

2017

# HUMANITARIAN RESPONSE PLAN

JANUARY-DECEMBER 2017

SUMMARY

Nov 2016



**NIGERIA**

PEOPLE IN NEED  
BORNO, ADAMAWA  
AND YOBE

PEOPLE TARGETED

REQUIREMENTS  
(US\$)

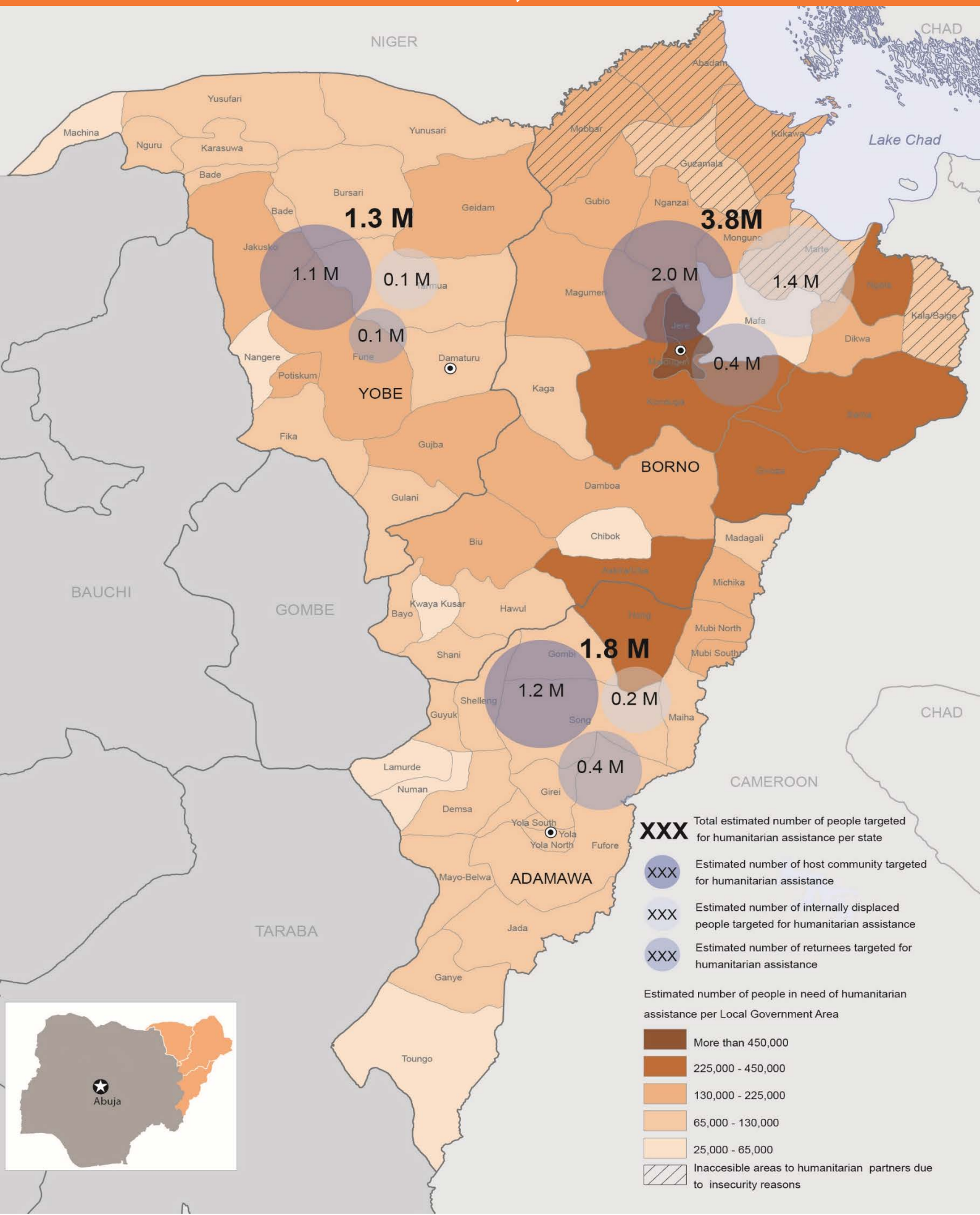
# HUMANITARIAN  
PARTNERS

8.5 M

6.9M

1,054M

75



## FOREWORD BY

# DEPUTY HUMANITARIAN COORDINATOR

The eight-year violent conflict across North East Nigeria has resulted in a deepening humanitarian crisis, the enormity of which grew during 2016 as the Nigerian Armed Forces took back areas previously held by Boko Haram. Already prior to the conflict, the six states in North East Nigeria lagged behind the rest of Nigeria in terms of socio-economic development. The conflict that erupted in 2009 exacerbated an already declining situation. The ensuing violence spilled over to neighbouring states and countries in the Lake Chad Basin causing a regional crisis with mass displacement, as citizens fled for their lives.

While the Humanitarian Needs Overview looked at requirements across the six states of North East Nigeria, the Humanitarian Response Plan for 2017 will focus on 8.5 million people in need of urgent assistance in the most affected states of Borno, Adamawa and Yobe and aims to reach 6.9 million people with life-saving humanitarian support.

The mass movement of people meant that what little livelihoods they could previously access were abandoned, as fields lay fallow for the third year. This resulted in a food and nutrition crisis for 5.1 million people across the three states. As millions escaped the violence, communities opened their doors to relatives and friends and further impoverished their own households while infrastructure strained and resources stretched under an unbearable burden.

Civilians continue to face grave human rights violations and abuses including death, injuries, sexual and gender-based violence, arbitrary detention, disappearances, forced displacement, attacks on civilian sites and forced recruitment; resulting in huge protection needs for the survivors, which must be addressed.

As the most affected state, large areas of Borno remain inaccessible or only partly accessible to the humanitarian community and the fluid security situation means we must adapt and seek more creative ways of reaching communities who require our assistance. The setting up of humanitarian hubs at the end of 2016 and early 2017, strategically placed in hard to reach areas where the need is greatest, will allow responders to be more effective and efficient in the delivery of aid. Humanitarian workers will be able to work in these areas on a rotational basis and support the community with life-saving humanitarian interventions over longer periods than has been possible up to now.

The competing crises around the globe requiring the attention of international donors meant that the narrative on the humanitarian situation unfolding in North East Nigeria was missed but it has now reached proportions that can no longer be ignored. The oil crisis had a knock-on effect of creating a recession in Nigeria and the Government is battling to cope with a downward spiraling economy. No national government alone would be able to cope with such massive numbers of people in need of urgent humanitarian support, and based on the humanitarian imperative the international community stands ready to further support the Nigerian people in this dire situation in the north east.

Our commitment as the humanitarian community will ensure our most experienced, most qualified staff is available for this response, but we also need to provide humanitarian workers with the support they require to work in difficult and insecure circumstances. We welcome the partnership and commitment of the Nigerian Government at both Federal and State level to lead in this response and recognize that it is beyond the capacity of any one party to resolve.

Together with 75 partners, we are seeking US\$1 billion to deliver life-saving assistance and prevent further hardship for the children, women and men in Borno, Adamawa and Yobe States, and we are particularly reaching out to the Nigerian private sector. We are grateful to the international community for their support so far, but we ask for commitments throughout 2017 to prevent this disaster from escalating into widespread catastrophe. Our aspiration is to assist those who so desperately want to return home to do so in a safe and dignified manner with sustainable restoration of livelihoods and access to basic services.

**Peter Lundberg**

## STATEMENT OF SUPPORT

# MINISTER OF STATE

The Government recognizes that violent extremism has and continues to exert untold suffering to the people of North East Nigeria. The grievous extent of the devastation means that the Nigerian people and their government alone cannot cope with the near catastrophic consequences.

We have, therefore, committed substantial resources to combatting insecurity as well as rehabilitation and reconstruction of basic infrastructure destroyed including schools, medical facilities, markets and essential service provision to the most affected people. However, the scale of destruction and the new skills required to ensure a return to normalcy, requires unprecedented levels of partnership between the international humanitarian community and Government of Nigeria, coming together at this critical moment in our history.

Within 2016, the depth of the crisis has become evident, partly due to improved access to some of the most affected people. We are, therefore, gratified to see progress in our joint efforts to respond to the humanitarian needs of people who have been directly affected by the crisis and in critical need of assistance. The Government applauds the determination of the international humanitarian community to appeal for resources to meet the immediate lifesaving needs of nearly 7.0 million people in 2017 through a multi-sectoral approach. We appreciate that this is a daunting task, given the current global economic environment. Nonetheless, this is not a Nigerian issue in isolation or even a regional problem affecting the Lake Chad Basin countries alone but is quickly becoming a global problem that needs global synergies in action to address.

For our part as government, we have demonstrated and will continue to demonstrate strong commitment to working together with the international humanitarian community. We will endeavor to provide an environment in which humanitarians will be able to undertake their priority activities, including security measures, promoting access to the population in need, facilitating and enabling information collection and analysis and engaging global media in telling our story accurately.

The Government will continue to put funding into jointly prioritized sectoral activities so that there will be no gaps in the humanitarian response. These resources will be deployed transparently and in a manner that blends in well with the complementary deployment of resources by the international humanitarian community, including in supporting early recovery and livelihoods.

The Government has recognized the importance of strong leadership and coordination of the Nigeria led joint humanitarian response. As a result, Federal Government of Nigeria has put in place the Inter-Ministerial Task Force (IMTF) under the leadership of the Ministry of Budget and National Planning. The IMTF will develop coordinated plans that acknowledge complementarity of the Humanitarian Response Plan, and create a platform for ensuring that the 2017 Humanitarian Response Plan is supported and aligned with the Federal Government of Nigeria humanitarian and development strategies. Going forward, the Government will replicate lessons learnt at the Federal level at State and LGA levels, to ensure predictability in the way we work together.

The Humanitarian Response Plan for 2017 was developed with extensive consultations between the highest levels of government, the donor community, UN humanitarian organizations as well as international and local NGOs. The HRP is one framework among others currently being utilized by the Government in collaboration with other partners, to build a nexus between immediate and short term humanitarian response and longer term development activities.

I wish to reiterate the appreciation of the Government and people of Nigeria, particularly those of the North East, who, having endured untold suffering are now beginning to see a ray of hope in the horizon. Together, we will not let the men, women, boys and girls down, at this time, when they need our commitment the most.

**Honorable Zainab Ahmed**

Minister of State, Ministry of Budget and National Planning

# THE HUMANITARIAN RESPONSE PLAN

## AT A GLANCE

### STRATEGIC OBJECTIVE 1

Support lifesaving activities and alleviate suffering through integrated and coordinated humanitarian response focusing on the most vulnerable people.

### STRATEGIC OBJECTIVE 2

Enhance access to humanitarian assistance and protection services through principled humanitarian action.

### STRATEGIC OBJECTIVE 3

Foster resilience and durable solutions for affected people through restoration of livelihoods and basic social services.

### PEOPLE IN NEED IN ADAMAWA, BORNO AND YOBE



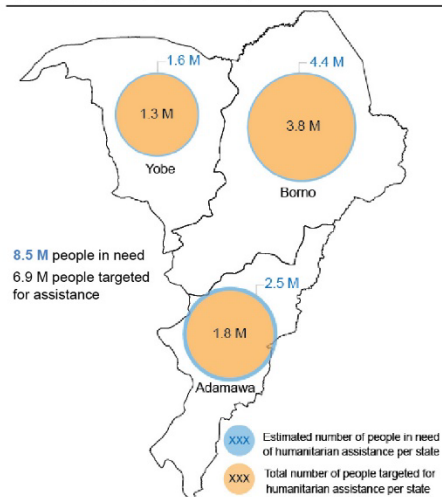
### PEOPLE TARGETED



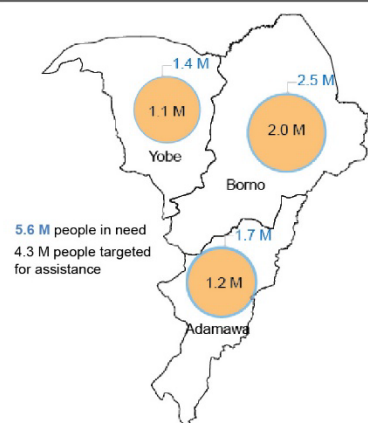
### REQUIREMENTS (US\$)



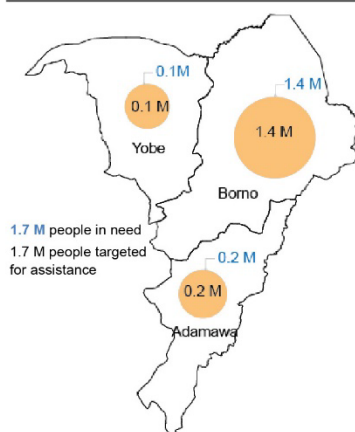
### PEOPLE IN NEED AND TARGETED FOR ASSISTANCE PER STATE



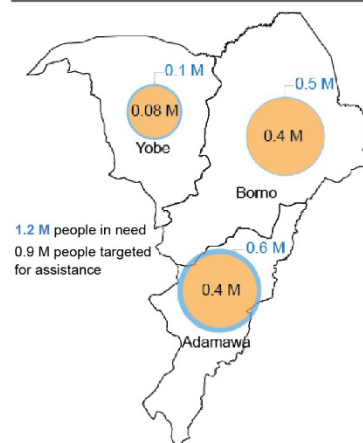
### HOST COMMUNITY



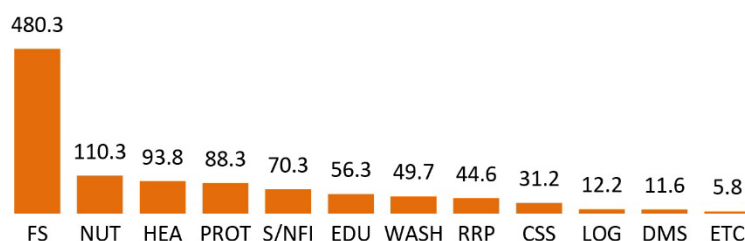
### INTERNALLY DISPLACED PEOPLE



### RETURNEES TO AREAS OF ORIGIN



### FINANCIAL REQUIREMENTS BY SECTOR HRP 2017 (MILLION \$)



FS: Food Security; NUT: Nutrition; HEA: Health; PROT: Protection; S/NFI: Shelter and Non-Food Items; EDU: Education  
WASH: Water-Sanitation and Hygiene; RRP: Recovery and Response Planning (Durable Solutions); CSS: Coordination and Support Services; LOG: Logistics; DMS: Displacement Management Systems; ETC: Emergency Telecommunications

### NUMBER OF PARTNERS



## OVERVIEW OF

# THE CRISIS

**As it reaches its eighth year, the effect of the conflict between Boko Haram and military counter operations in North East Nigeria has reached devastating proportions with widespread forced displacement, acute food and nutrition insecurity and serious violations of international humanitarian and human rights law.** While the Nigerian Armed Forces and community security groups have made significant territorial gains in the fight against Boko Haram, there is ongoing insecurity and Boko Haram continues to pose a threat.

The Humanitarian Response Plan 2017 will focus humanitarian community capacity on responding to the most urgent life-saving needs. **The most directly affected states of Borno, Adamawa and Yobe have an estimated 8.5 million people in need of life-saving assistance and the response aims to reach 6.9 million of the people in need in these three states.**

While access has increased in 2016, it is estimated that many people<sup>1</sup> remain inaccessible in six local government areas (LGAs) in Borno State. The dire situation found in recently accessible areas and the urgent life-saving needs suggest that those still unreachable are in critical need. Thirteen LGAs in Borno, 5 in Yobe and 1 in Adamawa are partially accessible through military secured main routes and at the LGA headquarters. **Reaching all people in need remains the biggest challenge to the humanitarian operation, due to restricted access and high levels of insecurity.** Some NGOs, Government and UN agencies are using military escorts as a last resort to deliver humanitarian assistance in the LGA headquarters, where there are large concentrations of IDPs secured with increased military presence.

**Hunger and malnutrition rates are alarming, as the protection crisis has rapidly developed into a food and nutrition crisis.** Food and nutrition insecurity has reached extreme levels in parts of Borno, Adamawa and Yobe with 5.1 million people projected to be in IPC Phases 3 to 5<sup>2</sup> by June 2017, an increase in 50 per cent severely food insecure since March 2016. In the worst affected and least accessible areas of Borno and Yobe states severe forms of hunger and even famine-like conditions are occurring. Up to 450,000<sup>3</sup> children will suffer severe acute malnutrition in Adamawa, Borno and Yobe over the next 12 months, with 300,000 in Borno alone.

**Health needs remain extreme with many people already in critical health conditions and high prevalence of severe malnourishment, morbidity and mortality.** The lack of basic shelter, water, latrines and shower facilities increases the risks of communicable diseases including cholera and exacerbates malnutrition among children under five. WASH infrastructure needs to be urgently rehabilitated/rebuilt in newly accessible LGAs to minimize waterborne diseases. After two years without a recorded case, four cases of wild polio virus were confirmed in 2016 in Borno, indicating the urgent escalating health needs.

**There are an estimated three million conflict affected children with no access to education.** Prior to the conflict school enrolment and attendance rates in North East Nigeria were among the lowest in the country with girls particularly lagging behind. In some areas schooling has been interrupted for over two years due to the conflict and overcrowding in host communities schools. In a marginalized area that was already underserved in terms of access to education the targeted destruction of more than 1,200 schools have had a devastating impact upon children's right to education.

**Protection needs, particularly in recently accessible areas, remain severe,** especially for vulnerable groups, including women and children, and protection must be at the core of the humanitarian response. Civilians face grave human rights violations and human rights abuses including death, injuries, sexual and gender-based violence, arbitrary detention, disappearances, forced displacement, attacks on civilian sites and forced recruitment. Many families remain separated. Displaced people have experienced trauma and neglect. IDP sites are considered high visibility targets for attacks by Boko Haram, which often results in further restrictions by security actors. Assessments reveal limited access to humanitarian assistance and services contributed to negative coping mechanisms and sexual abuse and exploitations. Vulnerability screening found that 56 percent of GBV cases were associated with survival sex<sup>4</sup>. Children are also joining community security groups.

**There are limited safe, voluntary and sustainable returns of IDPs and refugees.** However, some people are returning into areas which are not safe, with reports of deaths in subsequent Boko Haram attacks and returnees being displaced again. While movement is being organized to bring IDPs back towards their areas of origin, most IDPs are being placed within LGA capitals, and therefore remain displaced. The organized movements of IDPs into their LGAs, without access to the rural areas and agricultural inputs will likely further increase their vulnerability.

<sup>1</sup> Based on the People In Need calculated for the 6 inaccessible LGAs there are 0.7 million people in need in inaccessible areas. This does not include the people in rural areas of partially accessible LGAs that can-not even be estimated at this stage.

<sup>2</sup> The Integrated Food Security Phase Classification (IPC) classifies areas with Acute Food Insecurity: 1: Minimal, 2: Stressed, 3: Crisis, 4: Emergency, and 5: Famine. Figures from Nigeria Cadre Harmonise, Oct 2016

<sup>3</sup> UNICEF estimates

<sup>4</sup> UNHCR Vulnerability Screening Round II, June 2016

## SUMMARY OF

# NEEDS, TARGETS & REQUIREMENTS

### PEOPLE IN NEED



8.5 M

### PEOPLE TARGETED



6.9 M

### REQUIREMENTS (USD)



1,054 M

In 2017 the strategic focus of humanitarian partners will emphasize integrated and coordinated life-saving assistance, enhanced access and protection services, and resilience and durable solutions. The Nigeria Humanitarian Response Plan 2017 includes 172 approved projects to reach 6.9 million people – or roughly 85 per cent of those in need – in the most affected states of Borno, Adamawa and Yobe. This target is realistically based on the capacity of humanitarian partners, the level of access to the most affected people in need and the insecure environment. Implementing the full plan will require more than US\$1 billion.

‘People in Need’<sup>5</sup> are a sub-set of the population living in three states in North East Nigeria whose current level of access to basic services, goods and social protection is estimated as being inadequate to re-establish normal living conditions, in a timely manner without additional assistance. This part of the population’s physical security, basic rights, dignity, living conditions or livelihoods are threatened or are disrupted due to effects of Boko Haram conflict and military operations.

The number of people in need of humanitarian assistance was calculated by humanitarian sectors including nutrition, food security, health, protection, education, displacement management systems, shelter/non-food items and water, sanitation and hygiene. Calculations used a baseline of the 2016 projected population from National Bureau of Statistics, Displacement Tracking Matrix Round XII (October 2016) compiled by NEMA and IOM, the Cadre Harmonisé/FEWSNET and other key assessments.

The Humanitarian Needs Overview (HNO) 2017<sup>6</sup> estimated some 14 million people in need across the six states of the north east. In determining the response for 2017, humanitarian partners agreed to focus on states assessed as the most affected by the violent conflict, infrastructure destruction, mass displacement, ongoing insecurity and ensuing factors. The highest numbers requiring humanitarian assistance are located in Borno, Adamawa and Yobe where 8.5 million people are in need of urgent life-saving assistance.

The subset of people in need is further broken down into sub-categories of IDPs, returnees (former IDPs and refugees), and host communities. This is also broken down per sector, providing details on the intensity, severity or type of need.

**IDPs:** figures taken from DTM Round XII Oct 2016

**Returnees:** figures taken from DTM Round XII and UNHCR registration database.













**Host communities:** communities hosting internally displaced persons (IDPs) or returnees. In the current needs analysis, this category includes people living in six inaccessible LGAs with calculations based on 2016 projected population, minus assessed IDPs from those LGAs.

At all stages of the response, partners will work to ensure that women, men, boys and girls have equitable access to assistance, and also people in need across the categories of IDPs, host communities and returnee populations. Activities included in this HRP passed several rounds of sector scrutiny to ensure they were essential to the plan’s strategic objectives and within current implementation capacity.

<sup>5</sup> Calculating People in Needs is a key part of the humanitarian planning process. Sector people in need figures are estimated based on evidence based data, sector expert input and qualitative information. The overall people in need figure is compiled of the addition of the highest sector people in need figure for each LGA of the three states.

<sup>6</sup> The Humanitarian Needs Overview 2016 was based on four states (Borno, Adamawa, Yobe and Gombe) and the people in need calculation was 7 million.

# SECTOR NEEDS, TARGETS & REQUIREMENTS

| SECTOR   | TOTAL          | % PEOPLE IN NEED TO BE ASSISTED | TARGETED PEOPLE BY STATUS |       |           | TARGETED PEOPLE BY SEX AND AGE |                                | FINANCIAL REQUIREMENTS |
|--|----------------|---------------------------------|---------------------------|-------|-----------|--------------------------------|--------------------------------|------------------------|
|  |                |                                 | IN HOST COMMUNITIES       | IDPs  | RETURNEES | % OF FEMALE MALE               | % OF CHILDREN, ADULTS, ELDERLY |                        |
| <br>Food Security                     | 5.1 M<br>5.1 M | 100%                            | 3.0 M                     | 1.5 M | 0.6 M     | 59%                            | 44%                            | 480.3 M                |
| <br>Nutrition                         | 3.4 M<br>2.7 M | 77%                             | 2.1 M                     | 0.4 M | 0.2 M     | 100%                           | 72%                            | 110.3 M                |
| <br>Health                            | 6.9 M<br>5.9 M | 86%                             | 4.2 M                     | 1.7 M | -         | 54%                            | 59%                            | 93.8 M                 |
| <br>Protection                        | 6.1 M<br>2.4 M | 39%                             | 1.1 M                     | 0.9 M | 0.4 M     | 53%                            | 54%                            | 88.3 M                 |
| <br>Shelter and NFI                   | 2.3 M<br>1.0 M | 35%                             | -                         | 0.9 M | 0.1 M     | 54%                            | 58%                            | 70.3 M                 |
| <br>Education                         | 2.9 M<br>1.6 M | 55%                             | 0.6 M                     | 0.7 M | 0.3 M     | 59%                            | 98%                            | 56.3 M                 |
| <br>Water - Sanitation and Hygiene  | 3.6 M<br>2.0 M | 56%                             | 0.4 M                     | 1.0 M | 0.6 M     | 53%                            | 54%                            | 49.7 M                 |
| <br>Response & Recovery Planning    | -<br>4.5 M     |                                 | 3.5 M                     | 0.6 M | 0.4 M     |                                |                                | 44.6 M                 |
| <br>Displacement Management Systems | 2.3 M<br>0.8 M | 35%                             | -                         | 0.8 M | -         | 54%                            | 58%                            | 11.6 M                 |
| <br>Coordination                    | -<br>-         |                                 | -                         | -     | -         |                                |                                | 31.2 M                 |
| <br>Logistics                       | -<br>-         |                                 | -                         | -     | -         |                                |                                | 12.2 M                 |
| <br>Emergency TeleCommunication     | -<br>-         |                                 | -                         | -     | -         |                                |                                | 5.8 M                  |

# PARTICIPATING ORGANIZATIONS & FUNDING REQUIREMENTS

| ORGANIZATIONS   | REQUIREMENTS (US \$) |
|---|----------------------|
| ACT Alliance / Christian Aid UK (ACT/CA UK)                             | 5,826,717            |
| Action Aid (ActionAid)  | 1,788,077            |
| Action Contre la Faim (ACF)   | 57,265,278           |
| Adventist Development and Relief Agency International (ADRA)            | 2,700,000            |
| American University of Nigeria (AUN)                                    | 90,523               |
| Catholic Caritas Foundation of Nigeria (CCFN)                           | 21,585,134           |
| Catholic Relief Services (CRS)  | 8,078,476            |
| Civil Society Action Coalition on Education for All (CSACEFA)           | 2,469,057            |
| Clear View Integrity Foundation (CVIF)                                  | 27,500               |
| Cooperazione Internazionale (COOPI)                                     | 2,740,212            |
| Danish Refugee Council (DRC)  | 1,067,000            |
| Disaster Waste Recovery (DWR)   | 2,540,556            |
| Food and Agriculture Organization (FAO)                                 | 61,962,500           |
| Hope and Rural Aid Foundation (HARAF)                                   | 750,000              |
| International Center for Accelerated Development (ICAD)                 | 1,500,000            |
| International Centre for Energy, Environment & Development (ICEED)      | 1,909,327            |
| International Federation of Red Cross and Red Crescent Societies (IFRC) | 678,000              |
| International Federation of Women Lawyers (FIDA Nigeria)                | 1,173,296            |
| International Medical Corps (IMC)                                       | 3,593,042            |
| International Organization for Migration (IOM)                          | 58,000,000           |
| International Rescue Committee (IRC)                                    | 25,088,669           |
| INTERSOS Humanitarian Aid Organization (INTERSOS)                       | 9,017,050            |
| Médecins du Monde (MDM)   | 2,336,248            |
| Mercy Corps (Mercy Corps)   | 14,649,643           |
| Mines Advisory Group (MAG)  | 500,000              |
| Norwegian Refugee Council (NRC)   | 11,759,603           |

| ORGANIZATIONS   | REQUIREMENTS (US\$)  |
|---|----------------------|
| Office of the United Nations High Commissioner for Human Rights (OHCHR)   | 560,517              |
| OXFAM Netherlands (NOVIB) (OXFAM Netherlands (NOVIB))                     | 17,976,809           |
| Peacefront for Development Initiative (Peacefront)                        | 390,000              |
| Plan International (Plan)   | 1,441,234            |
| Première Urgence Internationale (PUI)                                     | 18,656,950           |
| Riplington Education Initiative (REI)                                     | 980,000              |
| Save the Children International (SC)                                      | 21,923,762           |
| Society for Water and Sanitation (NEWSAN)                                 | 147,500              |
| Solidarites-France (Solidarites-France)                                   | 6,000,000            |
| SOS Children's Villages (SOS VE)  | 1,065,950            |
| Street Child Organization (Street Child)                                  | 3,769,730            |
| Tearfund (TEARFUND)   | 522,170              |
| The Alliance for International Medical Action (ALIMA)                     | 4,091,164            |
| United Nations Children's Emergency Fund (UNICEF)                         | 143,027,901          |
| United Nations Department of Safety & Security (UNDSS)                    | 4,062,828            |
| United Nations Development Programme (UNDP)                               | 20,160,946           |
| United Nations High Commissioner for Refugees (UNHCR)                     | 66,641,153           |
| United Nations Human Settlements Programme (UN-HABITAT)                   | 3,922,466            |
| United Nations Office for the Coordination of Humanitarian Affairs (OCHA) | 8,630,834            |
| United Nations Population Fund (UNFPA)                                    | 21,397,003           |
| Women in the New Nigeria and Yoputh Empowerment Initiative (WINN)         | 80,523               |
| World Food Programme (WFP)  | 368,554,155          |
| World Health Organization (WHO)   | 37,170,501           |
| ZOA (ZOA)   | 4,161,500            |
| <b>TOTAL</b>  | <b>1,054,431,494</b> |

# WHAT IF ...WE FAIL TO RESPOND

## NUMBER OF PEOPLE IN ACUTE FOOD INSECURITY WILL DRAMATICALLY INCREASE



Over 5 million people will fall into crisis and emergency food insecurity including 120,000 in famine conditions. 2 million people will be one step away from famine. Agricultural communities will collapse and it will take decades to recover.

## INADEQUATE HEALTH SERVICES WILL LEAD TO INCREASED RISK OF DISEASES AND DEATH



Increased rates of illness for 2.6 million people due to communicable diseases such as malaria, acute respiratory tract infections and other diseases. More cases of the wild polio virus which will push Nigeria back to a point where polio will become a major issue again. Fewer vaccinations will increase outbreaks of fatal childhood illnesses. A shortage of basic life-saving medicines and a break down in health service delivery; fewer health facilities with inadequate trained health staff.

## A GENERATION WILL BE LOST WITHOUT ACCESS TO EDUCATION



1.6 million children will have no access to education. Recruitment to armed groups, early marriage/pregnancy, exploitative labour and trafficking of children. Girls and boys left to fend for themselves. Little or no knowledge of essential life-saving skills and knowledge of hygiene and health, physical and psychological integrity, mine awareness and peace-building.

## MILLIONS EXPOSED TO VIOLENCE AND ABUSE



Continued breakdown of family unity and fewer prospects for reintegration and support for returnees back to communities. Lack of acceptance for Boko Haram victims and worsening of their psychosocial wellbeing. Women and girls face sexual and exploitative abuse. Under-age recruitment into armed groups and the negative long-term effects will take years of recovery.

## 450,000 MALNOURISHED CHILDREN WILL FACE DEATH



Every 1 in 5 of the children facing severe acute malnutrition is likely to die.

Children with severe acute malnutrition will be nine times more likely to die than a properly nourished child.

## DISPLACEMENT INCREASES



Further informal settlements will appear without adequate infrastructure, WASH, shelter and livelihoods.

The cycle of violence and displacement will continue as further burden is placed on IDPs and host communities, increasing already fragile vulnerabilities.

