, 1,000 km south-west of the city of Maroua.

Prioritized sector needs

The planning figure for 2016 mounts to 80,000 refugees in the camp. According to assessments conducted in 2015, the priority needs for the Shelter and NFIs sector are the construction of 35 kilometers of access roads to Minawao camp and the building of internal roads and watercourse crossings. With Minawao camp operating far beyond capacity, together with the Government and partners, UNHCR will continue to explore opportunities to decongest the existing camp and to increase the absorption capacity for newly-arriving refugees.

An estimated 40,000 new arrivals will need assistance with emergency shelter, requiring the construction of about 11,250 new emergency shelters. In addition, the accommodation of the current camp population will have to be improved and transitional shelters provided. The latter will be made of local materials, which will increase thermal isolation and are better adapted to the Sahelian context. Further, 3,000 transitional shelters will be constructed for vulnerable households, while 6,000 households will be assisted with shelter materials (wood, nail, tarpaulin for roofing, etc.) to build their own shelter. Some 1,000

SECTOR PRIORITIES



21,250
Households will receive a transitional or emergency shelter



communal shelter toolkits will be provided to support the rehabilitation and repair of damaged shelters. Apart from housing issues, the capacity of distribution centres needs to be expanded. Community centres will be constructed and recreation spaces for children equipped.

Refugees require NFIs, in particular additional clothing and shoes for children to attend school, and 22,500 NFI kits will be required.

Sector response plan

The sector response in 2016 will target Nigerian refugees living in Minawao camp, a population that is expected to reach 80,000. The main goal of the shelter and NFI response in 2016 is to build, improve and maintain shelter and other infrastructure, including an access road to the camp, and to ensure the refugee population has sufficient basic and domestic items.

The main planned lines of action and activities can be summarized as follows: some 11,250 emergency shelters and 3,000 transitional shelters for vulnerable households will be constructed; some 6,000 transitional shelter kits and 1,000 shelter construction tool kits will be distributed, using a community-based approach; about 35 kilometres of access roads to Minawao camp will be constructed; and a total of 22,500 NFI kits will be distributed.

OBJECTIVE: Shelter and infrastructure established, improved and maintained INDICATOR: 100% of persons of concern (PoCs) with adequate shelter

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Emergency shelters provided	11,250 emergency shelters provided	2,338,535
Transitional shelters provided	3,000 transitional shelters provided	797,313
Shelter materials and maintenance tool kits provided	6,000 shelter materials and 1,000 tool kits provided	721,667
Access road constructed, repaired and maintained	35km of access road constructed	248,055

OBJECTIVE: Population has sufficient basic and domestic items INDICATOR: 80% of households whose needs for basic and domestic items are met

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
NFI kits provided	22,500 households receive NFI kit	5,232,961



WATER, SANITATION & HYGIENE SECTOR

Current situation

Minawao camp is located in a zone with crystalline bedrock and limited groundwater. The capacity of refugee camps in a sub-Saharan environment should be between 10,000 and 20,000 persons in order to limit the exhaustion of local water resources, and contain any disease outbreaks or other situations that may place at risk surrounding impacted communities. The establishment of a second camp would provide a solution. Access to water remained a challenge and the continuous arrival of refugees to Minawao camp in 2015 placed significant strain on the camp's WASH infrastructure.

Despite these conditions, humanitarian partners were able to provide an average of 14 litres/person/day of water obtained from 32 boreholes and water-trucking, which is less than the non-emergency standard of 20 litres. By end of August 2015, humanitarian partners had constructed 37 water points, providing an average 283m3/day, and complemented by water trucking for an average 384m3/day. With regard to sanitation, as of August 2015, Minawao camp had 2,437 latrines, with a ratio of 20 persons/latrine, and 762 showers, with a ratio of 36 persons/shower. In addition, Minawao camp had 34 waste pits, with a ratio of 1,326 persons/waste pit, and 600 waste bins, with an average 20 households/waste bin (the standard is one waste bin per 10 households).

Hygiene promotion remained a challenge in 2015. Some 105 trained hygiene promoters conducted mass awareness-raising campaigns and household visits, with an average 429 persons per auxiliary. The increasing number of refugees in the camp impacted the planning of activities, as well as the behavioral changes needed to ensure good hygiene practices. Following a cholera outbreak in the impacted communities around the camp, humanitarian actors quickly developed key messages for raising community awareness, in order to prevent an outbreak in the camp. Impacted communities share their boreholes with the refugees who are living in the community. Existing sanitation infrastructure was constructed without the participation of target communities, which led to difficulties in maintaining the infrastructure, in particular the communal latrines. Awareness-raising efforts in this regard toward the end of 2015 had little impact.

Prioritized sector needs

The needs in the WASH sector can be summarized as follows: In order to meet water needs aiming at providing 20 litres/person/day in Minawao camp and its possible new extension, the supply of water will have to be increased. UNHCR, the Government of Cameroon, and partners have reached an agreement to construct a permanent water supply system, which will piping water from a river near Mokolo to the camp and surrounding

ACHIEVEMENTS AND WAY FORWARD IN MINAWAO REFUGEE CAMP



2015

14 liter/person/day

31 boreholes

37 water points water trucking



2016

20

liter/person/day

77 boreholes

37 water points

1 water system

villages. There is also a need to ensure the quality monitoring of the groundwater, the maintenance of the existing infrastructure, and the strengthening of the water point management committees.

With regard to sanitation in Minawao camp, an estimated 6,302 latrines need to be constructed, including 3,802 family latrines and 1,500 emergency latrines for new arrivals. An estimated 6,424 showers separated from the latrines need to be provided.

Regarding waste management, an additional 146 waste pits need to be constructed and 1,200 new waste bins provided. Furthermore, there is a need for hygiene promotion and hygiene kits.

Sector response plan

The sector response plan will target 100,000 refugees and 20,000 host community members. For refugees living in the host community, the sanitation response will be based on a community-led total sanitation approach. In 2016, the sanitation strategy will include the implementation of the following activities: Access to water will be improved through the provision of two drinking water supplies, the construction of a

permanent water supply system and the rehabilitation/maintenance of 77 boreholes in order to ensure a ratio of 20 L/day/person. Emphasis will be placed on quality monitoring of the groundwater, the maintenance of the infrastructure, and the strengthening of the water point management committees. If additional sites are made available in in 2016, water will first be provided using emergency supply and facilities, which will then need to be replaced progressively with transitional facilities.

Partners will construct 6,302 family latrines to ensure a ratio of fewer than 10 persons per latrine, as well as 6,424 showers to ensure a ratio of fewer than 20 persons per shower. The family latrines will be built in elevation to avoid the risk of upwelling during the rainy season. Beneficiary households will participate in the construction of the latrines. The process launched in 2015 of closing the former emergency latrines will continue in order to enable a transition to family latrines and to ensure complete coverage of latrine needs. Some 102 latrine stalls will be constructed (34 blocks) for use by schools both in the camp and in the impacted communities. All school instructors will be trained in hygiene promotion in schools. In addition, schools will receive material support enabling them to implement the government's scholastic action plans.



A solid waste-management strategy will be established, including the separation of biodegradable and non-biodegradable waste. Waste management will be further improved through the construction of waste pits, provision of waste bins and the establishment of hygiene management committees.

With regard to hygiene promotion, the 2015 ratio of one hygiene promoter per 500 persons will be maintained. Additional hygiene promoters will be employed, trained and equipped for awareness-raising activities on hygiene practices. Humanitarian actors will organize

52 hygiene days (one per week) and 12 mass campaigns (one per month). In addition, 24,000 hygiene kits will be distributed, to reach all 80,000 refugees in Minawao camp, the 20,000 refugees living in the community, and 20,000 members of the impacted communities. Kits will include two towels, two packs of sanitary napkins, one bar of soap, on bucket, and one jerry can.

OBJECTIVE: Supply of potable water increased or maintained INDICATOR: 20 litres of potable water available per person per day

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Refugees and host community have daily access to potable water systems	Water piping systems constructed and maintained	2,287,484

OBJECTIVE: Population lives in satisfactory conditions of sanitation and hygiene INDICATOR: 10 persons per latrine

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Increased access to sanitation	6,302 households who have benefitted of family toilets	804,160
Showers are constructed and accessible to refugees	6,424 showers constructed	521,200
Waste management is ensured through the construction of community and family waste pits	166 community waste pits constructed	26,560
	1,400 garbage cans distributed	

OBJECTIVE: Hygiene behaviour among persons of concern (PoCs) is improved INDICATOR: 1 hygiene promotor per 500 persons

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Mass awareness campaigns are organized and conducted	64 day-long mass awareness campaigns conducted	142,000
Hygiene kits are distributed to the PoCs	24,000 hygiene kits distributed	1,176,388
Hygiene promoters are properly trained to ensure timely and right messages passed to the PoCs	240 hygiene promoters trained	385,920

FINANCIAL REQUIREMENTS

by Agency & Sector

ORGANIZATION	PROTECTION	EDUCATION	FOOD SECURITY	HEALTH & NUTRITION	LIVELIHOODS & ENVIRONMENT	WASH	SHELTER & NFI
ASOL							433,427
FAO					400,000		
IEDA Relief							50,000
IMC	273,764						
INTERSOS	820,478						
IOM	500,000						
PLAN INTERNATIONAL	276,500	1,734,589		447,000	300,000	1,724,049	560,586
Public concern		100,103					
UNDP					400,000		
UNFPA				458,500			
UNHCR	5,079,014	2,150,824	833,588	3,943,434	5,040,530	7,614,482	3,236,439
UNICEF	1,349,028	1,063,499		942,216			1,063,260
UN Women	1,476,000						
WFP			12,469,815	414,604	662,523		
WHO				543,000			
Total	9,774,784	5,049,015	13,303,403	6,748,754	6,803,053	9,338,531	5,343,712

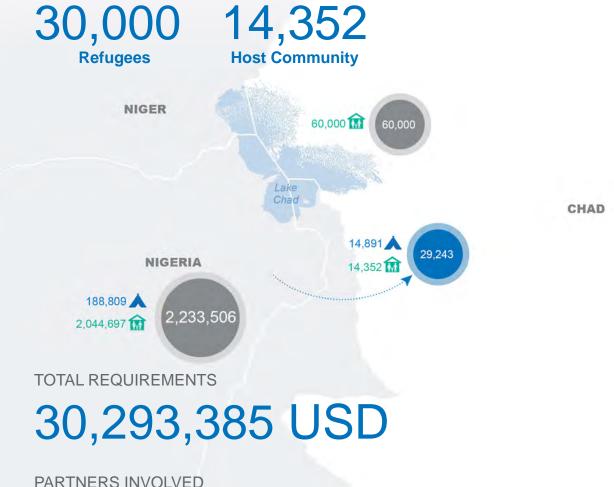
by Agency

ORGANIZATION	TOTAL REQUIREMENTS (USD)
ASOL	433,427
FAO	400,000
IEDA Relief	50,000
IMC	273,764
INTERSOS	820,478
IOM	500,000
PLAN INTERNATIONAL	5,042,724
Public concern	100,103
UN Women	1,476,000
UNDP	400,000
UNFPA	458,500
UNHCR	27,898,311
UNICEF	4,418,003
WFP	13,546,942
WHO	543,000
Total	56,361,252

CHAD REFUGEE RESPONSE PLAN

STRATEGIC OVERVIEW

TARGET POPULATION



AFRICAN REPUBLIC

CAMEROON

TOTAL NUMBER OF REFUGEES (AS OF OCT 2015 - UNHCR) TOTAL NUMBER OF IDPs (AS OF OCT 2015 - IOM DTM VI)

PEOPLE LIVING IN AND OUT OF CAMPS

MAIN PRIORITIES PEOPLE LIVING IN HOST COMMUNITIES

Consolidate protection for Nigerian refugees, in particular physical protection and response to vulnerabilities:

- Civil registration and documentation will be provided
- SGBV prevention and response will be strengthened
- Child protection measures related to identification and monitoring will be enhanced

Support the transition from emergency response to better deliver basic services and self-reliance of refugees:

- Basic services will be reinforced, and existing structures will be maintained and improved
- Livelihoods/self-reliance support to integrate refugees into national developmental programmes will be provided.

COUNTRY OVERVIEW

Introduction

Background

In the first half of 2015, increasing numbers of refugees, fleeing attacks by Boko Haram insurgents in northern Nigeria, sought safety in the Lake Region of Chad. By September 2015, Chad was hosting some 18,000 Nigerian refugees, including approximately 7,600 in the Dar Es Salam refugee camp in Bagasola. During the year, Chad experienced deadly insurgent attacks and suicide bombings in the Lake Region and in N'Djamena. In response, the Government of Chad deployed military forces to the Lake Region, which led to the displacement of about 48,000 Chadians between July and August 2015.

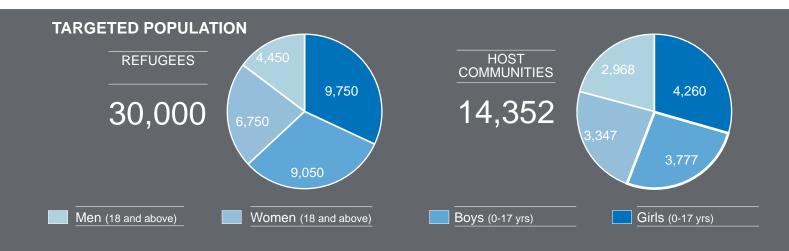
The Lake Region in Chad is characterised by an extremely harsh natural environment, poor infrastructure, and poor service delivery. Food production and livelihood activities, such as fishing, are now severely limited by insecurity. Livestock mortality is rising, making access to food increasingly difficult for the primarily pastoral communities. In addition, rising inflation is further compounding the loss of purchasing power. Poor crop production is forecasted for 2016 as a result of displacements. Furthermore, the concentration of populations in certain areas, as well as poor sanitation in make-shift settlements, makes these areas susceptible to epidemic outbreaks.

There is an urgent need to support refugees and impacted communities. In close consultation with local authorities and the Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés (CNARR), the RRRP plans to assist 30,000 refugees and 14,352 host community members in 2016.

2015 Achievements

The main achievements of the operation include:

- Refugees' access to the territory and their registration was ensured.
- Identification and temporary care arrangements for 176 unaccompanied and separated children were put in place.
- Shelter was provided to 1,144 refugee households, including 300 vulnerable refugees with specific needs.
- Basic health care and education services, and basic domestic items, were made available to refugees and the impacted host communities in Dar Es Salam camp, the villages of Ngouboua and Tchoukoutalia, as well as in Bagasola.
- Water and sanitation infrastructure was established in the camp, including the construction of 21 wells, and eight water management committees were established. As a result, the water supply of the camp is guaranteed with availability of 43 litres/person/day.



2015 Challenges

The key challenges for the refugee response can be summarized as follows:

- Humanitarian access to refugees is challenged by logistical constraints and insecurity. Many refugees are living on the islands dispersed throughout the Lake Chad, which are the least accessible areas in the country. Communication with refugees in these areas is difficult. Moreover, general insecurity due to Boko Haram insurgency led to restriction of movements of humanitarian actors and prevents protection monitoring and relocation of refugees to the camp. It also poses a challenge for the physical security of refugees.
- Furthermore, to respond to the current security situation in the Region, the Government has placed movement restrictions, which challenge key livelihoods activities self-reliance programmes.
- The continued internal displacement of Chadians from islands of the Lake Region to Bol and Bagasola districts further challenges the operation. These internally displaced people (IDPs) also need humanitarian assistance, while the capacity to respond is limited. The Government has requested the support of the Humanitarian Country team (HCT) in assisting these populations.

Identified needs

Data collection, registration and documentation of refugees must be maintained, while emphasis is placed on the physical protection needs of impacted populations. The current limited mechanisms for sexual and gender-based violence (SGBV) prevention and response should be enhanced, and child protection activities need to be strengthened through initiatives including best interest determination procedures, the establishment of community-based child protection networks, effective monitoring of children at risk, and improving recreational activities for children.

The capacity of the Chadian Government to ensure basic services for refugees is very limited. Additional classrooms need to be constructed and additional trained teachers recruited to improve access to quality education. Health facilities at the village level and secondary health care at district hospitals need to be enhanced with qualified personnel, medical equipment, technical support, essential drugs and supervision. Also, the management of severe and moderate acute malnutrition needs to be optimized, and emergency and routine vaccination programmes should be strengthened. In the WASH sector, regular maintenance of water systems is paramount while additional latrines



have to be constructed. Furthermore, there is a need for regular hygiene campaigns. In the Shelter sector, partners are planning a shift from transitional shelter to more durable shelters.

To enhance food security, refugees need increased access to farmlands and other livelihoods opportunities. Entrepreneurial and skills training, as well as access to financial services, need to be strengthened.

Strategic overview for the response

The main cross-cutting strategic and prioritized objectives, and their respective interventions, for the refugee response in 2016 will be:

Consolidate protection for Nigerian refugees, in particular physical protection and response to vulnerabilities

Civil registration and documentation, including the provision of ID cards and birth certificates, will be ensured.

SGBV prevention and response such as training and awareness raising, as well as support services to SGBV survivors, will be provided.

Child protection measures related to identification and monitoring of, and multi-sectoral assistance to, children at risk, and to prevent exploitation and violence, especially for refugee girls, will be put in place.

Support the transition from emergency response to better deliver basic services and self-reliance of refugees

Basic services will be reinforced and efforts will be made to maintain and improve existing structures, and to establish new infrastructure to assist the increased number of people needing basic services in the area. Humanitarian actors will endeavor to provide drugs, equipment and staff to existing health and educational structures, and provide capacity building. Further, WASH infrastructures and more durable shelters will be constructed or rehabilitated.

Livelihoods/self-reliance support and advocacy with the Government and development partners to progressively integrate refugees into existing national developmental programmes will be provided.

Partnership and coordination

UNHCR will continue to collaborate with the Government through the *Commission Nationale* pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés (CNARR), to coordinate the refugee response. Response partners include the participation of UN agencies, and international and national non-governmental organizations. CNARR will also continue to serve as a link between UNHCR and line Ministries. In N'Djamena, UNHCR will continue to lead coordination meetings with partners every two months, and two times a week in Bagasola, with the participation of local authorities. Sector coordination meetings (sector working groups) in the refugee situation in the Lake Region will also continue to be held in N'Djamena and in Bagasola, with UNHCR as the lead agency.

UNHCR's coordination role also includes conducting participatory needs assessments, based on its Age, Gender and Diversity (AGD) policy, and with the participation of refugees and partners to facilitate a full analysis of priorities and gaps, and harmonized approaches to interventions, implementation, monitoring and reporting of activities.

PLANNED RESPONSE



Current situation

Refugees fleeing attacks by Boko Haram elements in north-eastern Nigeria are able to access asylum in Chad. Protection activities have been implemented for 7,600 refugees living in Dar Es Salam refugee camp, for refugees living in impacted communities such as Ngouboua and Tchoukoutalia, and for members of impacted communities. Of concern to humanitarian partners is the potential security risk posed by Boko Haram, despite a huge presence of military in Bagasola and around the Dar Es Salam refugee camp, as military forces continue their operations against the insurgents. Dar Es Salam camp is also susceptible to child and youth recruitment by insurgents, such as Boko Haram.

Dar Es Salam camp was established at the end of 2014. Refugees have been transferred from their location of arrival to the camp on a voluntary basis. They are registered in the camp and provided with family certificates that entitle them to multi-sectorial assistance, including education and health services,

shelter, food and water and sanitation infrastructures. A system has been set up to ensure continuous registration.

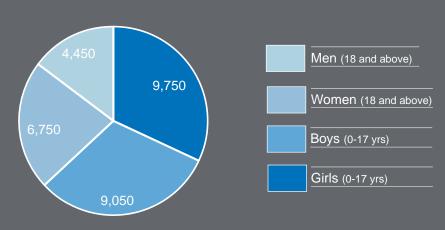
Children at risk are identified through a variety of different channels, including through community-based mechanisms. However, there is a gap in the follow-up and monitoring of these children. One child-friendly space has been established in Dar Es Salam camp, which offers age and gender appropriate activities to children after school-time, a protective space for the identification of children at risk, as well as a referral system to mental health and psychosocial support. MSF Suisse provides trauma counselling in the camp, specifically for survivors of sexual violence and survivors of Boko Haram attacks, to help victims to reintegrate into society.

Limited humanitarian access in certain areas hampers border monitoring, the relocation of refugees in these areas to the camp, and interventions to ensure access to asylum, where necessary. Moreover, a shortage of humanitarian actors hinders an effective sexual and gender-based violence (SGBV) prevention and

TARGETED POPULATION

REFUGEES

30,000



response, and community mobilization remains weak. Children are exposed to the risk of mines and recruitment by armed elements. Adequate recreational activities cannot be provided to adolescents, who are often left on their own and exposed to greater risk of adopting negative coping mechanisms.

Prioritized sector needs

The following key protection needs have been identified:

Civil authorities need capacity building for civil registration and documentation, in particular for the issuance of birth certificates to children, and data collection. Continuous training for military personnel, police and public servants on international protection and UNHCR's mandate is required.

Mechanisms for SGBV prevention and multi-sectorial response, for example to ensure legal assistance and social reintegration of SGBV survivors, have to be strengthened. Community mobilization and empowerment is required to increase the capacity of refugees to protect persons with specific needs. Mechanisms for the identification, documentation, tracing and referral of children at risk as well as the response to the needs of these children are in place, but need to be strengthened, in particular to ensure Best Interest Determination and community-based child protection. More child-friendly spaces should be established. Given the presence of armed elements in Chad, the civilian and humanitarian character of the camp needs to be maintained.

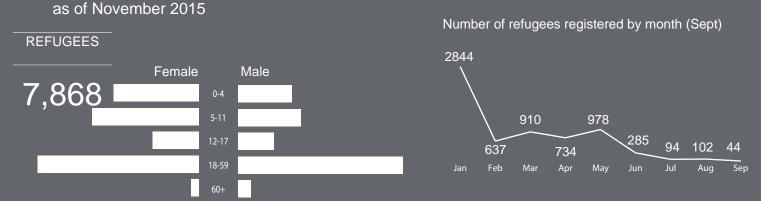
Sector response plan

The sector response includes the following activities: RRRP partners will advocate with the Government to maintain the civilian character of the refugee camp. The Government has informed UNHCR that Dar Es Salam camp shall be relocated away from the ongoing military operations, in order to guarantee security for persons of concern (PoCs) and humanitarian actors. Discussions with the Government are ongoing. Trainings and workshops on international refugee law and protection will be organized for the military corps, police and partners to inform them about different concepts, including the rights and responsibilities of refugees and asylum-seekers, responsibility of actors, and the principle of non-refoulement.

Together with the Government, partners will maintain a mechanism for the continuous individual biometric registration and documentation of refugees, including birth registration and the issuance of birth certificates. This will contribute to the identification of protection needs, including people with specific needs, who will be assisted by RRRP partners and communities.

To prevent SGBV, the protection sector will conduct SGBV training and awareness raising for all stakeholders. Moreover, they will ensure multi-sectorial assistance to SGBV survivors and respective case data management. To ensure the protection of children, RRRP partners will work to proactively identification, document, trace, and assist children at risk. This will include the establishment of Best Interest Determination procedures. Partners will continue to strengthen community-based mechanisms for child protection and case management.

REGISTERED REFUGEE POPULATION IN DAR ES SALAM REFUGEE CAMP



To enhance community empowerment, community mobilization will be strengthened, including by supporting leadership and management committees. Community-based protection will be used in key areas such as SGBV prevention and response, birth registration, mine risk education and the maintenance

of the civilian and humanitarian character of the refugee camp. Peaceful coexistence between refugees and host communities will be promoted through awarenessraising initiatives.

OBJECTIVE: Services for persons with specific needs strengthened.

INDICATOR: 100% of persons of concern (PoCs) with specific needs receiving support

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Specific services for persons with disabilities provided	350 PoCs with disabilities receiving specific support	100,000
Services mainstreaming inclusive approach at community level	2,700 people benefiting of services and associations targeting persons with disabilities	50,896
Sensitization and advocacy conducted	12 awareness raising campaigns and advocacy conducted	30,000

OBJECTIVE: Community mobilization strengthened and expanded INDICATOR: 70% of PoCs are represented in leadership management

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Community self-management supported	10 community groups supported; 10 community self-management structures strengthened	100,000
Mine Risk Education	7,308 persons benefiting from mine risk education	22,448

OBJECTIVE: Risk of SGBV is reduced and quality of response improved INDICATOR: 100% of reported SGBV survivors receive appropriate support

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Multi-sectoral assistance (legal, medical, psycho social, security, socio economic reintegration)	80 reported SGBV incidents for which survivors receive assistance (medical, psychosocial, security, socioeconomic reintegration)	250,000
Participation of community in SGBV prevention and response enabled and sustained	3,000 people reached though SGBV awareness raising campaigns	50,000
Capacity development supported	3,000 persons trained	50,000
Data management and reporting	1,778 cases updated in the system	50,000

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OBJECTIVE: Quality of registration/profiling and issuance of legal documentation is improved INDICATOR: 100% of persons of concern (PoCs) registered on an individual basis

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Birth registration and certificates provided	2,300 children registered and issued documentation under regular birth registration procedure	396,054
Individual registration with a set of minimum data maintained and updated	100% of refugees biometrically registered	300,000
Registration data updated on a continuous basis	A mechanism of continuous registration established	163,404
Data management and reporting	1,778 cases updated in the system	50,000

OBJECTIVE: Protection of children strengthened
INDICATOR: 50% of unaccompanied and separated children (UASC) for whom a best interest process has been initiated or completed

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Provision of psychosocial activities for children in child friendly spaces (CFS)	1,500 children reached with psychosocial support through CFS; 4 CFS established	650,000
Best Interest of the Child procedure established for the identification, documentation, response, tracing and reunification of unaccompanied and separated children (UASC)	177 UASC identified (disaggregated by UAM, SC, girls and boys); 50% of UASC for whom a best interest process has been initiated or completed; 50 UASC placed in alternative care arrangements (foster family or centre-based care) and who benefited from follow-up; 40 UAM reunified with their biological families and who benefited from follow-up	466,727

EDUCATION SECTOR

Current situation

Currently, 60 per cent of the Nigerian refugee population in Chad are children of school age. According to refugees population statistics, the 5-11 age-group comprised 1,535 children (769 girls, 766 boys) and the 12-17 years old comprised 785 children (339 girls, 446 boys) as of 31 August 2015.

A survey conducted in February 2015, covering 483 households, revealed that 81 per cent of 539 children aged 6 to 11 years never attended school, some had studied for one year, and others stopped in class 2 in their country of origin. During the 2014/2015 school year, school facilities in the Lake Region were almost non-operational, with more than 24 local schools in the region closed as a result of insecurity. In Dar Es Salam, two temporary primary schools, each with 16 classrooms, have been built. There are 16 community teachers and four refugee auxiliaries, and only four of the teachers are trained.

To address this situation, UNHCR, in collaboration with the local educational authorities, Inspecteur Pédagogique de l'Enseignement Primaire, has been working to strengthen the formal education infrastructure. Two schools, Espoir 1 and Espoir 2, have been established. About 20 community teachers, including four refugees, were recruited. At the outset of

the emergency, 16 Temporary Learning Spaces were constructed to enroll children. A school canteen was opened to encourage children to attend school. As a result about 1,134 students (435 girls and 699 boys) were enrolled and completed the school year in the French-Chadian curriculum.

The main challenges for the education sector are the already poor education infrastructure in the refugee-hosting area, as well as insufficient teachers and inadequate learning materials. Moreover, fishing is often prioritized over sending children to school, to complement food assistance provided by the humanitarian community.

Prioritized sector needs

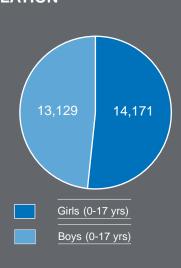
The main needs in the education sector have been identified as follows: There is a need for additional schools and classrooms. More teachers have to be recruited and trained to contribute to quality education. There is a strong need for monitoring and management of educational activities, and to support community teachers through monthly contributions. Awareness-raising to inform parents of the importance of education is also needed to increase enrolment and maintain school attendance.

TARGETED POPULATION

18,800

HOST COMMUNITIES

8,500





81% of refugee children never attended school in Nigeria

Sector response plan

Interventions will target refugee children and children living in host communities. The plan will focus on enhancing access to education for school-aged children to pre-school, primary, post-primary, basic non-formal education, as well as on functional literacy programmes.

School facilities will be constructed to replace the temporary structures established during the emergency phase of the response. The new classrooms will be equipped with desks, benches and learning materials such as text books, pens/pencils, exercise books/ slates will be distributed to children. For refugees older than official school age (older than 13/14 and younger than 17), literacy courses as well as vocational training (sewing, carpentry, gardening, mechanics) will be offered.

New teachers will be recruited in addition to the ones already engaged. Partners will advocate the Ministry of Education to deploy trained community teachers and engage school inspectors to assess learning and teaching standards, and to ensure that the pupil/teacher ratio is within acceptable levels. Newly-recruited teachers will receive continuous training, teaching guides and material.

Community members will be sensitized to promote peaceful coexistence and social cohesion to reduce the risk of communal conflicts. Members of parent teacher associations will be trained to assist local school authorities and participate in the improvement of the school and classroom environment, which will also help to instil a sense of ownership.

OBJECTIVE: Population has optimal access to education INDICATOR: 70% of primary school-aged children enrolled in primary education

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Educational infrastructure constructed, improved or maintained	38 educational facilities constructed or improved	831,198
Primary inclusive education provided or supported	2,500 children enrolled in primary education	875,448

OBJECTIVE: Quality of education is improved INDICATOR: 70% of educational facilities constructed or improved

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Measures to improve primary education quality and learning achievement implemented	4,800 manuals and kits (reading, maths, science) distributed to students; 22 teachers (10 female, 12 male) enrolled in on-going inservice training leading to teacher certification; 129 teachers' guides, pedagogic kits distributed	217,880
Peace education capacity building conducted	2,500 students and 22 teachers trained in peacebuilding	100,000
Basic non-formal education centre constructed	1 centre constructed	20,000
Functional literacy (income generating activities-based)	500 women completed literacy classes	10,000

FOOD SECURITY SECTOR

Current situation

Nigerian refugees arrived in a fragile and impoverished part of Chad, with limited resources and services. The original plan was to provide voucher-based assistance to up to 10,000 refugees and 2,000 host community members, as the area of arrival is normally a surplus-producing area with well-functioning markets. However, at the onset of the situation, prices were increasing sharply due to impacts of security restrictions, closure of borders and a poor irrigated/ recessional harvest. Restraints on trade and other economic activities such as fishing further reduced the purchasing power of the local population.

Moreover, the site assigned to host the refugees, turned out to be located in an area with limited services and livelihood opportunities. As a result, the implementation of cash-based transfers was delayed, and commodity-based assistance was implemented.

There were significant fluctuations over time in the number of refugees, with significant movements into and out of the camp at different times. The number of refugees present for food distributions at Dar Es Salam exceeded 5,000 people only twice, confirming the movement of refugees. In general, refugees at Dar Es Salam have received a full ration.

WFP meets immediate food requirements by purchasing cereals locally within Chad. In 2015, some 2,000 mt of cereals were purchased from farmers

associations in the maize-producing areas in Logone and Mandoul, a 10-fold increase over previous purchases from these areas.

This was critical to being able to meet the needs of the refugee population, given the weakness of the cereal pipeline and the time required for international purchases.

Prioritized sector needs

The identified needs for the food security sector are as follows: In 2016, there is still a need for monthly food distributions, including in Dar Es Salam refugee camp, as refugees and impacted populations will not be able to cover their most basic nutritional needs by themselves. Furthermore, a survey is required to collect refugees' views on cash and voucher assistance.

Sector sesponse plan

In 2016, the main objective of the food security sector is to continue ensuring the food needs of affected populations through context-specific modes of delivery. Monthly food distributions in Dar Es Salam refugee camp will continue for 5,000 people, amounting to 71 tons per month. In total, 30,000 refugees will be targeted in the camp and host communities.

SECTOR RESPONSE AT A GLANCE



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Furthermore, a survey will be conducted to collect refugees' views on the implementation of a cash and voucher assistance modality in the camp.

While a food security assessment carried out in March 2015 found that the current market conditions made implementation of cash-based assistance problematic, the situation has since evolved. The private sector has been bringing in cereals from other parts of the country.

As a result, cash-based transfers for the refugee population will be implemented on an experimental basis in 2016.

OBJECTIVE: Ensure the food needs of crisis affected populations or persons of concern (PoCs) through context specific responses, including food transfers or cash based transfers.

INDICATOR: 30,000 people receiving food assistance on a monthly basis

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Adequate quantity and quality of food assistance provided	30,000 refugees receiving food assistance	8,766,429



HEALTH & NUTRITION SECTOR

Current situation

The Lake Region is known to be one of the most prone to malaria endemics in Chad. In 2014 the region experienced a cholera epidemic in the localities of Kayga and Kinasserom. The new influx of refugees and people displaced p from the islands of the Lake Chad region to Bol and Bagasola districts has added enormous strain to the existing precarious health care system.

According to the last survey of the Programme National de Lutte contre le SIDA, it is estimated that the HIV prevalence in the area is around 10 per cent, one of the highest in the country. To date, no nutritional survey has been conducted to measure the nutritional status of Nigerian refugees in Dar Es Salam camp and host villages. However, a rapid nutritional screening, conducted by IMC and based on the measurement of mid-upper arm circumference in Dar Es Salam refugee camp in April 2015, indicated a 12.3 per cent rate of Global Acute Malnutrition among children aged 6 to 59 months.

One of the major achievements by the health sector is the provision of primary health care, reproductive health services, routine immunizations as well as nutrition services. A referral system is in place and there are two ambulances transferring patients from Ngouboua and Dar Es Salam health centres to Bagasola district hospital in severe cases. HIV programmes are being implemented in health facilities of Ngouboua and Dar

Es Salam, and mental health services are provided at Dar Es Salam health centre.

Poor health infrastructure and a shortage in medical equipment and qualified health staff continue to challenge the provision of health care, which has been compounded by the arrival of refugees and IDPs. HIV services are very limited. Currently, antiretrovirals (ARVs) are only available at the District Hospital level, with limited provision to some Health Centres at village level.

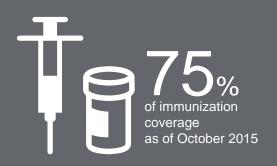
Prioritized sector needs

In the Health and Nutrition sector, the following needs were identified: The response capacity of health facilities at the village level, and secondary health care at district hospitals, need to be strengthened with qualified personnel(mid-wives and surgeon), ambulances, essential medication, equipment, technical support and supervision. Emergency health care response has to be maintained. Reproductive health and HIV services should be reinforced with special focus on adolescents. Since the overall immunization rate coverage against measles at refugee camp level is only 75 per cent, emergency and routine vaccination programmes should be strengthened.

The conditions of children under five with severe and moderate acute malnutrition needs to be improved through prevention and treatment services in the refugee camp and the district hospital of Bagasola.

MAIN GAPS





Sector response plan

The response will target 44,352 refugees and host community members, prioritizing the following activities:

Morbidity and mortality rates will be reduced through enhanced access to primary and secondary health care, as well as nutritional services to all refugees and host populations.

Access to basic mental health and psychosocial support will be enhanced.

Essentials drugs will be provided to primary and secondary health care centres. If funding allows, four new ambulances will be procured to meet the needs of the current refugee population and host communities.

RRRP partners will continue to conduct awareness raising on health and hygiene, and carry out prevention activities through community health workers for refugees and host communities.

RRRP partners will provide emergency and routine vaccination to children under five years old against measles and polio, and strengthen the routine

immunization programme by improving the provision of vaccines and reinforcing and maintaining a quality cold chain.

The referral system to Bagasola hospital from Ngouboua and Dar Es Salam will be expanded and supported. RRRP partners will aim to improve prevention activities of potential epidemic diseases, particularly those affecting children. RRRP actors aim to ensure improved access to reproductive health and HIV/AIDS services (antenatal and postnatal coverage (>95%), contraceptive coverage, and to improve the provision of contraceptives and screening tests, with greater involvement of the district health authorities and UNFPA.

Medical management of severe acute malnutrition (SAM) in areas with a rate of >15 per cent or >10 cent of moderate acute malnutrition MAG will be maintained. Nutritional surveillance and services, such as nutritional active screening, surveys, health education, as well as training of health workers, will be ensured.

OBJECTIVE: Health status of the population improved INDICATOR: Crude mortality rate <1 (per 1,000 population/ month)

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Provide primary health care services to people in need (PIN) and facilitate medical referral to district hospitals	100% of PIN with access to primary health care facilities	1,268,152
Technical support to monitoring as well as training of health personnel and community workers in the management of epidemic potential diseases and vaccine preventable diseases	80% of health personnel and CHW trained	300,000
Routine immunization programme against measles, poliomyelitis and meningitides reinforced	95% of children covered by measles vaccination	255,653
Support in drugs and medical consumables, including anti-malaria drugs (ORS and Zinc, etc.) for children	100% of health services established and equipped with drugs and medical consumables where PIN are living	753,044
Engage dialogue with communities and social networks to ensure community participation and to promote key health-related life-saving practices	100% of people living in the camps and in host communities who adopt at least 3 health-related lifesaving practices	100,000

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Comprehensive safe motherhood services provided	90% of consultations of pre- and postnatal care provided by qualified personnel	425,000
Voluntary counselling and testing of general population and prevention of HIV mother-to-child transmission services are provided	90% of preventing mother-to-child transmission (PMTCT) coverage	200,278
Nutrition counselling and monthly supplementary food rations distributed to HIV patients	100 patients living with HIV/AIDS under treatment assisted with food supplementation	80,000
Provision of technical support to build capacity in RH priority areas such as EmOc, family planning clinical management and psychosocial support for survivors of GBV/ rape, STIs, HIV and standard precautions	19 health personnel trained	85,000
Development of strategic activities addressing sexual and reproductive health among adolescents and youths	90% of youths reached	40,000

OBJECTIVE: Strengthen the prevention & response to malnutrition INDICATOR: Prevalence of global acute malnutrition among children 6-59 months <5%

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Assessment and analysis undertaken	1 nutrition survey conducted according to recommended guideline	55,000
Community management of acute malnutrition programmes implemented and monitored	1,480 new admissions of acute malnutrition admitted and treated	224,945
Provision of RUTF for the management of severely malnourished children is assured	549 new admissions of acute malnutrition admitted and treated	40,077
Children 6 - 59 months receive vitamin A supplementations twice a year	5,820 children 6 - 59 months receiving vitamin A supplement twice a year	29,000

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LIVELIHOODS & ENVIRONMENT SECTOR

Current situation

The Dar Es Salam site chosen for the establishment of a settlement for refugees is located in an arid area that offers little opportunity for the development of livelihoods. Potential activities that can still take place in the area include irrigation agriculture, fishing and small-scale business activities.

Currently, families are identified for livelihood activities including permaculture, vegetable cultivation activities for women, and fishing. Up to August 2015, some 200 refugee households engaged in rain-fed agricultural projects, 150 in crop farming, 100 in fishing activities and 48 women were supported to set up small commerce projects.

Access to fishing points in the lake is challenged by insecurity in the area. Similarly, agricultural activities outside the camp are also hampered by security concerns. At the beginning of the emergency, authorities restricted refugee movement to certain areas in the region, which impacted negatively on their ability to engage in livelihoods activities. Through advocacy by the humanitarian community refugees have been granted a limited space to carry out activities mentioned above. In addition, there is a shortage of arable land to be able to support fully-fledged farming activities. Furthermore, state services do not adequately support fishing and environment protection in these areas.

Prioritized sector needs

One of the main needs of refugees in the Livelihoods and Environment sector is access to land, in order to be able to conduct agricultural activities. They also need access to other livelihood activities such as commerce, as refugees are not able to make a living on limited fishing or agricultural activities alone. In addition, refugees and members of impacted communities require entrepreneurial and skills training, as well as access to financial services, in order to enhance their access to livelihood opportunities and strengthen their self-reliance.

Sector response plan

The response plan will target 3,620 refugees and 1,086 host community members, and focuses on the following activities: Nigerian refugees will be primarily supported in their core traditional livelihood: fishing. Partners in the livelihoods and environment sector will continue to engage in advocating with authorities to give refugees access to more fertile land to support agricultural production. Refugees will also be supported with seeds and tools, business and skills training and other initiatives to facilitate entrepreneurial activities. Partners will further engage refugees and host communities in planting tree seedlings to address environmental degradation.engage refugees and host communities in planting tree seedlings to address environmental damage.

TARGETED POPULATION AND INTERVENTIONS



OBJECTIVE: Self-reliance and livelihoods improved

INDICATOR: 35% of persons of concern (PoCs) (18-59 years) with own business/ self-employed for more than 12 months

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Access to agriculture/ livestock/ fisheries production enabled	2,331 PoCs receiving production kits or inputs for agriculture/ livestock/ fisheries activities	1,248,577
Access to financial services facilitated (formal and informal)	2,331 PoCs receiving loans through UNHCR partners	974,200
Access to self-employment/ business facilitated	2,331 small business associations formed/ trained/ supported	1,090,000

OBJECTIVE: Natural resources and shared environment better protected INDICATOR: 80% of persons of concern (PoCs) receiving environmental education and awareness raising

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Forest protection/ development undertaken	20 environmental awareness and education sessions implemented	590,040

OBJECTIVE: Socio-economic integration and peaceful coexistence enabled INDICATOR: 250,000 refugees integrated in host villages

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Projects benefiting local and displaced communities implemented	35 Quick impact projects	813,892



Current situation

Currently, most refugees are living in emergency shelters. Community infrastructures such as the distribution centre, health centre, schools and store have been constructed with emergency materials. There is a need to shift from emergency shelters, which deteriorate after six months and do not adequately protect refugees against the elements, to more durable structures. The shelters are constructed with plastic sheets and wooden frames which cannot withstand strong winds making them wear out quickly (with temperatures between 47° and 50°C) exposing refugees to harsh weather conditions and sand.

A total of 1,114 emergency shelters have been constructed for 7,319 refugees in Dar Es Salam refugee camp. An additional 356 shelters is needed to meet the minimum standard of five persons per shelter. Shelter rehabilitation tool kits (shovel, pick, hammer, trowel, tape measure, buckets, leveler, and plastic sheets where necessary) have been provided to support regular maintenance done by the refugees.

All refugee families in the camp have been receiving NFIs since February 2015, but they need to be replaced as they are wearing out. Currently, there is no contingency stock prepositioned in Bagasola as this has been distributed to over 48,000 Chadians internally displaced by military operations in the Lake Chad Region in July and August 2015.

The main challenges for the shelter sector are the lack of construction material available in the area, and logistical constraints due to bad road conditions and insecurity.

Prioritized sector needs

The following needs have been identified in the shelter and NFIs sector: Some 1,000 durable shelters have to be constructed and community infrastructures have to be rehabilitated. Roads have to be rehabilitated to transport building materials. The drainage system in the refugee camp has to be improved to ensure refugees can use nearby shelters. Furthermore, NFIs need to be replaced.

Sector response plan

The sector response will target 30,000 refugees and focus on the following activities: Humanitarian partners will support the construction of 1,000 transitional family shelters for refugees by transporting local building materials, distributing construction tool kits and by providing technical support.

Humanitarian actors will continue to ensure rehabilitation of emergency shelters while transitional shelters are under construction. More permanent

SECTOR PRIORITIES



2,000

Households will receive
a transitional or emergency shelter



structures, such as schools, health centres and community structures will be built with the involvement of local communities. Humanitarian actors will also continue to procure, transport and distribute NFIs to

refugees, including a standard package of jerry cans, blankets, mosquito nets, sleeping mats, kitchen sets, hygiene kit, and sanitary kits for women and girls.

OBJECTIVE: Shelter and infrastructure established, improved and maintained INDICATOR: 100% of households living in adequate dwellings

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
General site operations constructed and sustained	1,000 buildings/ structures constructed	2,031,964
Shelter materials and maintenance tool kits provided	1,000 shelter maintenance tool kits and materials provided	533,572

OBJECTIVE: Population has sufficient basic and domestic items INDICATOR: 70% of households whose needs for basic and domestic items are met

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
NFI kits provided	6,000 households receive NFI kit	4,172,607



66

WATER, SANITATION & HYGIENE SECTOR

Current situation

Humanitarian actors have increased refugees' access to water by constructing 21 new boreholes, and establishing water management committees. Water supply infrastructures are working well and have been maintained. Currently, an average of 49 liters is distributed per person per day, exceeding the standard of 20 liters per person per day.

Improved sanitation conditions, such as through behavior change and provision of facilities and service, have a significant impact on the health and well-being of refugees. In Dar Es Salam camp, the main sanitation problems are due to a lack of latrines. The latrine ratio is 51 persons per communal latrine hole (under the standards of 20 person per latrine), and only 17 per cent of the households have constructed their own family latrine.

Concerning waste management, environmental kits (consisting of a wheelbarrow, shovel, gloves, and rake) have been distributed to refugees, 100 garbage bins have been installed, and 12 garbage pits constructed. In addition, UNHCR and partners carried out trainings and awareness-raising campaigns on the impact of sanitation and hygiene on health, the proper use of hand-pumps, latrines and soap, and environmental hygiene. Cholera prevention activities have also been conducted in the camp. However, efforts should be made to address the practice of open defecation, which poses public health risks, and to improve water management at the household level.

The challenges for refugees in both camp and host villages are related to the sustainability of the water supply, and the accessibility to proper sanitation facilities. Further, the sandy soil of the area does not facilitate the digging of pit latrines. In order to address these challenges, activities will aim to improve access to sanitation facilities, strengthen the water management system, and encourage refugees to adopt good hygiene practices.

Prioritized sector needs

The current needs for the WASH sector can be summarized as follows: Water systems have to be maintained to ensure continuous provision of potable water. Additional latrines need to be constructed to improve the sanitation situation. Sanitation conditions in the camp should be supported through promotion of hygiene and water storage management. Water management committees require training, especially on cost recovery and funds management.

Sector response plan

The sector response will target 21,000 refugees and 9,000 host community members, and will focus on the following activities: RRRP partners will construct 2,700 family latrines and 20 public latrines, as well as introduce the community lead total sanitation approach

TARGETED POPULATION AND INTERVENTIONS

4,706
targeted population

| Host Community | Refugees |

9,200 mew sanitation facilities will be constructed

in host villages to improve sanitation coverage. Partners will also rehabilitate 25 non-functional hand pumps and construct 10 additional boreholes in host villages.

Humanitarian partners will conduct hygiene promotion campaigns and other cholera prevention activities. Furthermore, capacity building will be provided for

WASH committees, and the water quality at water points and at the household level will be monitored. Solid waste management will be reinforced (for example by constructing 40 landfills and 30 refuse pits, and by installing 150 refuse bins).

OBJECTIVE: Population lives in satisfactory conditions of sanitation and hygiene INDICATOR: 85% of households with drop-hole latrine or drop-hole toilet

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Increased access to sanitation	9,200 latrines constructed	664,500
Environmental health and hygiene campaigns implemented	3,038 hygiene campaigns conducted	140,979
Capacity development supported	725 persons trained in basic hygiene practices through sessions conducted in schools and communal areas	50,858

OBJECTIVE: Supply of potable water increased or maintained INDICATOR: Average of 49 litres of potable water available per person per day

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Water management committees established and active	115 water management committees active	126,866
Water system operations maintained	25 water points rehabilitated	457,983
Capacity development supported	950 persons of concern (PoC) trained in water management in collaboration with local authorities or other external partners	40,715

FINANCIAL REQUIREMENTS

by Agency & Sector

ORGANIZATION	PROTECTION	EDUCATION	FOOD SECURITY	HEALTH & NUTRITION	LIVELIHOODS & ENVIRONMENT	SHELTER & NFI	WASH
FAO					1,000,000		
IMC				105,000			
UNESCO		30,000					
UNFPA	150,000			125,000			
UNHCR	1,629,529	1,615,896		2,372,166	3,716,709	6,738,143	817,401
UNICEF	900,000	408,630		237,608			664,500
WFP			8,766,429				
WHO				1,016,375			
Total	2,679,529	2,054,526	8,766,429	3,856,149	4,716,709	6,738,143	1,481,901

by Agency

ORGANIZATION	TOTAL REQUIREMENTS (USD)
FAO	1,000,000
IMC	105,000
UNESCO	30,000
UNFPA	275,000
UNHCR	16,889,844
UNICEF	2,210,738
WFP	8,766,429
WHO	1,016,375
Total	30,293,385

NIGER REFUGEE RESPONSE PLAN

STRATEGIC OVERVIEW

TARGETED POPULATION

100,000 250,000 Refugees¹ **Host Community**

NIGER

TOTAL REQUIREMENTS

112,109,640 USD^{245,761}

4,239 250,000

PARTNERS INVOLVED

22



CHAD Lake

NIGERIA



TOTAL NUMBER OF REFUGEES (AS OF OCT 2015 - UNHCR)



TOTAL NUMBER OF IDPs (AS OF OCT 2015 - IOM DTM VI)



PEOPLE LIVING IN AND OUT OF CAMPS



PEOPLE LIVING IN HOST COMMUNITIES

CAMEROON

MAIN PRIORITIES

Strengthen and maintain provision of protection and assistance to refugees, returning Niger nationals, host communities and IDPs in the "mixed camp and out-of camp" context in the Diffa region.

Ensure the basic needs of vulnerable persons of concern are met including shelter and NFI, healthcare, water and sanitation and education.

Encourage resilience and independence of vulnerable persons of concern including refugees, Niger nationals returning from Nigeria, host communities and IDPs.

COUNTRY OVERVIEW

Introduction

Background

Since the declaration in May 2013 of a state of emergency in the Nigerian States of Borno, Yobe and Adamawa, over 138,000 persons moved to the Diffa region, including Nigerian refugees and Niger migrants returning from Nigeria, according to Niger Government authorities. This population currently represents nearly 20 per cent of the total population of the region, is located in more than 200 villages on a territory of 28,000 km2. The Government of Niger has maintained an open-border policy since the beginning of the crisis, and opened the Sayam Forage refugee camp to host Nigerian refugees, who can move to the camp on a voluntary basis. The vast majority of refugees have elected to live in host villages rather than to move to the camp, which is located in a semi-desert area.

In February 2015, the operational context changed radically, with breakouts of violence on the Niger territory. In May 2015, Niger authorities ordered populations to leave the Lake Chad islands within 48 hours, in order to launch a military operation against the insurgents. More than 50,000 people were affected by the evacuation. As a result, a camp for internally displaced persons (IDPs), hosting more than 4,000 people by October 2015, was established. Internal displacement became even more pronounced since

September 2015, with an increase in activities of insurgents on Niger territory provoking both proactive and reactive population movements. Despite the increase in the humanitarian response, the needs in the region have also continued to rise.

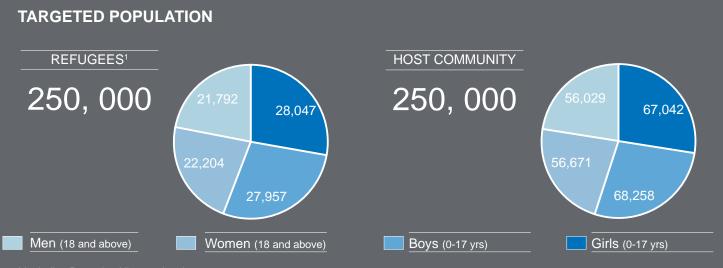
The security situation is exacerbating the economic crisis in the Diffa region, resulting in the suspension of trade between the mainland and the Lake Chad islands, and between Nigeria and Niger on the Bosso-Diffa axe. Furthermore, there is a significant reduction of the mobility of seasonal workers and pastoralists between Niger and Nigeria. Farmers are not able to access their fields along the Komadougou River, which constitutes the natural border between Niger and Nigeria. T vulnerability of the host communities and absorption capacity of host villages have also been challenged by the massive displacement.

In close consultation with the Government of Niger, local authorities, and humanitarian partners, the RRRP will respond to a planning figure of 100,000 Nigerian refugees and returning Niger migrants, and 250,000 IDPs and affected host community members in 2016.

2015 Achievements

The key achievements include:

 The establishment of two camps for refugees and IDPs in the Diffa region, where protection and



- extensive humanitarian assistance are provided.
- The first distribution of gas for domestic use was carried out within the two camps. This will have lasting effects in minimizing environmental degradation, increasing the purchasing power of beneficiaries and reducing tensions between displaced and host populations.
- Throughout 2015, 45,000 people benefitted from the provision of emergency shelters, while approximately 21,000 people received emergency non-food items (NFIs).
- As of July 2015, 11,854 children received care and treatment on an out-patient or in-patient basis, the latter consisting of intensive care units for children suffering from severe acute malnutrition with medical complications.
- Water provision systems have been significantly improved, and in the case of the camp of Kablewa, water is now benefitting the IDP population of the camp as well as vulnerable members of the host population in Kablewa town.
- 2015 saw the establishment of protection response mechanisms through standard operating procedures

- (SOPs) to respond to sexual and gender-based violence (SGBV) cases, the gender-based violence information management system (GBVIMS), and the development of a mechanism to re-establish family links.
- Three distance learning centres were established throughout the year to benefit refugee children from Nigeria, who do not speak French. The curriculum has been approved by the Ministry of Education and is currently benefiting over 350 children.

2015 Challenges

The key challenges for the response included:

- The unpredictability of movements of people coming from Nigeria and of those displaced internally made planning of humanitarian assistance difficult.
- The weakness of public services and existing public infrastructures resulted in restricted access to basic services.
- Gaps in national capacity and systems constrain the delivery of quality educational, health, water, sanitation, protection and other core services, and the effectiveness of humanitarian and development assistance.



- The deteriorated security situation and the extremely limited road network limit humanitarian access to the affected population.
- The deterioration of the purchasing power of the affected population keeps increasing their need for humanitarian assistance.
- The insecurity in the region, ongoing mass displacements, and a lack of capacity made the implementation of comprehensive registration difficult.

Identified needs

The situation of affected populations in the Diffa region is characterized by a mixed and mainly out-of-camp situation. At this time, no large-scale formal registration of the displaced population has been conducted. The need to better understand the composition of refugees and other forcibly displaced population is crucial. About 70 per cent of the displaced population has no reliable documentation that proves their nationality, and are at high risk of statelessness. Capacity to provide civil registration and documentation need to be strengthened. There are also gaps in the knowledge of national military and defense forces on human rights, and refugee rights and protection.

According to the Niger authorities (Dispositif National de Prévention et de Gestion des Catastrophes et Crises Alimentaires), by 2016, 460,000 people, more than 65 per cent of the whole population) in Diffa, will be affected by food insecurity. Currently, about 60 per cent of the population in Diffa has no access to drinking water and just 14 per cent have access to adequate sanitation facilities. The vulnerable populations in the region require 385 water points and 4,626 latrines. The global acute malnutrition (GAM) rate in the Diffa region is well above the 10 per cent alert level. Malnutrition was already affecting 13.6 per cent of children at the end of 2014, before the deterioration of the situation. Some 90,000 people are or will be in need of emergency shelters or transitional shelters and 135,000 will need non-food items (NFIs). Some 140,000 extremely vulnerable people are in need of environmentally-friendly and economical sources of domestic energy.

Strategic overview for the response

The humanitarian community, jointly with the Niger authorities, is targeting 100,000 Nigerian refugees and Niger migrants who returned to Niger, in and outside camps, 100,000 IDPs, and 150,000 vulnerable persons of host communities. The main objectives and interventions are:

Strengthen and maintain provision of protection and assistance to refugees, Niger migrants returning from Nigeria and IDPs in a mixed camp and out-of camp context in the Diffa region

Registration and documentation will be continued in close collaboration with the national authorities to ensure that all displaced persons, both within and outside of the camps in order to improve access to protection and assistance and minimize risks of statelessness.

Protection monitoring will be conducted together with national security forces and community protection monitoring focal points to identify protection issues in a timely fashion and provide an adequate response.

Peaceful coexistence will be promoted through assistance that targets vulnerable host communities as well as refugees and other displaced populations. This will help to minimize community tensions. Additionally, mechanisms to prevent conflict between displaced communities and host communities will be strengthened and reinforced, including awareness-raising and mutually-beneficial assistance projects.

SGBV prevention and response mechanisms, such as identification, documentation and provision of adequate responses including medical assistance, psychosocial support and legal assistance, will be strengthened. Capacity development will be carried out with community protection groups within the camps.

Child protection will be enhanced through improved identification and targeted child-protection activities and assistance, in accordance with the best interest of the child. Efforts will be made to sensitize persons of concern (PoCs)¹ and local government counterparts on the importance of birth registration to prevent statelessness.

¹ In the context of the Niger country chapter, the term Persons of Concern (PoCs) refers to Nigerian refugees, returning Niger nationals, IDPs and host community members.

Ensure the basic needs of vulnerable persons of concern are met including shelter and NFI, healthcare, water and sanitation and education

NFIs and shelters which adhere to SPHERE minimum standards will be provided to vulnerable populations in and outside of the camps. Emergency kits will be made available for IDPs at spontaneous sites, on an adhoc basis based on needs. Long term shelter options will also be prioritized for displaced populations living amongst the host population.

Access to water and sanitation facilities will be prioritized both within the camps and at spontaneous sites. Water provision systems will be enhanced to serve both the camps and host communities.

Access to and the quality of education will be improved, in collaboration with national education authorities.

Alternative education infrastructure, including distance education centres, will be expanded, and solutions will be sought for students from areas in which the schools have been closed due to insecurity.

Encourage resilience and independence of vulnerable persons of concern including refugees, Niger migrants returning from Nigeria and IDPs

Self-reliance and livelihood support will be actively promoted among vulnerable PoCs. Livelihood support will be provided in order to identify alternative income generating activities and market opportunities in the face of security constraints in the region.

Access to land will be promoted. Humanitarian partners will work closely with local municipalities in the region to provide access to land to displaced populations and vulnerable host populations, and increase the economic capacity of communities to the benefit of all affected populations. Those who receive land parcels will no longer be dependent on humanitarian shelter assistance.

The provision of energy for domestic use will be prioritized. This not only prevents desertification and promotes peaceful coexistence, but also increases the economic capacities of beneficiary households, allowing them to invest in livelihood activities.

Capacity development and training, including life skills training and vocational trainings, will be provided in order to promote self-sufficiency and resilience.

Partnership and coordination

In July 2014, the Governor of the Diffa region created a Regional Committee for the Coordination and Management of Refugees and Returnees, composed of Regional Directors, Prefects of Departements, the President of the Regional Council and representatives of humanitarian organizations, as the main coordination framework. In 2015, a management unit working with the Governor was established to support humanitarian action concerning the protection of refugees, the prevention of statelessness, assistance to refugees, IDPs, and other affected populations coming from Nigeria. The unit works to facilitate linkages between the humanitarian response, activities related to rehabilitation, and the Governmental Strategy as planned for in the Programme for Economic and Social Development in Niger (PDES 2012-2015). An interorganization coordination committee (CCCIO/Diffa), co-led by UNHCR and OCHA and working closely with the Humanitarian Country Team and Government authorities, is in charge of evaluating the needs and scaling up the response.

At the sectoral level, authorities and humanitarian actors have created nine thematic groups (security, shelter, reception-registration, food insecurity, protection, health, nutrition, WASH and education). These thematic groups meet regularly in Diffa to discuss progress and lessons learned. Also, since April 2015, the Protection cluster (led by UNHCR) is working at the regional level with the sub-clusters for child protection (led by UNICEF) and the working group for the protection of refugees (led by UNHCR), following the Ministerial Decree of 4 December 2013 on the legal status and temporary protection of Nigerian refugees. These groups are working not only on protection within the camps, but also on protection issues for the displaced populations outside of the camps and at IDP sites.

PLANNED RESPONSE



Current situation

The deterioration of the security situation in the region has had major effects on the provision of protection. The state of emergency hinders humanitarian access. While the majority of the displaced populations continue to be spread across numerous villages, two camps have been opened in 2015. Relocation to the camps takes place on a voluntary basis. The Government of Niger has maintained open borders for new arrivals from Nigeria, and provides protection to Nigerian refugees under a temporary protection scheme.

Protection interventions are implemented in cooperation with Government partners and consist of community-based protection monitoring and capacity development. Information provided by monitoring assistants and community focal points signal protection problems, risks of refoulement and individual protection cases. Assistance is provided to the Government in identifying and registering refugees and the displaced population, where possible. More than half of refugees and other

displaced people are children who are traumatized and exposed to protection risks, including violence and exploitation. Children and adolescents from both host and displaced populations have been enticed with incentives or forced to join insurgents. Some children are unaccompanied or separated from their families.

One of the main achievements was the establishment of Sayam Forage refugee camp and Kablewa IDP camp, and the provision of assistance and protection at these sites. Capacity building is provided for the authorities, defence and security forces in contact with the displaced population, and for humanitarian actors to prevent protection risks and to increase their response capacity. Another achievement was the establishment of protection response mechanisms through the introduction of SOPs for response to SGBV cases and the development of a formalized system to re-establish family links.

Limited humanitarian access to displaced populations hampers registration, protection monitoring and response. At this time, no large-scale formal registration operation has been established, limiting the profiling of

SAYAM FORAGE REFUGEE CAMP POPULATION as of November 2015



displaced persons. Some 70 per cent of the displaced population do not have reliable documentation that proves their nationality, increasing their risk of statelessness. The risk of forced recruitment and the use of negative coping mechanisms in the face of the lack of alternative sources of income also pose challenges.

Prioritized sector needs

The priority sector needs for the Protection Sector were developed based on a number of assessments that were carried out throughout the year by various Protection Cluster partners. The Protection Cluster came up with the following priority needs by consensus, based on the results of discussions and the cross checking of protection partner information. They can be summarized as follows: The monitoring capacity of community focal points needs to be reinforced while the registration and profiling of displaced people will remain a priority, especially for ensuring non-refoulement. About 70 per cent of displaced persons have no reliable documentary proof of nationality. In order to help ensure registration and access to documentation and mitigate the risk of statelessness for people without documentation, national institutions and mechanisms

for civil registration and documentation need to be strengthened. With the growing number of persons arrested on suspicion of links to insurgents, there is a strong need to increase the access of detained PoCs to legal representation. Furthermore, mechanisms to assist SGBV survivors need to be strengthened.

Urgent action must be taken to meet the specific needs of children in Diffa who are victims or at risk of violence and exploitation. There is a critical need to promote a stable, peaceful environment by empowering young people through vocational training and capacity building focused on non-violence, to give them an opportunity to be contributing members of their communities, and discourage them from resorting to criminal or other negative behaviours.

Sector response plan

The sector response will target 350,000 PoCs and will concentrate on the following activities: Capacities of community focal points who carry out community protection monitoring will be reinforced. Partners will increase the capacity of the Government, and work together with the Government to carry out extensive registration and profiling of refugees and other displaced populations.



Legal support for victims of SGBV and people who were arrested on suspicion of terrorist activities will be provided. Partners will ensure multi-sectorial assistance for people with specific needs. Extensive vocational training and capacity development will be provided for displaced members of the youth. Partners will also strengthen community protection working groups

and promote empowerment and protection within the camps. Psychosocial support and recreational activities for displaced children will be provided.

OBJECTIVE: Quality of registration/ profiling and issuance of legal documents is improved INDICATOR: 188,000 persons of concern (PoC) identified and assisted with documentation

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Displaced population identified and documented (reducing risk of statelessness)	188,000 people identified and documented	1,231,779
Risks and protections issues identified and responded to	1,000 people at risk and incidents identified and responded to	747,774
Physical security of displaced persons and peaceful coexistence reinforced	100% of reported security incidents responded to immediately	1,400,164
Legal assistance and protection provided to displaced in detention for terrorism suspicions	300 people receiving legal assistance	416,918
Births amongst displaced persons registered and documents provided	3,000 births documented	222,331

OBJECTIVE: Assistance and support provided to identified vulnerable persons among displaced population

INDICATOR: 200 SGBV and protection incidents identified and referred for response

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Psychosocial support provided to persons of concern (PoCs)	1,000 persons who receive psychosocial support	672,774
Persons with specific needs assisted	15,000 persons with specific needs assisted	1,042,869
Capacity development provided to military and other national authorities and non-state actors	2,000 persons benefitting from capacity development	633,772
SGBV victims identified and assisted	1,000 victims of SGBV assisted	1,724,324

OBJECTIVE: Targeted support provided to children and community structures INDICATOR: 600 unaccompanied / separated children documented and assisted

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Psychosocial support and recreational activities for displaced children	40,000 children receiving psychosocial support and recreational activities	862,638
Unaccompanied or separated children identified and documented	180 children identified	810,811
Community protection groups established or reinforced	477 groups established / reinforced	683,777
Children associated with armed groups reinserted into community	150 children assisted in community reinsertion	647,033
Sensitization and awareness raising on child protection provided	205,682 people benefiting from sensitization activities	627,938

EDUCATION SECTOR

Current situation

The education sector faces significant needs in terms of access, quality and capacity of education systems in Niger. The Diffa region has the lowest school attendance rates in Niger, with gross attendance rates of just 42.4 per cent for boys and 37.8 per cent for girls, as formal education in not prioritized in the region.

Among the achievements of the Education sector is providing access to schooling for 34,770 school-aged children in 2015. Furthermore, by September 2015, 18,212 children affected by conflict were benefitting from the school-in-the-box initiative. A distance education programme has been operational since October 2014, and targets Anglophone schoolchildren from Nigeria. Three centres in Diffa, Maine Soroa and Kabelawa, are providing quality education to 350 students. The curriculum has been approved by the Nigeria Ministry of Education, and students will be eligible to complete their exam. However, due to insecurity, the education centre in the town of Bosso had to be closed during 2015.

Despite positive developments, one major challenge though is the shortage of teachers. Moreover, there are difficulties in contracting construction companies willing to work in insecure areas to build schools. The unstable security situation has resulted in 151 schools – catering for more than 10,000 students located in the red zone (located along the Komadougou River) – being closed since February. The Ministry of Education is currently

studying the feasibility of relocating the students from the red zone to more secure areas. With the increased number of displaced and additional children forced out of school due to the insecurity, it will prove challenging to meet the education needs of all vulnerable children. The fact that many of the displaced children are Anglophone makes integration into the local schooling system challenging, particularly at the secondary level.

Prioritized sector needs

The Niger Government estimates that approximately 60,000 IDP children, 60,000 Nigerian refugee and children of Niger who returned from Nigeria, as well as 90,000 children from host communities, will need access to education. The main needs identified by the Education sector in the Diffa region are: emergency education response mechanisms and spaces, including classrooms; remedial classes for students who have been forced out of education due to the closure of schools. In order to promote health and nutrition among children while encouraging attendance and participation, a school feeding programme needs to be implemented.

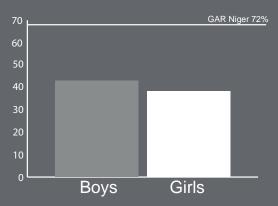
Higer quality in education is required. There is a need for French language courses for Anglophone children to facilitate their integration into the Niger education system, and the Distance Education programme needs to be expanded and improved.

MAIN GAPS



151 schools have been closed since February 2015 due to security reasons 2013/5

Gross Attendance Rate Primary school in Diffa Region compared to the National level



Sector response plan

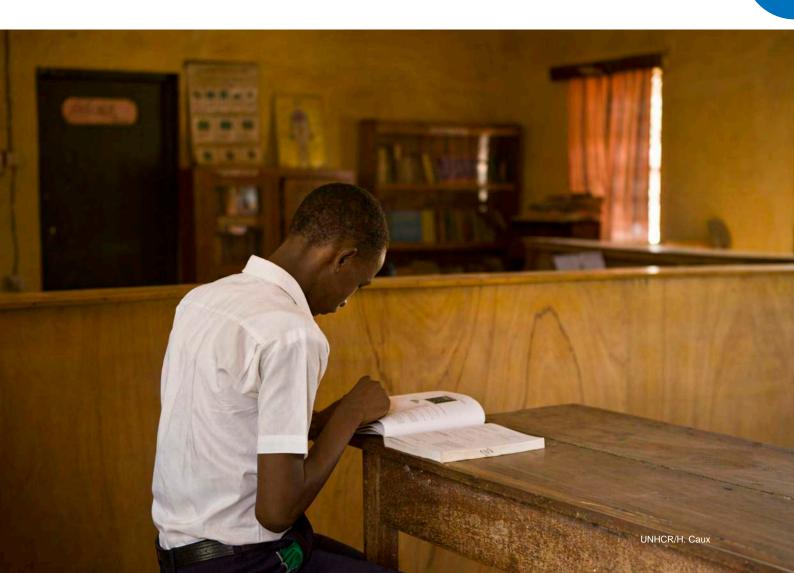
I In 2016, among the 210,000 children who will require education in the Diffa region, the Education sector plans to target 26,000 children, representing 12.4 per cent of the overall population. This includes 19,500 children from host communities (22 per cent of total in region), 2,600 internally displaced children (4.3 per cent of total in region) and 3,900 children who came from Nigeria (6.5 per cent of total in region). The objective will be to ensure their access to formal or informal quality education. Departments and schools hosting a large number of children will be prioritized.

To meet its objectives, RRRP partners will focus on the following activities: Emergency classrooms and alternative learning centres for out-of school children aged 10-15 will be constructed. School canteens for 26,000 children will be established. Separate latrines for girls and boys will be constructed in schools. Partners will provide didactic and pedagogic materials to students and teachers, and training for teachers

on education in emergencies (EiE), gender, GBV, HIV/AIDS, peace education and social cohesion. Intensive French language courses will be provided for refugees. Remedial sessions for children who attended schools that have been closed due to insecurity will be organized.

Furthermore, partners will ensure the identification of more secure host schools, carry out consultations on the plan to relocate the students from the red zone to more accessible areas with relevant stakeholders (parents, education workers, authorities and community leaders), carry out a detailed needs assessment, and undergo a budgeting exercise

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OBJECTIVE: Population has optimal access to education

INDICATOR: 23,400 school-aged girls and boys with continued access to formal and non-formal education in Diffa

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Build emergency classrooms	125 emergency classrooms built	1,247,874
Set up alternative education centres	12 alternative education centres built	1,564,999
Set up school canteens	212,000 school meals distributed per month	243,099
Built separated latrines for girls and boys	30 latrines built	399,999

OBJECTIVE: Quality of education is improved INDICATOR: 577 teachers who have been provided with educational support in the targeted schools to ensure the quality of teaching and learning

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Provide didactic and pedagogic material to students and teachers	300 manuals distributed	817,175
Ensure educational support for teachers in the targeted schools	577 teachers provided with educational support in the targeted schools to ensure the quality of teaching and learning	569,664
Ensure the training of teachers (EiE, gender, GBV, HIV, peace education, social cohesion)	577 teachers trained (EiE, gender, GBV, HIV, peace education, social cohesion)	452,441
Organize intensive French courses for refugees	3,900 refugee children who benefit from French intensive courses and improve their French level	419,655
Organize remedial courses	8,094 remedial sessions organized	419,655

FOOD SECURITY SECTOR

Current situation

In November 2014, a vulnerability survey revealed that 53 per cent of households in Diffa were food insecure. This finding was followed by a needs assessment, which highlighted growing numbers of food insecure people: over 133,000 new cases since April 2014, including over 21,000 or 16 per cent severe cases. The November 2014 results were particularly worrying, as the survey was carried out after the harvest season. However, it should be noted that Diffa is the region which is the least dependent on rainfall in Niger. Before the crisis, the proximity to Lake Chad and the trade and exchanges with Nigeria offered other economic opportunities, which have contributed to the stability and low poverty rate in the Diffa region (the lowest in Niger). Today, due to the suspension of trade along the borders as result of the evacuation of the Lake Chad islands, the economy has suffered extreme losses, with consequences on the food security of the population.

In May 2015, a market analysis showed a lower demand than in previous years, reflecting the reduction in revenue sources, while most locals are deriving their income from peppers, fishing and the trade of animals. Additionally, the disruption of the seasonal economic migration from Nigeria, and the gradual socio-economic integration of refugees and other displaced populations, contributed to a decline in the cost of labour. With the

increasing number of displaced people in the region, including refugees, returning Niger migrants and IDPs, limited resources available cannot fulfil the needs of the population. As a result of the increased pressure on food stocks and competition for resources in the region due to the continued influx, host communities are also under extreme pressure and are included under the regional food security strategy to ensure that their basic needs are also met.

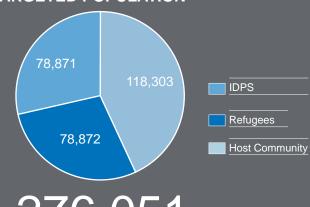
Despite these challenges, main achievements of the food security sector include the coordination effort by WFP and implementing partners to reach vulnerable beneficiaries in hard to reach areas through the implementation of an indirect access strategy.

In July and September 2015, WFP carried out two postdistribution monitoring surveys in the Diffa region. The results of these two surveys show that the regularity of food assistance has helped to stabilize the level of food consumption and to limit the use of negative coping strategies.

The coverage in food assistance for 160,000 targeted PoCs was relatively high in Diffa between June and September, due to the presence of several humanitarian actors and the Government. In June 2015, 53 per cent of PoCs were provided with food assistance, in July the assistance reached 60 per cent, and in August and September food assistance reached 86 per cent of targeted PoCs.

TARGETED POPULATION

targeted population



53% of households in Diffa are food insecure following an assessment carried out in Nov. '14



Prioritized sector needs

For 2016, the following priority needs for the food security sector have been identified: The most vulnerable people, including refugees, returning Niger nationals, IDPs and host population, require unconditional food assistance and/or cash, in particular during the lean season (June–September). The unstable security situation leaves many villages in a vulnerable position as they are unable to plant crops, and the needs of the most vulnerable populations must be prioritized.

Children aged 6-59 months require blanket supplementary feeding to avoid an increase in malnutrition and mortality. Pregnant women and breastfeeding mothers, in particular those living outside of the camps, will also require blanket supplementary feeding. Vulnerable households dependent on market-gardening need assistance to make crops more resilient.

Coordination between humanitarian actors addressing food security should be strengthened, particularly in the complex and changing context in the region of Diffa. With the ever-increasing numbers of vulnerable people in the region, it is essential that adequate emergency surge response food stocks are made available.

Sector response plan

The main response activities in 2016 will include: The most vulnerable households will be targeted for all food security responses, regardless of their status

(refugee/returnee/IDP/host). This will continue to be done through the 'Household Economy Approach'. Approximately 14,350 people will be provided with direct and unconditional food assistance, in particular during the lean season. Unconditional cash assistance will be provided to the most vulnerable, targeting approximately 32,000 people, during the lean season, to allow them to meet their basic food needs.

Blanket supplementary feeding will be provided to approximately 29,000 vulnerable children aged 6 and 59 months to ensure they receive adequate micronutrient and caloric value to prevent malnutrition and mortality. Blanket supplementary feeding will also be provided to approximately 8,700 vulnerable pregnant women and breastfeeding mothers who reside outside of camps in the Diffa region.

Following the end of the lean season, unconditional cash transfers will be replaced by cash for work activities for up to 32,000 vulnerable people.

Beneficiaries will receive cash assistance in exchange for work for a period of three months. The cash for work activities will focus on increasing the resilience of market gardens through the construction of dikes or dams in order to mitigate the effects of seasonal flooding on yields.

Given the deteriorating security situation in the region, adequate stocks of food and nutrition packs will be made available in order to respond to emergencies.

OBJECTIVE: Enhance the provision of adequate food assistance to sustain the persons of concern INDICATOR: 30,000 people receiving food assistance on a monthly basis

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Direct food assistance provided to the most vulnerable	14,350 individuals receiving food assistance on a monthly base	32,138,505
Unconditional cash transfers provided to very poor households during lean season	32,000 individuals receiving cash transfers	6,180,502
Cash-for-Work activities provided to most vulnerable individuals	32,000 individuals carrying out cash for work	1,332,000
Emergency food packages distributed outside of lean season	160,000 people receiving emergency food outside of lean season	5,536,297

HEALTH & NUTRITION SECTOR

Current situation

The absorption capacity of national health structures is overstretched as they have to cater for an increased 20 per cent of newly arrived PoCs. The public health system is facing recurrent shortages of medicines, lack of qualified human resources and materials. Half of all new admissions are people coming from Nigeria. There is a high prevalence of infectious diseases such as tuberculosis, HIV, and cholera (in December 2014 a cholera epidemic was declared with 137 cases and eight deaths). About 40 per cent of pregnant women do not access prenatal care services, which is by far the highest rate of the eight regions in Niger.

More than 28,000 children are at risk of acute malnutrition in the Diffa region. The malnutrition rate of children aged 6-23 months who came from Nigeria is much higher than for those from the host populations, 28 per cent of these children are affected by global acute malnutrition (GAM) compared to 19.5 per cent within host populations. Both rates are far above the WHO emergency threshold, which stands at 15 per cent. Children aged 6-23 months accounted for 50 per cent of in-patient admissions and 74 per cent of outpatient admissions. The proportion of infants under six months old in in-patient admissions, which stands at 25 per cent in Diffa compared to some seven per cent nationally. Breastfeeding and other positive child care practices have been impacted by the crisis, as family

and support structures have broken down and stress and fear of mothers increased.

As of July 2015, 11,854 children had been admitted for treatment on an out-patient or in-patient basis. A health humanitarian assistance project targeting displaced communities in the region is currently being developed and will be operational in 2016. Moreover mobile clinics continue to deliver medical assistance - including vaccinations and prenatal care, to those in the most insecure and inaccessible areas. This will be expanded geographically in 2016.

One of the key challenges is that basic health services remain inaccessible in rural and insecure areas. In addition, the poor sanitary facilities, and lack of water could pose serious public health threats, including the spread of epidemics such as cholera. Health services in the region are provided by 50 dispersed health centres who are suffering from shortages in staff, medicines and a growing number of patients.

Prioritized sector needs

The following needs have been identified in the Health and Nutrition sector: The existing public health centres need to be reinforced, including with medication, equipment, infrastructure and human resources support. Additional mobile clinics are required for curative and preventative care, such as immunization, prenatal and postnatal consultations, treatment for

MAIN GAPS



28,000 children at risk of malnutrition



40% of pregnant women do not have access to prenatal care

malaria, and other health services, particularly in remote and insecure regions. There is an urgent need for lifesaving treatment for children suffering from severe acute malnutrition (SAM), as well as for prenatal care and education on breastfeeding and other safe practices to mothers.

Sector response plan

The sector response plan will target 350,000 PoCs and focus on the following activities: Partners will provide extensive support to all 54 health centres in the Diffa region, including through the provision of medication,

human resources and capacity development. Partners will construct and rehabilitate basic health facilities and infrastructure in the region. Additional mobile health clinics will be expanded to reach the most vulnerable populations located in remote and insecure areas. Partners will also expand immunization programmes for children and prenatal care for mothers, in particular amongst the displaced population.

Provision of medical assistance for malnutrition amongst 6-23 month-old children will be ensured, in particular amongst the displaced population, who has the highest rates of acute malnutrition amongst children.

OBJECTIVE: Improve the quality and coverage of the management of the GAM in children under five and pregnant and lactating women

INDICATOR: Prevalence of global acute malnutrition (6-59 months) <5%

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Treatment of severe acute malnutrition, with or without medical complications, of children under 5, including those living in camps or areas hosting refugees and returnees provided	10,277 0-59 month-old children (girls and boys) admitted for SAM in CRENI/AS	2,788,797
Treatment of moderate acute malnutrition of under 5 children and pregnant and lactating women including those living in camps and areas hosting refugees and returnees provided	45,792 6-59 month-old children (girls and boys) and pregnant and lactating women admitted for MAM in CRENAMs	1,285,714

OBJECTIVE: Strengthen the prevention & response of malnutrition INDICATOR: 112,988 persons reached by sensitization

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Community management of acute malnutrition programmes implemented and monitored	112,988 people (men, women, girls, boys) benefiting from ANJE activities and nutrition advice	52,300
Active screening of acute malnutrition at community levels and health facilities, and surveys realized	142,855 6-50 month-old children (girls and boys) screened in the community and in health centres	323,350
Child nutrition packs (6-59 months) distributed	4,000 children receiving emergency nutrition packs outside of the lean season	1,122,259
Nutrition packs for pregnant women and nursing mothers distributed	1,200 pregnant/nursing mothers receiving nutrition packs outside of the lean season	332,178

OBJECTIVE: Health status of the population improved INDICATOR: 150,000 persons of concern with access to primary health care

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Public health services supported (medicine, staff, material infrastructures)	54 public health services supported	3,430,954
Primary health care to inaccessible areas provided via mobile clinics	10 mobile clinics realized	1,079,990
Preventive reproductive health and HIV sensitization provided	20,000 young people benefiting from sensitization campaign	130,000
Blanket supplementary feeding provided to children (6-59 months) and PLW in and outside camps	37,700 children and PLW receiving food	3,657,751

LIVELIHOODS & ENVIRONMENT SECTOR

Current situation

Before the crisis, the proximity to Lake Chad and the exchanges with Nigeria contributed to the Diffa region's low poverty index. The economy has suffered extreme losses as a result of the elimination of such exchanges and the evacuation of the Lake Region.

The monthly average consumption of wood per household costs approximately USD 23, or almost half of the minimum wage in Niger of USD 50. For gas, it is estimated that a household of seven will consume 1.5 bottles per month, at a cost of USD 4.50; however, the accessibility of gas remains a challenge. The cutting of wild wood and a reduction in the number of meals are the only options for the extremely vulnerable population. The competition for natural resources is increasing tensions between displaced and host communities. Two-thirds of the Diffa region is affected by desertification. This situation is worsened by the demographic pressure due to the population movements, and the natural population growth rate in the region (4.7 per cent, or a doubling of the population every 15 years).

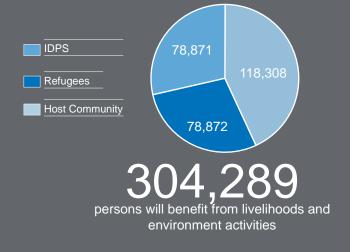
RRRP partners conducted the first distribution of gas in the camps of Sayam Forage and Kabelawa in September 2015, and intend to scale-up this activity to include IDPs and host communities. Assistance in the form of vocational and other livelihood training has been carried out in the region, and will be expanded in 2016.

The main challenge for securing livelihoods is insecurity in the fertile areas (Komadougou River and Lake Chad). This has made it difficult for agricultural producers to ensure good crops during 2015, while the reduction in their income has negatively impacted their capacity to reinvest in their activity. Instability has also significantly reduced the mobility of pastoralists. Vulnerable herders are in urgent need of assistance, such as through the provision of animal feed to ensure animal health and the recapitalization of their livestock.

Prioritized sector needs

In 2016 the following needs have been identified by the Livelihood and Environment sector: gas as the primary source of domestic energy must be supported and promoted, in order to minimize environmental degradation and increase the purchasing power of vulnerable populations. Access to land for pastoralists and to fertile land for agricultural producers is required, enabling pastoralists to access water and adequate grazing for their animals, minimize the negative effects of overgrazing on natural resources, and to allow agricultural producers to access their crops. People already engaged in agriculture, livestock, and fishery, require inputs and continuous assistance in order to continue to benefit from their activities. Training on life skills for livelihood projects is weak and must be reinforced and strengthened in the region. Training on

TARGETD POPULATION AND INTERVENTIONS



72,057
persons will have access to agriculture, livestock or fisheries



alternative income sources remains insufficient and needs to be enhanced, in order to provide alternative income sources within the region and diversify the economy.

Sector response plan

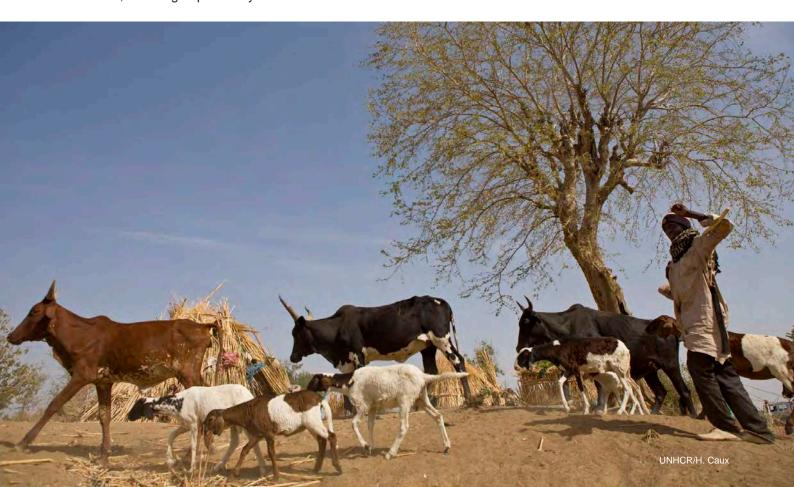
The main response activities will target 304,289 PoCs and focus on the following: The humanitarian community will create an autonomous and sustainable gas-provision system for 20,000 vulnerable households (145,000 individuals) across the Diffa region, in partnership with the private sector. The initial investment (gas bottle and accessories) will be subsidized, and six months of refills will be provided for the 20,000 beneficiaries households. The private sector will install selling/storage/refill points in seven communities in the Diffa region. PoCs will benefit from an extensive awareness-raising campaign on the safe use of gas and its benefits.

Production kits and various inputs will be provided to approximately 18,807 vulnerable individuals in order to enable them to continue with agricultural, fishery and livestock activities. Approximately 16,150 PoCs will receive training and guidance on business market economies, reducing dependency on traditional

revenue sources within the region which have been disrupted by insecurity. Approximately 49,250 PoCs will receive training in life skills, functional literacy, and numeracy, to enable them to participate in livelihood activities. Capacity building will be provided to trainers.

Humanitarian response partners will work closely with the Government to access land required for agricultural and pastoral activities. Partners will also provide grants to approximately 10,650 small scale farmers to reduce their financial vulnerability and debts, with particular focus on single women-headed households.

Approximately 42,600 PoCs will benefit from emergency public works, micro-enterprise and income-generating activities around the restoration of the environment, sanitation, rehabilitation of community infrastructures. Socio-economic initiatives will be promoted.



OBJECTIVE: Population has sufficient access to energy that is environmentally friendly INDICATOR: 21,000 households with access to sustainable energy

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Domestic fuel provided	145,000 PoCs per month receiving fuel	1,291,088
Training and distribution of fuel efficient stoves to the refugees and communities	58,575 households	550,000

OBJECTIVE: Self-reliance and livelihoods improved INDICATOR: 55% of the targeted population provided with alternative livelihoods support

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Access to agriculture/ livestock/ fisheries production enabled	72,057 PoCs receiving production kits or inputs for agriculture/ livestock/ fisheries activities	7,174,083
Access to self-employment/ business facilitated	16,150 PoCs provided with guidance on business market opportunities	1,867,844
Vocational training/ technical skills provided	12,507 PoCs receiving life-skills training for livelihood purposes	1,930,376



Current situation

Rapid needs assessments and multi-sectorial assessments in 2015 identified the Departments of Diffa, Bosso, N'Guigmi and Maine Soroa as priority areas for the targeting of shelter assistance. These regions have received the highest influx of refugees and other displaced populations due to attacks by insurgents in Niger villages. In 2015, shelter actors jointly reached more than 45,500 people in and outside the camps with emergency shelter kits. Nevertheless, shelter needs remain very high. In camps, transitional metallic shelters were distributed to 1,000 households. These shelters are more durable than emergency shelters and are more resistant to the extreme weather conditions of the region.

An urbanization programme has been launched in the Diffa region to address land issues in a realistic, structural and sustainable manner. The humanitarian community will work closely with the local authorities to identify land appropriate for development of housing. Local authorities will be provided with extensive support, including financial, administrative and legal. Land will be divided into parcels and distributed to beneficiaries, while a portion will be maintained by the local authorities for the development of roads and community infrastructure. In 2015, four communes received support through this programme, which benefited more than 1,000 vulnerable households

(displaced and member of the host population). Numerous actors distributed NFIs to over 30,000 displaced households (approximately 210,000 people). Moreover, non-food item fairs were organized with local suppliers.

Among the challenges faced by the sector is the provision of emergency shelters to PoCs living in the Department of Bosso, where insurgents have carried out multiple violent attacks. The area is inaccessible to the majority of the humanitarian community. Additionally, the capacity of local authorities to provide housing and land to the displaced population is severely limited. The issue of access to land for the construction of shelters is causing tensions between displaced and host populations. To ensure peaceful coexistence, resolving the housing and land issue is a core element of the overall response.

Prioritized sector needs

The following main needs have been identified by the Shelter and NFIs sector: There is a need for an extensive and comprehensive assessment to identify shelter needs, in particular outside camps.

Mechanisms for the delivery of assistance, including shelters and NFIs to insecure areas which are inaccessible to most of the humanitarian community, must be reinforced. Refugees and vulnerable members of the host population require building plots that are

SECTOR PRIORITIES



22,600
Households will receive a transitional or emergency shelter



15,717
Households will receive Non-Food-Items (NFI)

serviced by the municipalities on which they can build shelters amongst the host population. Municipalities, who have no experience in urbanization planning, require capacity building and additional support.

Sector response plan

The main response activities of the humanitarian community for the Shelter and NFI sector will target 200,000 PoCs and concentrate on the following activities: an extensive needs assessment will be conducted to identify shelter needs both within the camps and outside of the camps. The humanitarian community will deliver shelter and NFI assistance to inaccessible and insecure areas through the implementation of a local project.

Partners will provide financial, administrative and legal support to municipalities to enable them to service land and prepare areas for building plots for

approximately 1,000 vulnerable beneficiary families. They will also ensure capacity development and training to local municipalities in urbanization planning and development.

Delivery of emergency shelters to approximately 15,100 displaced individuals, including refugees, returnees and IDPs, and of transitional/long-term shelters to approximately 7,500 individuals, including refugees, returnees and IDPs, is planned. Partners will also distribute emergency NFI kits to approximately 15,717 households, including refugees, returnees and IDPs.

OBJECTIVE: Shelter and infrastructure established, improved and maintained

INDICATOR: 22,600 shelters provided

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Emergency shelter provided	15,100 emergency shelters provided	3,365,142
Long-term/ permanent shelter provided and sustained	7,500 long-term/permanent shelters provided	4,761,816

OBJECTIVE: Population has sufficient basic and domestic items

INDICATOR: 15,717 households whose needs for basic and domestic items are met

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)	
NFI Kits provided	15,717 households receive NFI kit	3,635,462	

WATER, SANITATION & HYGIENE SECTOR

Current situation

While the water needs in the camps of Sayam forage and Kabelawa are being met by activities implemented in 2015, access to water and sanitation services is of serious concern in host villages and spontaneous settlements. The new influx has put huge pressure on the existing water supply. Access to safe water in the Diffa region is estimated at 43.8 per cent. Surveys conducted in 2014 in some of Diffa's municipalities showed that only one per cent of PoCs have access to sanitation facilities, and very low rates of hand washing. This situation has important public health implications, including the high mortality rates for children underfive, child malnutrition and high risk of epidemics, in particular cholera. In 2015, some 4,542 cases of cholera were reported (week 40), with 175 deaths (week 40).

In 2015, in collaboration with the Regional Directorate of Hydraulics, WASH actors considerably reinforced infrastructure in the two camps of Sayam Forage and Kablewa. In addition, the water system in Kablewa town has been significantly improved and is now connected to the camp, providing water not only to the population of the camp but also to vulnerable members of the host community living in the local town. The supply is also connected to the health centre within the camp, significantly improving sanitary conditions. Much progress has also been made to improve sanitation,

with the construction of semi-permanent latrines and shower blocks in the two camps. Further, access to drinking water was improved for 91,386 PoCs. Some 57,655 people benefitted from access to improved sanitation facilities, which took into account specific needs for children, women and men. More than 185,000 people took part in sensitization activities and received hygiene kits.

One of the main challenges for the WASH sector is the weak presence of private sector companies to construct water infrastructure in the region. Although significant projects are planned, for example the construction of solid waste management systems in both camps, insecurity is affecting the availability of companies operating in the region. In addition, the WASH sector in particular has been facing a significant funding gap. As of September 2015, only 18.3 per cent of the amount required for WASH interventions has been mobilized. The Ebola outbreak in nearby countries in the region and its possible consequences in the Niger territory is also of concern

Prioritized sector needs

The main needs in the WASH sector are as follows: Some 328 additional water points are required in 84 out of 110 host villages assessed in the Diffa region. Concerning sanitation (latrines and showers), the needs are also very high: 89 villages require more than 100

ACHIEVEMENTS AND WAY FORWARD



2014

____2015

2016

1%

57,655



1,320

of people living in Diffa
have access to sanitation people benefit from sanitation
facilities activities

new latrines will be built for about 58,705 people

latrines each. Awareness-raising and promotion of good hygiene practices are of paramount importance. In terms of emergency response after population movements, water treatment at the household level needs to be provided.

Sector response plan

The WASH actors will prioritize their interventions to support host communities, IDPs and refugees (340,000 people targeted based on their level of vulnerability) in host communities and spontaneous sites in Diffa region. This includes approximately 100,000 refugees

and returned Niger migrants, 100,000 IDPs, and 150,000 people from host communities. Interventions include the following: Partners will ensure access to clean water through the construction/rehabilitation of WASH infrastructures and water treatment at household level. Provision of community led total sanitation, distribution of hygiene kits, and sensitization campaigns for the population. WASH emergency response will be provided in spontaneous sites. WASH actors will ensure the prevention and the response to another cholera outbreak in Diffa region. WASH actors will ensure the implementation of the "WASH in Nut" approach in 54 nutritional centers in Diffa region (14,442 children suffering from SAM should benefit from the WASH in Nut package).

OBJECTIVE: Supply of potable water increased or maintained INDICATOR: 80% of targeted persons with access to potable water

ОИТРИТ	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Water systems constructed, rehabilitated or maintained (in and out of the camps)	75 water points constructed, rehabilitated or maintained	3,392,028
Emergency WASH boreholes	22,500 people reached with the emergency WASH response	300,000

OBJECTIVE: Population lives in satisfactory conditions of sanitation and hygiene INDICATOR: 58,705 persons with access to sanitary facilities/ latrines

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
Sanitary facilities/ latrines constructed	1,320 sanitary facilities/ latrines constructed	2,556,505
Hygiene promotion, including cholera prevention campaign realized	173,565 persons reached by the campaigns	1,185,204
Hygiene and wash emergency kits distributed	173,565 hygiene and WASH kits distributed	1,467,054

OBJECTIVE: WASH in Nut approach implemented INDICATOR: 14,442 persons reached by the WASH in Nut approach at nutritional centres

OUTPUT	TARGET & INDICATOR	FUNDING NEEDS (US\$)
WASH infrastructures at the level of the nutritional centres strengthened	54 nutritional centres' WASH infrastructures strengthened	268,645
"WASH in Nut" package to mother-malnourished children couples provided	14,442 WASH in Nut packages distributed	195,659

FINANCIAL REQUIREMENTS

by Agency & Sector

ORGANIZATION	PROTECTION	EDUCATION	FOOD SECURITY	HEALTH & NUTRITION	LIVELIHOODS & ENVIRONMENT	SHELTER & NFI	WASH	INTER-AGEN- CY COOR- DINATION / INFORMATION SHARING
ACF					1,920,000		1,032,500	
ACTED	51,200	362,100		93,650	343,800		797,400	308,900
ADRA							146,284	
Care International	166,769							
CISP						3,799,382		
COOPI	567,100	535,000				1,700,000		
FAO					2,750,000			
Help/ Welthungerhilfe	400,000			900,000	1,200,000			
IEDA Relief					482,757			
IRC	1,070,000					1,217,000	895,000	52,000
LRC						900,000	300,000	
OCHA								185,000
OXFAM			572,680		290,683		480,744	
Plan International	215,232	737,471				142,378		
Save the Children	450,000		2,700,000	2,767,331		180,000	1,000,000	
UNDP	774,210				2,653,000			
UNFPA				725,000				
UNHCR	5,456,011	1,499,990		1,499,990	3,173,151	3,823,660	1,723,945	372,774
UNICEF	1,332,380	3,000,000		2,105,560			2,989,222	
UN Women	1,242,000							
WFP			41,914,624	5,097,188				
WHO				1,014,574				
Total	11,724,902	6,134,561	45,187,304	14,203,293	12,813,391	11,762,420	9,365,095	918,674

by Agency

ORGANIZATION	TOTAL REQUIREMENTS (USD)
ACF	2,952,500
ACTED	1,957,050
ADRA	146,284
Care International	166,769
CISP	3,799,382
COOPI	2,802,100
FAO	2,750,000
Help/Welthungerhilfe	2,500,000
IEDA Relief	482,757
IRC	3,234,000
LRC	1,200,000
OCHA	185,000
OXFAM	1,344,107
Plan International	1,095,081
Save the Children	7,097,331
UNDP	3,427,210
UNFPA	725,000
UNHCR	17,549,521
UNICEF	9,427,162
UN Women	1,242,000
WFP	47,011,812
WHO	1,014,574
Total	112,109,640

ANNEX

ANNEX I

List of Acronyms

ACF Action Contre la Faim

ACTED Agency for Technical Cooperation and Development

ADRA Adventist Development and Relief Agency

AGD Age, gender and diversity ASOL Afrique Solidarité Suisse

CISP Comitato Internazionale per lo Sviluppo dei Popoli

CLTS Community-led total sanitation

CMAM Community-based management of acute malnutrition

CNARR Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des

Rapatriés

COOPI Cooperazione Internazionale

ECCD Early childhood care and development centre

EiE Education in emergencies

FAO Food and Agriculture Organization

GAM Global acute malnutrition
GBV Gender-based violence

HCT Humanitarian Country Team IDP Internally displaced people IGA Income-generating activities

imam Integrated management of moderate acute malnutrition

IMC International Medical Corps

IMCI Integrated management of childhood illness

INTERSOS INTERSOS Organizzazione Umanitaria IOM International Organization for Migration

IRC International Rescue Committee
IYCF Infant and young child feeding

LRC Luxembourg Red Cross

MAM Moderate acute malnutrition

MINEDUB Ministère de l'Enseignement de Base

MINESEC Ministère des Enseignements secondaires

MoH Ministry of Health

MUAC Mid-upper arm circumference

NFI Non-food items

PEP Post-exposure prophylaxis

PLW Pregnant and lactating women

PMTCT Prevention of mother-to-child transmission

PoC Persons of concern RH Reproductive health

SAM Severe acute malnutrition

SENS Standardized Expanded Nutrition Survey

SGBV Sexual and gender-based violence

SMART Standardized Monitoring and Assessment of Relief and Transitions

SOP Standard Operation Procedures

STI Sexually transmitted disease TLS Temporary learning space

UNDP United Nations Development Programme

UNESCO United Nations Educational, Scientific and Cultural Organization

UNFPA United Nations Population Fund

UNHCR United Nations High Commissioner for Refugees

UNICEF United Nations Children's Fund

UNOCHA United Nations Office for the Coordination of Humanitarian Affairs

UN Women United Nations Entity for Gender Equality and the Empowerment of Women

WASH Water, sanitation and health WFP World Food Programme WHO World Health Organization

Working together

























































and ASOL-SUISSE