

# RAPID PROTECTION ASSESSMENT IN LIBERATED LGAs, BORNO STATE





# INTRODUCTION

The relative improvement of the security situation in Borno has enabled humanitarian access to areas that were previously cut off. As new areas become accessible, more people in urgent need of assistance are being found in devastating conditions. While Nigerian Government and UN organizations have stepped up relief assistance, the situation in the newly liberated areas requires a much faster, robust and well-coordinated humanitarian response. Despite a relative improvement in terms of access to population of concern and critical life threatening needs

experienced by the populace, it is however worthy to outline that many localities in Borno state still remain inaccessible owing to the ongoing violence and insecurity. In the current operational context, the protection crisis in Borno state remains severe with significant level of protection needs and risks unaddressed.

UNHCR joined the humanitarian team to conduct protection assessment in Bama on 21 and 30 June 2016, conducted assessment in Konduga on 30 June 2016 and in Monguno on 4 July 2016.

**The overall situation is bad and needs faster and well-coordinated humanitarian response.**



Bama, Borno © UNHCR.

# METHODOLOGY

A rapid needs assessment approach was adopted. Key informant interviews (KIIs) were conducted based on their insight into the needs of the affected community members. The KIIs included soldiers manning the IDPs camps, IDPs leaders, staff working in the camps, host community leaders and religious leaders. Focus group discussions were conducted with women, men and adolescent children. A structured questionnaire was used that enquired about the immediate needs and identified key vulnerabilities. The interviewers also toured the camps and host communities to record their observations.

Information collected was divided into 8 sections as follows:

- Route information and demographics showing estimated number of population including areas of origin, ethnicity and number of years displaced.
- Camp coordination
- Safety and physical risks
- Specific vulnerabilities, Sexual exploitation and Child protection issues
- Access to service
- Psychosocial distress and support mechanisms
- Access to information
- Urgent needs

**In all check points, male pedestrians have to lift their shirts ensure that they are not carrying IED.**



# SUMMARY OF KEY FINDINGS

## 1. BAMA LOCAL GOVERNMENT

### 1.1 Route, Military Briefing and Demographics

The assessment in Bama was conducted on 21 and 30 June 2016. The humanitarian team included UNHCR, OCHA, WFP, IOM, MSF and SEMA. Bama is approximately 70 kilometers southeast of Maiduguri. The assessment team departed from Maiduguri on 11 May 2016 at 09:05 and arrived in Bama at 11: 15. The road to Bama is paved with potholes particularly after Konduga town. While one could observe civilian cars from Maiduguri to Konduga, there were only military vehicles from Konduga to Bama. At Konduga no vehicles are allowed into Bama without heavy military escort. The town is deserted and building structures destroyed. There are no social services.



25,036

Current estimated IDPs population



15,302

Current Children IDPs population



6,462

Current female IDPs population



3,272

Current male IDPs population

Upon arrival, the team made a courtesy call at the Military Base and Colonel Adamu Laka briefed the team. He welcome and thanked the UN agencies for their concern and supports to IDPs in Bama and he informed the mission of the current estimated 25,036 individual IDPs population in the camp after the evacuation of about 1,128 individuals for medical attention to Maiduguri and 188 deaths. He welcomed any partner who wants to bring assistance to the IDPs in Bama and pointed out that he is ready to provide military escort and access to the camp. Talking of the IDP camp which is located in the general hospital compound he noted that “[the humanitarian situation is very critical, with severe malnourished IDPs especially children, inadequate WASH, medical services and shelter needs](#)”. Children don’t have access to education and there is urgent need for non-food items and shelter as some IDPs sleep out in the open.

### 1.2 Camp coordination

The camp is located in a destroyed hospital compound with 3,272 male, 6,462 female and 15,302 children. Majority of IDPs are women and children. Subsequent to the ongoing military offensives on BHT (Boko Haram Terrorists), an average of 30 new arrivals are registered in Bama IDP Camp on a daily basis. The camp is managed by the military command, 21 Brigade for almost one year, with supports from the Civilian Joint Task Force (CJTF). The military requested the humanitarian community to put in place a standard camp management, coordination and administration structure.

### 1.3 Safety and physical risks

IDPs reported that they are safe in the camps, which is patrolled by the military and CJTF. Access to and from the camp is carefully controlled by the military and CJTF. Women are not allowed to go outside the camp.

Shelter: The hospital structure is overcrowded with IDPs. Others live in makeshift shelter made of worn out zinc, taken from destroyed houses. The zinc is full of holes and cannot offer protective cover during the rainy season. Some IDPs have no shelter and are sleeping outside in the open.

### 1.4 Specific Vulnerabilities, Sexual exploitation and Child protection

Women reported exposure to sexual and gender based violence especially when they were under Boko Haram captivity. Some IDPs reported incidents of SGBV involving CJTF. There are unaccompanied and separated children. Children are not even playing due to hunger. IDPs movement outside the camp is strictly restricted for female, only men are time to time allowed to go out to look for firewood within the town.



### 1.5 Access to service

All IDPs have access to food although it is not yet adequate. The military reported that the available food stuff in the warehouse was provided by the Government, Dangote Foundation and ICRC but it will not last for more than two months. WFP pledged to complement the effort of the Government by providing food stuff for three months from where the current stock stops. IDP's complained that there is no special feeding for the elderly and special cases such as pregnant and lactating women. Some IDPs recommended individual cooking as opposed to communal cooking citing poor quality of food and inadequate quantity. In most cases food was provided once a day. The military and CJTF have resolved to strictly control food distribution in order to mitigate the risk for the beneficiaries to share food with members of BHT. This distribution strategy should be revised as humanitarian assistance should be based only on the need not on any other consideration or hidden agenda.

**Basic household items:** IDP households are lacking a wide range of basic non-food items, particularly bedding/nets, hygiene supplies, and sufficient clothing.

**Water supply/sanitation and hygiene:** There are six boreholes in the camp, 4 are operational, 2 are not and diesel for the generator is provided by the state Government to pump water for IDPs. No functional toilets, bath and sanitation facilities. IDPs practice open defecation, posing health risks. IDPs do not have adequate water storage containers.

**Livelihoods:** Many IDPs are desperate to start earning income and support themselves, but there is no capital to restore or start up livelihood activities.

**School:** There is neither formal nor informal school in the camp for children.

### 1.6 Psychosocial distress and support mechanism

The IDPs noted that the conflict situation has exposed them to much distress, especially for the community members recently rescued from Boko Haram. Adults expressed difficulties and lack of dignity associated with the situation in the camp.

### 1.7 Access to information

There is no phone network in the area and no power. IDPs access information mainly through CJTF.

### 1.8 Urgent needs

The IDPs cited the following priority need:

**Some IDPs have no shelter and are sleeping outside in the open.**



Adequate food



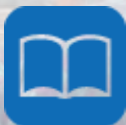
Medical assistance



Shelter



NFIs- clothes, soap, slippers, mattress, mats, blankets and jerry cans and for women, sanitary



Education for their children and life skills for the adolescents and adults

## 2. KONDUGA LOCAL GOVERNMENT

### 2.1 Route, Military Briefing and Demographics

UNHCR conducted protection assessment in Konduga on 30 June 2016. Konduga town is located 25 kilometers southeast of Maiduguri town. The town is categorized as a high risk area and the assessment team was escorted by the military. The 42 minutes journey passed through a tarmacked road with potholes and patches of cultivated land on the roadside especially around Aro damn village. One could observe makeshift shelters along the way and few civilian vehicles to and from Konduga. There are 4 military checkpoints between Maiduguri and Konduga.

There is one IDP camp in Konduga, which is located in the immediate outskirts of the town in a village called Magarali. The camp hosts 4,012 IDPs. The camp is managed by the military. Captain Suleman briefed and took the team around the camp and host community areas. He noted that most IDPs originates from Konduga LGA and some from Bama LGA. Most of them were under Boko Haram captivity for a long time, some for more than two years. According to him, the IDPs are displaced due to ongoing insurgency and counterinsurgency activity in the LGA. The village and the IDP camp which is located in a former school of business management were populated from August 2015 when the military base was established. According to the military, most people (approximately 60%) in the village estimated to have 13,000 - 14,000 people are IDPs displaced from Bama and Konduga villages. The camp and the host communities are separated by the main road. According to the military, IDPs and host community members are not allowed to move beyond 12 kilometers radius from both sides of the main road. The military reported regular attacks from Boko Haram, even on the night of 29 June 2016, resulting into displacement of 200 people from the village where the battle between the insurgents and the soldiers was fought.

He noted that the government has distributed food in the camp, but the quantities were inadequate. IDPs have a maximum of two meals a day.

### 2.2 Camp Coordination

The camp hosts 4,106 IDPs including 727 male, 1272 women and 2,107 children and is managed by the military who work closely with CJTF and 20 IDPs leaders, representing different villages. Women are not part of the leadership structure but some of them are mainly involved in preparing communal food. No proper registration or profiling exercise has yet taken place. The team observed 'new arrivals' mainly children and women at the gate. The military captain urged the team to sensitize the government to establish proper camp management structure. "The role of the military is to provide protection. We would like to concentrate on this aspect while the government and humanitarian community manage the IDPs camps", he said.

### 2.3 Safety and physical security

IDPs claimed that they feel safe in the camp but fear the ongoing battle between military and BH who have often attacked areas close to the camp and the military base. They were not keen to leave the camp soon claiming that Konduga is not yet safe from BH.

### 2.4 Specific Vulnerabilities, Sexual exploitation and Child protection

The team observed presence of physically and mentally challenged IDPs. The military pointed out that they have observed that women liberated from BH have faced serious sexual abuse including rape and are in need of medical and psychological care. They promised to provide a list of the cases that they are aware of and they took the team to a house of one such victim. The team spoke to two staff operating a clinic in the camp and they also confirmed presence of such cases but noted that they are sometimes stigmatized in the community and often hide themselves.

Women claimed that the IDP camp is safe.

### 2.5 Access to service

Each household has access to distributed items. There are 20 IDPs leaders who ensure that people under their jurisdiction receive distributed items. UNICEF have some local volunteers operating a clinic. The IDPs said that the clinic services are inadequate and sometimes they go to the military base clinic to access health services.

**Shelter:** IDPs are accommodated in the old structures within the school compound, with men and female separated. All buildings are currently stretched beyond capacity and most IDPs have resorted to traditional make shift shelters within the camp and in the host community area. The camp has very limited space for new shelter construction.

**WASH:** The camp has 2 boreholes, operated by a generator. At the time of the assessment the generator was not functional and IDPs were fetching water from host community, at a price of 5 Naira per one jerry can. There are few pit latrines which are almost full. IDPs complained of inadequate food, water, medicine and shelter

2.6 Psychosocial distress and support mechanism

The team observed some women who were obviously mentally disturbed. The military commander noted that is not uncommon especially amongst the liberated women. He observed that “Hunger is truly traumatizing. It is horrible to face certain death by starvation. It erodes all sense of dignity.”

2.7 Access to information

There is no phone network in the area and no power. The only option to get network is on top of a tree at the military base as shown below.

2.8 Livelihood

The team observed copying mechanism for IDPs in the host community areas. Some youth were engaged in operating men hair cutting saloon under a tree. They requested support to build a shaded area and to buy more equipment.

During discussion with the religious leaders and elders in the community, they pointed out that with the presence of military the village is relatively peaceful and BH attacks less frequent. The leaders noted that the main challenge is livelihood mechanisms. They took the team around the village where one could observe men engaged in making fish nets. During the rainy season, fishing is the main activity in Konduga town. The women requested support in knitting projects.

2.9 Urgent needs

The IDPs cited the following priority needs:

All buildings are currently stretched beyond capacity and most IDPs have resorted to traditional make shift shelters.



Food was identified by all IDPs in the camps and host community as a priority needs. The military and CJTF commander pointed out that it is important for the humanitarian community to remember that 60% of the IDPs are in the host community and they have similar needs



Education. In the host community the team observed an initiative by a young man called Habu Adamu to provide basic education to 70 students (39 girls and 31 boys) aged between 8 and 13 under a tree. He requested a tent and support in learning materials



Basic NFIs



Support to improve livelihood



Medical care



Shelter



## 3. MONGUNO LOCAL GOVERNMENT

### 3.1 Route, Military Briefing and Demographics

**The humanitarian team conducted assessment in Konduga on 4 July 2016.** Monguno town is located approximately 137 kilometers northeast of Maiduguri town. The town is categorized as a high risk area and the assessment team composed of UNHCR, OCHA, UNICEF, WFP, FAO and IOM was escorted by military (heavy escort). The two hours journey from 8:56 a.m to 10:55 a.m passed through a tarmacked road with potholes in few areas. One can see fallen electric poles and carcasses of dead animals due to IED. People have commenced life between Maiduguri and Gajiram where markets, shops and patches of cultivated land were observed. There are 4 military checkpoints between Maiduguri and Monguno.

In all check points male pedestrians have to lift their shirts and expose their waists to ensure that they are not carrying IED. In the last checkpoint they have to remove the shirts/upper clothes completely and walk with their hands up through the entire checkpoint of about one kilometer. Women do not remove clothes but put their hands up.

Upon arrival the assessment team paid a courtesy call to the military command in charge of Monguno. UNHCR HOSO who was the team leader stated the main purpose of the mission, to assess the humanitarian situation for IDPs in Monguno LGA. The team was briefed by Brigadier General Okwonko, who is in charge of 8 Task Force Division, in presence of Brigadier General Lawa and Lagbaga and 8 colonels including Colonel Emere who is in charge of IDPs camp management and also NGOs contact in Monguno.

Br. Gen. Okwonko mentioned the army areas of operation including Gubio, Ngaza, Abadan, Baga, Magumeri and Monguno town. He noted that while most of these areas are safe, Boko Haram attacks are still experienced in some areas, including on 4 July 2016 morning where 4 suicide bombers attacked Monguno town. According to him IDPs camps are relatively safe.

The assessment team asked questions about the humanitarian situation in IDPs camps, trends of IDPs movement, risks of SGBV, livelihood opportunities and safety for humanitarian actors who may wish to respond to the needs.

The army responded that there are approximately 63,000 IDPs in the camps, most of them coming from surrounding villages that were under Boko Haram control. Boko Haram prefers to use civilian shield. The number of IDPs is increasing steadily due to ongoing counterinsurgency and liberation of areas. Most IDPs are living in host communities but their number is unknown. He noted that IDPs camps are overcrowded and there is a need to decongest them. He talked of a plan by state government to move the IDPs to another location to allow opening of schools, and that the army has been tasked to find a suitable place for relocation possibly by September 2016. He could not comment further on how this move is planned in terms of shelter and necessary camp infrastructure.

**He pointed out that the main challenges in the IDPs camps include inadequate food, malnutrition, absence of WASH infrastructure and health care.** He noted that the camp is safe from SGBV incidents but that is not guaranteed in areas outside the camps, where women will be more open to respond to this question to humanitarian actors than to the military officials. For livelihood opportunities he mentioned agriculture as one of the main livelihood activities in Monguno.

Colonel Emere took the assessment team to two big camps, the Government Girls School and the Government Science school located within Monguno town. There are other smaller IDP camps within town close to the Government Clinic and pockets of IDPs in host communities.





Monguno, Borno © UNHCR.

### 3.2 Camp Coordination

The camp hosts about 63,000 IDPs, and is managed by the military who work closely with CJTF. There is neither IDP leadership structure nor proper registration and profiling of the IDPs. The team observed some 'new arrivals' mainly children and women at the gate. **The Colonel reiterated the message that we have received from the military in all liberated areas, that the government and humanitarian community should establish proper camp management and camp coordination structure.**

### 3.3 Safety and physical security

IDPs claimed that they feel safe in the camp, but women were afraid to go outside the camp without male escort due to fear of attack from Boko Haram. IDPs were free to move inside and outside the camp, and at the gate CJTF were checking people who were coming into the camp. The Government Girls School camp is very big and sprawling across a big open space. The area is patrolled by the military and CJTF.

### 3.4 Specific Vulnerabilities, Sexual exploitation and Child protection

The team observed presence of physically and mentally challenged IDPs. Women and girls claimed that they are safe in the camps and there are no SGBV incidents within the camp. There are no schools or playing space for children, most of them looking very sad. **Most of the children and some adults are malnourished, some of them severely. This situation is life threatening and urgent measures needs to be taken to save lives.**

### 3.5 Access to service

According to IDPs, very few distribution in terms of food and NFIs have been conducted in the camp, covering some households. **Access to distributed items is not guaranteed for everybody.** Some IDPs mentioned that distribution model should change, as some people have access to more tokens and they sell them for 5,000 Naira. As a result, most vulnerable IDPs are left out.

**Shelter and WASH:** In Government Science School IDPs are occupying overcrowded classroom and **most IDPs are living in makeshift shelters made of torn clothes and sticks.** In the Government Girls camp IDPs have makeshift shelters. **There are no WASH infrastructure at all. IDPs are digging small shallow holes outside their houses as toilets. Open defecation is the norm for most IDPs. This situation poses a very dangerous health risk.**



### 3.6 Psychosocial distress and support mechanism

The team observed some women and children who were mentally disturbed. While speaking of their situation in the hands of Boko Haram, many of them were tearful when they narrated forced marriage, killing of their family members and abduction.

### 3.7 Access to information

There is no phone network in the area and no power.

### 3.8 Livelihood

There are small markets in both camps selling mainly food stuff. **The market size is not in proportion to the population size at all, implying lack of purchase power on part of IDPs.**

### 3.9 Urgent needs

When asked about livelihoods the IDPs male responded that they will appreciate any support. One IDP commented that “Our utmost priority is to stay alive and hence food distribution is urgently needed”. One team member attempted to give a box of biscuit to a small boy, more than 20 grown men pounced on the boy and started fighting over it. The situation is indeed very bad.

## Most IDPs are living in makeshift shelters made of torn clothes and sticks



Food was identified by all IDPs in the camps and host community as a priority need;



Basic NFIs. Women specifically requested for sanitary kits.



Medical care



Shelter





# RECOMMENDATIONS FOR LIBERATED AREAS

- **There is an urgent need for life saving humanitarian assistance in terms of food, shelter, NFIs, medical and WASH services.** Urgent action is needed to save lives. The government and humanitarian need to devise a plan for operating in an environment which is extremely volatile and risky to save lives.
- **Medical care including improved WASH services and shelter intervention will have immense life-saving contribution.** This is particularly so in light of the rainy season that possesses significant risks to civilians particularly the most vulnerable.
- There is urgent need to address protection needs of most vulnerable IDPs including separated children, orphans, older persons, survivors of violence and persons with disabilities and **implementation of livelihood support projects to mitigate their risk.**
- **The military in both LGAs have strongly advocated for proper camp coordination and camp management structures to ensure proper protection mechanism.** It is also important to note the inevitable reduction of protection space when IDPs camps are manned by the military, and the consequent effects to most vulnerable populations including women and children and other groups with special needs that needs to be identified and addressed. This also includes freedom of movement.
- **Psychosocial response is needed urgently to address effects of serious human rights violations in particular for liberated IDPs especially women and children** who have witnessed murder, subjected to forced abductions, sexual abuse, forced marriages, forced religious conversions and participation in insurgency activities.
- There is a need to **develop procedures providing guidance on how civilians rescued by the military in newly accessed areas will be handled.** These procedures should promote access to services, engagement of independent humanitarian and protection actors and family unity.
- **UNHCR/PSWG and humanitarian actors should liaise with SEMA/NEMA to ensure that camps are manned by civilian camp coordinators with strong involvement of State authorities to fast track deployment of law enforcement officials to liberated areas.**
- More detailed joint protection needs assessment to the liberated areas are essential to identify protection needs of the populations and support robust response.
- There is a need to **develop IDPs capacity to monitor protection within existing camps and promote administration of the camps in a manner that advances protection outcomes including safety and security.** Concerted action should be taken to promote women participation in leadership structure. In both areas women are not part of leadership structure.
- There is need to support capacity building of military and law enforcement personnel including female police officers in the liberated LGAs.
- In relatively stable areas such as Konduga, there is a **need to support the communities in livelihood initiatives.**
- Humanitarian partners dealing with education should support community initiatives to educate children in Konduga by providing scholastic materials.

# UNHCR RESPONSE AND PLAN OF ACTION FOR LIBERATED AREAS

## Protection Assessment

UNHCR has conducted protection assessments in Damboa, Dikwa, Bama, Konduga and Monguno. The results of the assessments has been published and shared widely with the humanitarian community and government actors. This activity is ongoing.

## Protection Monitoring and Vulnerability Profiling

Continuous protection monitoring and profiling of vulnerable cases is crucial to enable targeted humanitarian assistance. UNHCR has worked closely with a local organization BAM COOPI to monitor the protection situation in liberated areas, especially in Bama and Konduga and to profile most vulnerable population for urgent assistance. UNHCR is in the process of establishing Protection Action Groups (PAGs) in the liberated areas to enhance protection monitoring. The PAGs are based in the localities and have close links with community leaders and security actors within the localities. In Maiduguri 25 PAGs have been established under a protection monitoring project implemented in collaboration with IRC. Identified cases are referred within the ambit of recently established PSWG referral and tracking system with relevant protection agencies, including child protection agencies, to ensure that vulnerable cases receive necessary services and are tracked accordingly.

Vulnerability screening in liberated areas is ongoing. UNHCR has provided NFIs to identified 27,250 vulnerable population in Borno state. Currently UNHCR is working with FHI360 to screen and profile most vulnerable cases.

## Shelter intervention

UNHCR standard shelter has provided dignified accommodation and offered a considerable improvement from makeshift shelter constructed by IDPs as a coping strategy. Shelter activities included components to improve sanitation facilities and management of solid waste in IDPs camps as a response to massive WASH challenges especially in Borno camps.

The organisation has provided emergency shelter, communal shelters and plastic sheets in Borno to 573 households as follows: 500 family shelter in Bakassi camp, 8 shelter in Gubio and 15 in Cahn Centre camps. 2 large communal shelter were constructed in NYSC covering 50 households.

UNHCR has expanded shelter project to the host communities, whereby there are two ongoing projects to construct 600 shelter in host communities in collaboration with INTERSOS (200) and NRC (400) expected to be finalised by July 2016.

In liberated areas UNHCR plans to construct communal shelter and family tents as an urgent measure to alleviate the suffering of people sleeping out in the open. UNHCR is conducting a detailed assessment of IDPs in liberated host communities for emergency family shelter project.



## Distribution of Non-food items

UNHCR has responded immediately to urgent needs of NFIs both in liberated areas and in the IDPs informal settlements within Maiduguri host communities. UNHCR NFI package has 12 items including mattress, mat, bucket, mosquito nets, jerry can, slippers, solar lamp, sanitary kit for women, kitchen set with pots, plates, and spoons and antiseptic bathing and washing soap. A total number of 27,250 people/5,967 households have been reached as follows:

6,144 IDPs/ 2,000 households from Mafa, Konduga and Bama LGAs in Muna garage;

5, 431 IDPs/1,000 households in Damboa LGA;

4,940 IDPs/1,000 households in Bama LGA including IDPs from Monguno. Due to severe starvation leading to death of IDPs especially children, UNHCR provided food to --- IDPs/----- households in Bama.

2,871 IDPs/ 467 households living in Maiduguri host community areas

7,864 IDPs/ 1,500 households in Konduga LGA.



UNHCR HOSO distributing NFIs in Bama, Borno © UNHCR.

# Camp Management training to military personnel manning IDPs camps in the liberated areas

UNHCR/PSWG have advocated strongly to maintaining the civilian character of the camps and for transfer of camp management from the military to civilian humanitarian personnel. Practically, withdrawal of the military from the recent liberated areas might not be effected immediately and there is urgent need of establishing and agreeing on standard operating procedures which will guide the military to ensure that IDPs rights are protected accordingly and their protection needs responded to. UNHCR has already trained military personnel on camp management in Damboa camp, and training for Bama and Konduga camps is planned to take place by 9 July 2016.

As initial step to maintain the civilian character of the camps, UNHCR is setting up Community-Based Protection Mechanisms including IDPs leaders to enhance transfer of management from military to community based mechanism in the displaced sites. The military is very ready to hand over management of camps to civilian actors.

## Livelihood Support

UNHCR is assessing the feasibility of livelihood support in liberated areas. The most viable location so far is Konduga given the fact that IDPs in the host community has commenced group livelihood initiatives in fish net making, knitting and men saloon.

## Staffing Capacity

UNHCR has increased its protection staffing capacity in Borno state to include 4 protection officers, one shelter officer, and three consultants for legal, SGBV and livelihood projects.



IN PARTNERSHIP WITH



**PROTECTION SECTOR, BORNO NIGERIA**

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