A close-up portrait of a young girl with dark skin and large, expressive eyes. She is wearing a vibrant green headwrap with a woven, mesh-like texture. Her face is partially framed by the golden-brown, woven structure of a basket or container. The lighting is soft, highlighting the texture of her skin and the intricate details of her headwrap.

# NIGERIA REGIONAL REFUGEE RESPONSE PLAN

January — December 2018

**CREDITS:**

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For more information on the Nigeria crisis go to: [Nigeria Information Sharing Portal](#)

**FRONT COVER PHOTOGRAPH:**

*Nigerian refugee, Aissata, 8, peers through the entrance of her hut in the settlement of Mainé-Soroa, in the Diffa region of Niger. She and her family fled to Niger from the border town of Kanama to escape fighting.*

UNHCR / Roberta Russo

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# Foreword



As we launch the fourth Nigeria Regional Refugee Response Plan for 2018, I am very pleased to see, that over the past years the number of partners who joined us in the refugee response has more than doubled, from 23 in 2015 to 47 in 2018. This is an encouraging sign that coordination and cooperation in assisting Nigerian refugees in the Lake Chad Basin is working well, and that we all join forces to give our utmost to help improve their lives.

Yet, the needs of these persons for whom we care have also increased since the Boko Haram crisis began. These needs not only regard basics, such as having free access to asylum and being protected from *refoulement* or forced return, but also being protected from arbitrary detentions. Prevention and protection from the risk of statelessness also remains critical; it currently affects most of the populations living in the region as they do not have proper civil documentation. The *Abuja Action Statement*, the Governments of Cameroon, Chad, Niger and Nigeria signed in 2016 committing to adhere to international binding protection principles, is still valid and gradually being implemented. Faster progress in the implementation of these principles will remain our focus in 2018.

More importantly, in 2018 Nigerian refugees and their hosts will need increased access to livelihoods and their self-reliance potential will need to be strengthened, as the Boko Haram conflict carries on with little hope for a return to peace and stability in the near future. At one point in the first half of 2017, Nigerian refugees were hoping living conditions in their areas of origin had improved, and dared to return in a self-organized manner, mainly from the Far North region in Cameroon and from Diffa in Niger. Most of them engaged in back-and-forth movements across the borders, and sadly, many decided to return to the refugee camps, as neither security conditions, access to basic services and shelter, nor food, water facilities or livelihoods were restored in north-eastern Nigeria to enable them to restart their lives.

One of the most devastating side effects of the conflict is the alarming rise in food insecurity and severe malnutrition populations are facing to date. Over 7.2 million people in the Lake Chad Basin region were food insecure in September 2017. The future of young generations is at stake, as food insecurity not only affects the dignity of families, but has consequences on the physical and cognitive development of children that will permanently impact their mental and physical growth.



Another number that did constantly rise since 2015, is the number of Nigerian refugees all partners plan to cater for in 2018, namely 218,000 refugees and 75,000 host community members who continue to share the biggest burden.

Still, the only amount we did reduce, is our funding needs for 2018: We are asking for US\$ 84 million less than in 2017, not because we plan to do more with less, but because we are aware that our capacities are limited. Hence, within the UNHCR/World Bank partnership, we intend to increasingly engage development actors, to ensure a smooth transition towards providing durable and sustainable solutions for Nigerian refugees and their hosts, especially in Niger and Cameroon, as well as for all other conflict affected populations in the Lake Chad Basin.

I thank you in advance for your continuous support, collaboration and engaged partnerships.



**Liz Kpam Ahua**  
UNHCR Regional Refugee Coordinator  
for the Nigeria crisis

2018 PLANNED RESPONSE

218,000

REFUGEE  
POPULATION

75,000

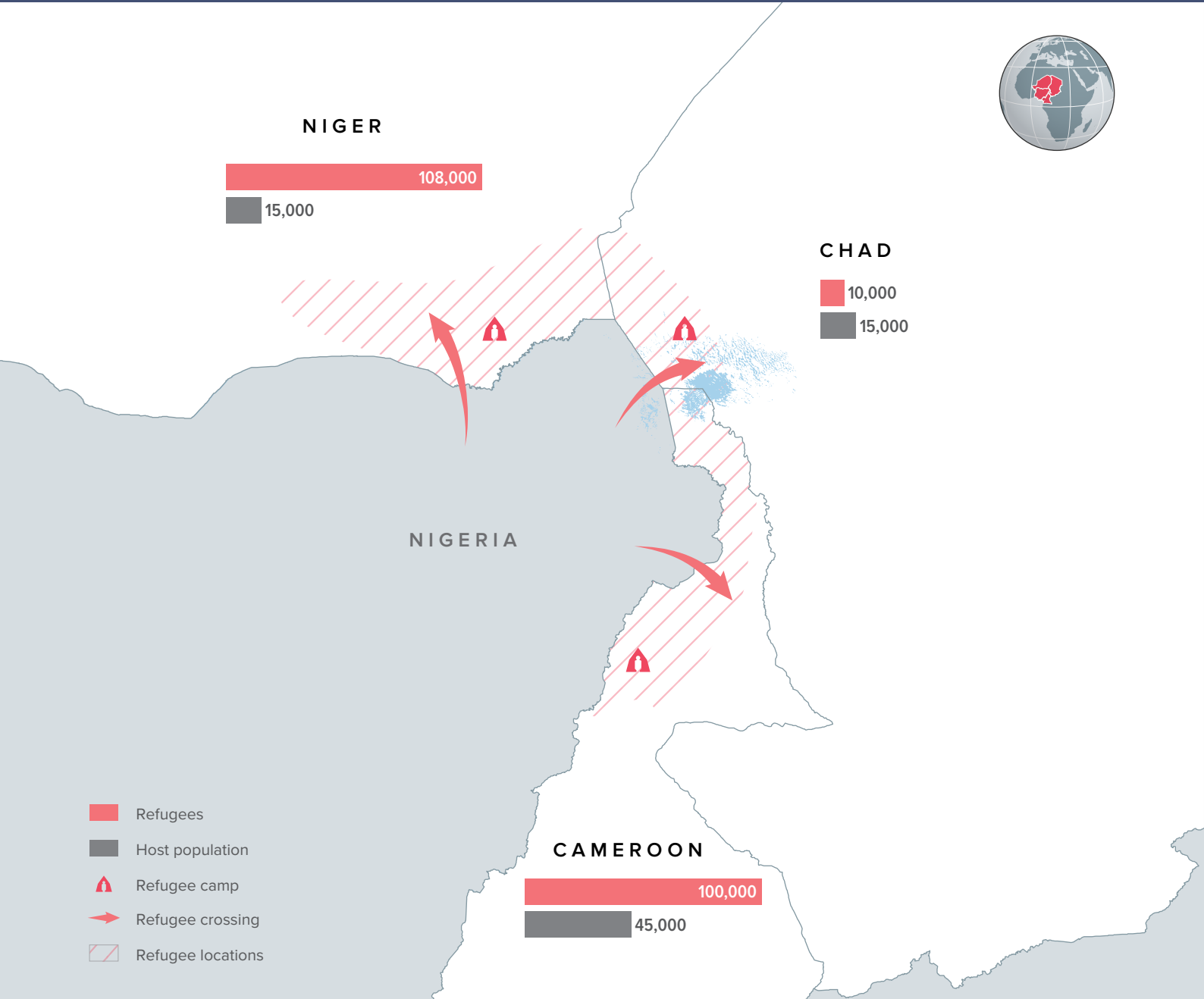
HOST POPULATION  
TARGETED

US\$ 157M

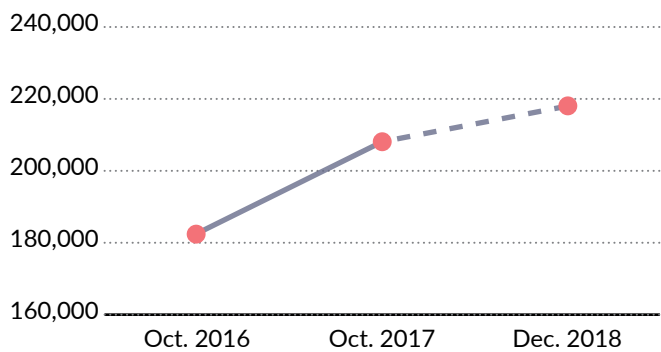
REQUIREMENTS

47

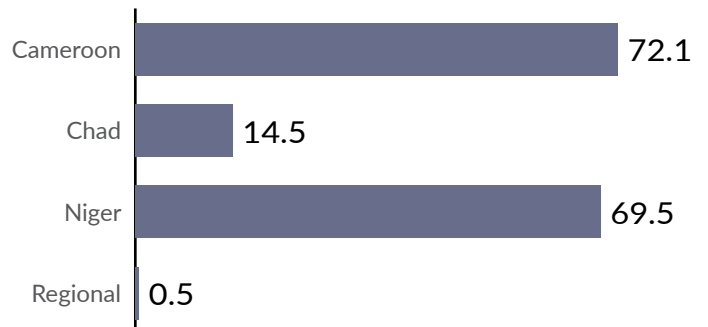
PARTNERS  
INVOLVED



Refugee Population Trends



Requirements | in millions US\$



# Regional Overview

## Introduction

2018 will mark the fifth year of the Nigerian refugee crisis with 218,000 Nigerian refugees expected to be living in and outside of camps with host communities in Cameroon, Chad and Niger. The overall Nigerian refugee population size has fluctuated in 2017, with new arrivals, departures to Nigeria and pendular movements between countries of asylum and Nigeria, owing to the prevailing insecurity and sub-standard living conditions in the country of origin.

In 2017, security conditions improved marginally only in Niger, with less frequent Boko Haram incursions inland, while violent and deadly attacks continued in all three hosting countries, mainly in border areas. As a result, counter-insurgency operations by national military forces and the Multinational Joint Task Force (MNJTF) carried on, contributing to displacement. In those areas where the security situation improved, humanitarian access did as well. In this context, RRRP partner presence increased and a greater number of interventions were carried out.

Security measures such as restrictions on the freedom of movement of refugees significantly affected their livelihoods and self-reliance potential. In some areas, farmers have not been able to engage in agricultural activities and had to abandon fertile areas, while most refugees' access to land is limited anyway; herders face impediments to find pastures, most of the Lake Chad is banned for fishermen and traders cannot move their goods, especially not cross-border. The Boko Haram conflict therefore not only affects refugees, but also

further deteriorated the living conditions and increased the poverty rate of host populations. The absorption capacity of most host villages, including their infrastructure for basic services, is stretched to the limit, increasing the need for humanitarian assistance and interventions by development actors, especially in the health and WASH sectors. In 2017, the Diffa region in Niger witnessed for the first time the outbreak of a Hepatitis E epidemic. Such additional humanitarian emergencies need to be prevented to avoid further deteriorating the living conditions of the displaced populations and their hosts.

In 2018, RRRP partners will focus on interventions aimed at implementing durable solutions, while continuing to support and ensure access to asylum and protection for persons fleeing the conflict. The Tripartite Agreement signed on 2 March 2017 between Nigeria, Cameroon and UNHCR on voluntary repatriation constitutes a key step in that direction, and provides the framework for the safe, dignified and voluntary return and sustainable reintegration of Nigerian refugees living in Cameroon once conditions are conducive in areas of origin. Given that the security situation remains precarious and that access to basic services is severely limited in many areas of Borno State, where most Nigerian refugees come from, these parts of Nigeria are not yet conducive to return. Therefore, RRRP partners will continue providing humanitarian assistance throughout 2018 and in parallel, will implement interventions that support the local integration of those refugees who want to stay.

# Identified Needs & Regional Protection and Response strategy

The 2018–2020 Regional Protection and Response strategy, as outlined below, guides the refugee response in Cameroon, Chad and Niger.

## Protection

### ACCESS TO ASYLUM AND PROTECTION

**Needs** - The crisis continues to cause new displacement and perpetuates insecurity, particularly in border areas. It has hindered refugees living in isolated areas in Cameroon and Chad from accessing protection. Since the beginning, concerns have been raised over the risk of *refoulement* incidents, whether in the form of border closures, forced returns or induced returns. While recognizing the legitimate national security concerns of states affected by the crisis in the context of ongoing terrorist attacks and incursions, and the need to implement measures, some of which may affect refugees, asylum-seekers and other persons of concern, these must be implemented in accordance with international standards and obligations. Security considerations must be addressed in a manner that also ensures refugees are able to access asylum and protection.

**Response** - To ensure this access is maintained, RRP partners will continue to support governments in establishing and bolstering relevant mechanisms and preventive measures that enable states to identify persons entering their territory in a manner that responds to protection needs and satisfies security requirements, in accordance with their obligations under international law. This includes border and protection monitoring, establishing transit centres, joint screening processes for new arrivals, pre-registration, as well as other measures, all conducted in an age and gender sensitive manner. To the extent possible, RRP partners will encourage national entities responsible for asylum and refugees as well as protection actors to be more present in border areas. This, in an effort to provide dignified treatment to persons in need of international protection, in a way that is fully respectful of human rights. All relevant stakeholders will benefit from capacity building on key international protection and human rights standards, including on the limits and safeguards of refugee protection. Furthermore advocacy efforts towards this group will be stepped up in this respect.

### CIVIL REGISTRATION AND DOCUMENTATION FOR REFUGEES

**Needs** - Refugees in countries of asylum need to be registered and provided with appropriate documentation, in accordance with the 1951 Refugee Convention. As access to refugees living in out-of-camp settings (62 per cent) improves, registration and documentation need to follow suit. Among those measures taken in this respect is the shift towards biometric registration in all countries of asylum, which improves the security, convenience and cost effectiveness of population data management. Complicating matters however is a widespread lack of civil





documentation in the Lake Chad Basin, including among refugees, which heightens protection risks, including that of statelessness. In this respect, there is a need to continue supporting governments in improving access to civil registration and civil documentation for all affected populations.

**Response** - RRP partners will continue supporting governments to ensure all refugees are registered and receive appropriate documentation. They will also continue in their efforts to transition towards biometric registration. The registration of all refugees living in host communities will continue as access to hosting areas increases and security conditions improve.

With a view to reducing the risk of statelessness and other protection risks, RRP partners will continue working closely with government authorities, including by issuing birth, marriage and death certificates. These activities will also include leading initiatives aimed at simplifying civil registration procedures, addressing administrative hurdles and increasing government capacity, including by organizing and equipping mobile registration centres, creating additional ones, especially in remote areas, integrating birth registration into other sectors, such as education and health, and reducing the cost of birth registration and documentation.

Awareness-raising campaigns will be conducted among the affected populations on the importance of civil registration, including on the prevention of statelessness. RRP partners will also support governments in ensuring national laws and policies are in accordance with international and regional standards. This includes implementing the 1954 and 1961 statelessness conventions, the *African Charter on the Rights and Welfare of the Child*, and providing support for the adoption of a *Protocol to the African Charter on Human and Peoples' Rights* on the right to nationality and the eradication of statelessness.

## MAINTENANCE OF THE CIVILIAN AND HUMANITARIAN CHARACTER OF REFUGEE HOSTING AREAS

### HUMANITARIAN ACCESS AND CIVIL-MILITARY COORDINATION

**Needs** - Civilians remain at risk of indiscriminate armed attacks by non-state actors, abductions and forced recruitment, as evidenced by the June 2017 double suicide attack on Kablewa IDP camp in Niger's Diffa region, to mention only one incident. Due to insecurity, humanitarian access remains limited in a number of areas, especially along the border. Maintaining the civilian and humanitarian character of refugee hosting areas is critical to ensuring refugees' access to protection and humanitarian assistance and to prevent incidents of sexual and gender-based violence (SGBV), forced and child recruitment. There is a need for RRRP partners to continue supporting states, including through enhanced civil-military coordination, in fulfilling their obligation and responsibility to respect, protect and fulfill the rights of persons on their territory or under their jurisdiction and ensure their wellbeing.

**Response** - RRRP partners will continue working with governments to maintain the civilian and humanitarian character of refugee hosting areas, including through enhanced screening and other security measures. Capacity building on key international protection, refugee, humanitarian and human rights standards will be conducted for security forces, such as police and camp-based security personnel, to maintain the civilian and humanitarian character of displacement sites. Awareness-raising will also be conducted for refugees and other affected populations on their obligations and the importance of maintaining the civilian character of hosting areas. Civil-military coordination mechanisms will be maintained and bolstered to ensure an appropriate distinction between the roles of humanitarian actors and security forces as well as to enable humanitarian actors to reach people in need of assistance in hard to reach areas. RRP partners will also continue promoting and advocating for the identification and separation of armed elements, in accordance with international standards. Furthermore, mine risk education will be promoted for affected populations.

### SUPPORT FOR PERSONS WITH SPECIFIC NEEDS

**Needs** - The crisis has seriously impacted the most vulnerable refugees, particularly unaccompanied and separated children, youth, women at risk, older persons, and those with disabilities and serious health conditions. The number of child and women-headed households is also on the rise. Boko Haram tactics include the abduction of women and girls for sexual abuse, forced marriages and labor, and the kidnapping of boys to serve as fighters or human bombs. Many refugees have been exposed to traumatic events or high levels of daily stress, and are in need of appropriate psychosocial support. Humanitarian actors have also observed a rise in harmful traditional practices, in particular forced and early marriage, among displaced communities in all affected countries. Protection risks are further compounded as displacement becomes more prolonged, and refugees, especially those living in host communities, face difficult living conditions and poor access to basic essential services, resulting in an increase in negative coping mechanisms.

**Response** - RRRP partners will ensure that persons of concern enjoy their rights on an equal footing, taking into account age, gender and diversity, and that they are able to participate fully in the decisions that affect their lives and the lives of their family members and communities. The identification, documentation and monitoring of persons with

## Regional Objectives & Indicators

### PROTECTION

#### **Access to asylum and protection is enhanced**

1,600 representatives of Government authorities, international organizations and civil society trained on refugee protection

#### **Refugees are registered and receive appropriate documentation, and access to civil registration and documentation is enhanced**

Over 95% of refugees registered on an individual basis and received appropriate documentation

#### **The civilian and humanitarian character of refugee hosting areas is maintained and humanitarian access as well as civil-military coordination are strengthened**

550 military and security force elements trained on protection, human rights and humanitarian principles

#### **Persons with specific needs are safe and receive appropriate preventive, responsive and restorative services**

1,796 UASC identified and supported (placed in alternative/ad interim care and/or monitored and/or reunified)

100% of reported SGBV survivors received appropriate support

#### **Refugees are assisted through a comprehensive solutions approach**

12 analyses related to durable solutions conducted, including return intention surveys

specific needs, such as women and children at risk, persons with disabilities and elderly, will continue to be enhanced through multisectoral needs assessments, collaboration with community-based networks and improved registration and profiling.

RRRP partners will also ensure a coordinated response for persons with specific needs, including through multisectoral referrals and assistance as well as enhanced community-based protection mechanisms. Particular attention will be paid to identifying and assisting refugees living in host communities and in remote or newly accessible areas.

Child protection will be enhanced through measures aimed at preventing violence and abuse against children and ensuring they have access to the protection services and the support they need. The identification of and assistance to children at risk will be stepped up, including through improved Best Interest Assessment and Determination processes. Separated or unaccompanied minors will be reunified with their families or provided with alternative care.

SGBV prevention and response will be improved, including through identification, multisectoral referrals and assistance, community-based protection and access to justice. RRRP partners will ensure SGBV is mainstreamed in all aspects of humanitarian interventions and focus will continue to be placed on awareness-raising and capacity building for all relevant stakeholders, including national and local authorities, security forces, the displaced and their hosts.

## COMPREHENSIVE SOLUTIONS FOR REFUGEES

**Needs** - In line with the commitments made in 2016 by the four Lake Chad Basin governments in the *Abuja Action Statement*, there is a need to ensure a comprehensive solutions approach is applied and support for processes aimed at achieving durable solutions for Nigerian refugees is provided. Strengthened engagement, collaboration and coordination by all stakeholders - humanitarian and development actors alike - is required. Alongside new and increasingly prolonged displacement, refugee return movements are being observed, with refugee returns reported by the Nigerian authorities, sometimes under circumstances that have not been voluntary, safe and dignified. Conditions in most parts of north-eastern Nigeria are not yet conducive for return due to continuing insecurity and the absence of basic services, which pose acute humanitarian and protection risks and have resulted in most returnees going into secondary displacement. The cross-border nature of the crisis has disrupted economic and livelihood activities in hosting areas and areas of origin. Indeed, displacement is placing additional strain on already scarce resources and services. Alongside supporting the establishment of adequate conditions for return to Nigeria, there is a need to reinforce refugees' self-reliance potential and the resilience of all affected communities, including by improving local infrastructure and services, livelihood opportunities, peaceful coexistence and social cohesion.

**Response** - RRRP partners will continue to support processes aimed at achieving the main durable solutions for refugees: voluntary repatriation, local integration and resettlement. In conjunction with working to establish appropriate conditions for returns to Nigeria, RRRP partners will enhance the self-reliance and resilience of refugees





with a view to enabling long term solutions. This includes improving sustainable livelihood opportunities, promoting peaceful coexistence through a community-based approach and addressing the needs of host-communities as well as integrating refugees into local and national services.

Governments will be supported in developing comprehensive durable solutions plans for refugees, and ensuring the involvement of the affected populations. Collaboration and coordination between humanitarian and development partners will be further strengthened, as well as joint and coordinated planning to ensure refugees are included in national development plans, programmes and processes. Resettlement will continue to be used as a protection tool for refugees in specific cases.

RRRP partners will also support governments in ensuring that refugee returns are based on well-informed decisions, once conditions are conducive, and that facilitated returns are within the framework of tripartite agreements and respect the principle of *non-refoulement*. Monitoring the voluntariness of return movements will continue as well as support for the reintegration of refugee returnees.

## Humanitarian Assistance and Basic Services

Despite ongoing humanitarian assistance, access to food, education, health services and basic infrastructure as well as livelihood opportunities are still among the main needs of refugees, especially for those living outside of camps and in remote villages.

### EDUCATION

**Needs** - In general, refugee access to quality education has improved thanks to sustained RRRP partner interventions. These have included the construction and maintenance of schools, teacher training, awareness-raising and non-formal education programmes. However, the number of refugees that are out of school remains high (85 per cent in Diffa, Niger). This is due to the security situation, the limited number of qualified teachers, parents' lack of awareness about the importance of education, insufficient numbers of classrooms, canteens, and inadequate school equipment, particularly, in remote villages. Therefore, Nigerian refugee children continue to need support in gaining access to education, including through the construction and rehabilitation of school infrastructure, the provision of school equipment, as well as learning and teaching materials. For their part, teachers need further training to be fully qualified to provide quality education.

In 2016, in Chad's Lake region there were no refugee children at the secondary school level. Education interventions began with the first three levels of primary school while subsequent levels were gradually created. However, in 2018, it will be necessary to establish a high school (lower secondary school) for students that have now graduated from primary school. In Diffa, Niger, two new secondary Distance Education centres for Nigerian refugees were opened, bringing the total number of Distance Education centres in the region to five. This has greatly improved access to secondary education for refugees. Moreover, one of these centres has been accredited as an official examination centre.

**Response** - Of primary importance is preventing the radicalization of young refugees. In this respect, improving access to schools, especially for those young refugees who had never been to school in their lifetime, as well as providing quality education will constitute a key priority in 2018. The Education sector will increase the absorption capacity of schools through the construction and rehabilitation of infrastructure, the provision of equipment such as uniforms and learning materials, and teacher recruitment. The Education sector will also improve the quality of education, by providing capacity building support for teachers, in-service teacher training as well as psychosocial and pedagogic training. Pre-school activities will be put in place and playgrounds will be built, with a view to maintaining high attendance levels by encouraging buy-in and interest in following through with the curriculum from the very beginning. A higher number of awareness-raising campaigns on the importance of education will be conducted, especially in remote areas and with the involvement of teachers and communities. Literacy programmes for Koranic schools and for those refugees who have not yet attended formal education, will be expanded. In Chad, partners will support students and parents by enabling them to engage in income generating activities. In Niger, alternative education classes and distance learning programmes will continue to be implemented for children who cannot follow the regular curriculum or wish to continue with the Nigerian curriculum.

## FOOD SECURITY

**Needs** - Many out-of camp refugees remain food insecure (46 per cent in Cameroon) and live in regions where food insecurity levels are also high among local and IDP populations. Due to their lack of a regular income as a result of very limited or non-existent livelihood opportunities, refugees remain dependent on food assistance. Insecurity, limited freedom of movement, limited access to land and border closures aggravate the situation. In these conditions, food prices are inflated, often due to a limited number of suppliers in the area, who do not comply with market prices. As a result, the rate at which poverty is increasing in the Lake Chad region is alarming.

The situation is especially worrisome for out-of-camp refugees, who often do not have guaranteed access to food assistance at all. Current food assistance levels must be maintained and increased to address food insecurity and prevent negative consequences that accompany it such as malnutrition, increased morbidity and mortality, decreased school attendance, and associated protection risks, such as vulnerability to exploitation and the use of negative coping strategies.

**Response** - RRRP partners will need to pursue in-kind distributions of unconditional food assistance, especially for vulnerable populations, and conditional food assistance distributions in the more stable areas. They will also use cash-based interventions, where markets are accessible, functional and adapted to this modality. In some hosting countries such as Chad, monthly food basket monitoring exercises will be conducted and partners will also call for tenders at the national level to find suppliers that respect market prices.





UNHCR / H el ene Caux

## HEALTH & NUTRITION

**Needs** - Access to health services is still a challenge for refugees, especially for those settled outside of camps. Despite support provided by humanitarian agencies such as the provision of equipment, medicine, rehabilitation of infrastructures or financing for staffing, many hospitals and health centres remain understaffed, under-equipped and lacking sufficient medicine. The health centre in the Dar es Salam refugee camp in Chad is made of plastic sheeting; some parts have already collapsed due to climatic conditions; furthermore, the centre has no electricity, which constitutes an additional challenge when examining patients.

In most of the areas affected by the crisis, health facilities are virtually non-existent. Some centres have even had to close temporarily or permanently, due to insecurity. As it is especially difficult to recruit qualified staff for health centres in unsafe areas, mobile clinics are sometimes the only alternative.

Out-of-camp refugees are generally ill-informed about the local services available and frequently do not have the means to pay for them. One of the reasons for this lack of awareness is the absence of health committees, which sensitize refugee communities on health issues.

In Chad and Niger, some of the leading causes of illness are acute respiratory tract infections, malaria and diarrhea. The region is also prone to disease outbreaks such as cholera, measles and polio. In addition, the prevalence of HIV/AIDS in the Lake region is also relatively high. Compounding these are frequent cuts in the supply of antiretroviral drugs (ART).

The nutritional situation remains of concern among refugees in and outside of camps, with acute and moderate malnutrition and anemia prevalent among children. This is the result of inadequate and unbalanced dietary intake, which lead to micronutrient deficiencies. To improve this nutritional imbalance and to protect children from irreversible physical, cognitive and mental decay, it is essential that nutritional supplement distributions take place and target children aged 6 to 23 months, as this is the most affected age group.

To measure the nutritional status of children in the refugee camps, malnutrition screening system have been put in place, whereby children and pregnant and lactating women are screened to identify those who are malnourished in order to ensure better nutritional practices. These interventions have positively impacted the prevention of malnutrition in mothers and children and will have to be maintained in 2018 to avoid a deterioration in the nutritional and health situation.

**Response** - In 2018, RRRP partners will further improve refugees' access to health care through the recruitment and financing of qualified health personnel, the rehabilitation of health centres, the provision of equipment and of

## Regional Objectives & Indicators

<b>EDUCATION</b>	<p><b>Population has optimal access to education</b></p> <p>69,213 children have access to formal and non-formal education</p>
<b>FOOD SECURITY</b>	<p><b>The food needs of populations are met</b></p> <p>161,985 individuals received food assistance</p>
<b>HEALTH</b>	<p><b>Access to and quality of health care is improved</b></p> <p>100% of refugee children vaccinated against measles</p>
<b>NUTRITION</b>	<p><b>The prevention of and response to malnutrition is strengthened</b></p> <p>26,200 children screened, identified and admitted into MAM and SAM treatments</p>
<b>SHELTER &amp; NFIS</b>	<p><b>Population is provided with adequate shelter</b></p> <p>20,384 households provided with shelter (constructed and/or maintained)</p>
<b>WATER, SANITATION AND HYGIENE</b>	<p><b>Sufficient amounts of basic and domestic items are provided</b></p> <p>27,067 households received NFIs</p> <p><b>Population has access to a minimum amount of clean drinking water</b></p> <p>20L of water are available on average per person, per day</p> <p><b>Population lives in satisfactory conditions of sanitation and hygiene</b></p> <p>6,729 household sanitary facilities constructed/improved</p>

essential medicine, including psychotropic drugs for mentally ill persons, and other medical supplies in refugee hosting areas. Partners will also conduct training for health staff. In Niger and Cameroon, mobile clinics will be deployed to more remote areas. In Cameroon, partners will focus on upgrading health facilities in selected villages, especially those with a large number of refugees.

In Chad and Cameroon, the health sector will also support existing referral mechanisms for patients that are in need of secondary or tertiary treatment.

In Cameroon, 70 per cent of health-care costs will be subsidized by RRRP partners and other actors, and the Government will cover the remaining 30 per cent of treatment costs for out-of-camp refugees. In Chad, partners will establish health committees and in Niger, the health centre in Sayam Forage camp will be upgraded, allowing the provision of additional services and care, catering to the camp's increased population, which arrived in 2017.

Disease surveillance systems for early detection and response will be maintained. Partners will also elaborate contingency plans and set up preparedness stockpiles for major outbreaks. Sensitization activities concerning good hygiene practices will be maintained. At the same time, prevention activities will remain essential for 2018 for epidemics such as cholera, measles and meningitis, which persist in neighboring countries. Sanitary kits will be pre-positioned in health centres and mosquito nets will be distributed. Moreover, vaccination campaigns will be carried out.

In Chad and Cameroon, partners plan to carry out HIV/AIDS awareness-raising, voluntary testing and counselling, prevention and treatment of mother to child transmission, and provide support to persons living with HIV including through the provision of antiretroviral drugs.

To fight malnutrition, partners will continue to screen for malnutrition, especially among mothers and children, provide capacity building for health staff, conduct Blanket Supplementary Feeding, coupled with Infant and Young Child Feeding and continue to ensure integrated management of acute malnutrition in care facilities and in the community as well as treatment of anemia cases. In Niger, emergency school feeding, which already takes place in the largest schools, will be extended to more isolated sites to improve nutrition among children and offer an additional incentive for school attendance.

#### SHELTER & NON FOOD ITEMS (NFIS)

**Needs** - Newly arriving refugees and out-of-camp refugees who have not yet received any support need emergency shelters and NFIs. In parallel, certain emergency shelters have deteriorated due to climatic conditions and need to be repaired or replaced by transitional shelters made of durable materials. Locally available building materials are very scarce, especially in remote areas, making it difficult for refugees to collect them themselves, particularly if they do not have transportation. However, given the high costs of such shelters, only certain targeted groups among persons with specific needs, can be assisted in this manner. Many host communities need community centres, which serve to organize activities that involve hosts and refugees alike and improve peaceful coexistence.



UNHCR / Rahima Gambo

For those refugees who have been displaced for several years, longer term and more durable solutions must be sought. These will reduce costs and offer new opportunities but it is essential that national, regional and local authorities be involved at the onset.

The need for non-food items remains particularly high as most of those distributed in previous years have deteriorated while others have been sold off by families in need of cash. In addition to affecting their wellbeing, the lack of proper NFIs (e.g. blankets, sleeping mats and mosquito nets) also constitutes a health hazard for refugees. Efforts must be made to source these products locally, contributing to the local economy, while the use of cash and markets for the purchase of NFIs should be encouraged where possible in the more stable areas.

**Response** - In 2018, RRRP partners will continue to provide emergency shelters and NFIs to newly arrived refugees. Contingency stocks of shelters and non-food items will be maintained. Moreover, they will repair emergency shelters, where possible, or replace them with semi-durable shelters made of locally-sourced material. In Niger, for example, communities will be fully involved in the installation and improvement of these shelters, as they have already been trained in the construction of transitional and durable shelters. In Chad and Cameroon, partners will focus on Shelter and NFI assistance for vulnerable households among refugees and host communities in the out-of-camp context. The Urbanization programme launched in Niger in 2014, which provides legal access to land for refugees, will be extended in 2018.

In Niger, agencies will also gradually introduce cash and vouchers to replace NFI distributions. These new interventions already piloted in 2017 are foreseen to boost refugees' autonomy, avoid the trade of NFIs and support the local economy.

Last but not least, RRRP Partners will also repair roads, construct and rehabilitate community facilities and build a transit centre in Cameroon.

## WATER, SANITATION & HYGIENE (WASH)

**Needs** - Access to water and sanitation remains one of refugees' main needs outside of camps and in remote areas in particular. Moreover, given that some sites, where water and sanitation infrastructures were built, have been abandoned due to security incidents, these will need to be refurbished and new facilities built.

In parallel, existing water and sanitation infrastructure needs to be upgraded and maintained and water quality monitored. The capacity of water management committees has to be reinforced. In terms of hygiene, certain habits that pose considerable health risks such as open defecation persist and need to be eradicated through awareness raising sessions.

**Response** - In 2018, RRRP partners will continue to support the construction and rehabilitation of water and sanitation infrastructure for household and community facilities, while maintaining emergency capacity to respond to new arrivals in remote areas, including through water trucking. They will also ensure capacity building for partners and water point management committees in all three countries. In Cameroon and Chad, partners will construct durable family latrines to replace deteriorated emergency latrines. In parallel, emergency latrines will be provided to populations living in unstable areas as well as to those affected by flooding. Awareness raising campaigns on sanitation and good hygiene practices will continue, hygiene and sanitation kits will be distributed and sanitation assistants will be trained.

Particular focus will be placed on waste management, namely collection, disposal and treatment. In Cameroon, partners will further ensure the commissioning of the solid waste management site and the distribution of a minimum WASH package in 21 schools.

In order to fight water-borne diseases and cholera, water quality will be monitored regularly and a health survey will be conducted to ensure that appropriate and timely measures are taken in the event of contamination. Given the Hepatitis E epidemic in Niger and the continuous risks of a cholera outbreak, sensitization on the safe water chain (safe collection, transport and storage of water), household water treatment, and hand-washing will continue to be conducted through hygiene committees established within the community. In Chad, community outreach "hygiene promoters" will continue to support sensitization on the water chain to encourage households to better manage water transported from collection points for use at home. Furthermore, refugees have agreed to contribute financially in the collection and saving of funds to purchase spare parts for mechanized pumps if needed, in an attempt to sensitize the population to use these pumps carefully.



## Self-reliance and Environment Protection

### LIVELIHOODS

**Needs** - Most refugee families have still not regained their livelihoods and are therefore not self-reliant. One of the main challenges is ongoing insecurity, limited freedom of movement, as well as temporary border and market closures. This continues to have pervasive effects on income generating activities such as agriculture, livestock rearing, fishing and trade. In addition, refugees often have little to no access to land which would allow them to farm or let their livestock graze. As a result, they are compelled to take their livestock to host community pastures, which can lead to inter-communal tensions and conflict, as seen in the Kablewa area of the Diffa region in Niger. In Niger, the situation is further exacerbated by the rain deficit. There are also insufficient vocational training opportunities, causing many refugees to remain in limbo with no activity to pursue. Furthermore, the absence of financial institutions in Chad’s Lake area, for example, make official financing/loans for IGAs impossible.

**Response** - In 2018, RRRP partners will continue to support refugees’ self-reliance, including by expanding income-generation interventions, capacity building and tool distributions. Livelihood programmes and projects will not only target refugees, but also host populations to support local integration for refugees. Vocational training will also continue and, partners will continue to advocate with local authorities and host communities that access to land be provided to refugees. Finally, in Chad, RRRP partners will also provide loans to set up income generating activities.

### Regional Objectives & Indicators

<b>LIVELIHOODS</b>	<p><b>Self-reliance and livelihoods are improved</b></p> <p>14,300 households received production kits or support for agriculture/livestock/fisheries</p>
<b>ENVIRONMENT</b>	<p><b>Populations have sufficient access to energy and natural resources and their impact on the environment is reduced</b></p> <p>14,671 households received fuel, energy saving stoves and equipment</p>

### ENVIRONMENTAL PROTECTION

**Needs** - Many refugee households still use wood as a main energy source for cooking. The over-reliance on wood, has severely degraded woodland areas and increased desertification. Conversely, reforestation activities remain insufficient in view of the demand. This leads to increased tension between refugees and host populations. Moreover, women and girls are forced to walk long distances in search of wood, which exposes them to SGBV, and reduces school attendance rates. In Niger, this shortage has even led to an inflation in the price of wood.

**Response** - In 2018, RRRP partners will support the use of alternative energy. In Niger, the gas provision programme will continue, thereby providing refugee households with gas cylinders, refills and training on the benefits of gas as an alternative form of energy. Energy saving equipment will also be provided to refugee households in Chad and the use of improved fireplaces will be encouraged.





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In Niger, cash interventions will be conducted to provide refugees an income in exchange for work in the area of land restoration, or in programmes aiming to protect the ecosystem such as sand dune stabilization. Environment protection programmes will also be implemented in Minawao refugee camp in Cameroon and in certain host villages through a participatory community approach.

In Chad, a nursery will serve to produce plants that will then be used in reforestation activities throughout 2018. Eventually these plants will also serve as a source of energy, eliminating the need to travel long distances in search of firewood. In further efforts to mitigate negative effects on the environment, awareness-raising campaigns on environmental protection will be organized.

## Regional coordination

The governments of Cameroon, Chad and Niger are responsible for the protection of and assistance to Nigerian refugees in their countries. In 2018, the UNHCR Regional Refugee Coordinator (RRC) for the Nigeria situation in cooperation with UNHCR Country Representatives and their teams will continue to assist these governments in leading and coordinating UN and NGO refugee response, in line with the Refugee Coordination Model (RCM). UNHCR takes the various coordination structures that exist in each country into consideration in leading the refugee response. These are as follows:

**In Cameroon**, together with the Government, UNHCR leads a multisectoral operations team for the refugee response as well as a national Protection Working Group at capital level. In accordance with the *Joint OCHA/UNHCR Note on Mixed situations – Coordination in practice*, UNHCR also coordinates the overall humanitarian response for refugees and IDPs in the Far North, using sector working groups, led by government entities and co-led by humanitarian agencies. However, the Humanitarian Coordinator remains accountable for the non-refugee related response, while UNHCR maintains its accountability for the refugee response.

**In Chad**, together with its government counterpart, the *Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés* (CNARR), UNHCR coordinates the response of respective sectors with partners through

regular coordination meetings at capital and field level. Currently, RRP partners advocate increasingly for the engagement of development partners in the refugee response, foremost through the World Bank/UNHCR partnership.

**In Niger**, under the overall lead of the Governor in Diffa, different sectoral working groups, which are led by the Regional Technical Directorates and co-led by humanitarian agencies, coordinate the response for IDPs and refugees at field level. An Inter-Organization Coordination Committee, co-led by UNHCR and OCHA, ensures the interface between humanitarian agencies and the authorities and reports on the refugee response to UNHCR and on the IDP and non-refugee related response to the Humanitarian Country Team.

In Niger as well, UNHCR and RRRP partners seek to continuously increase collaboration with local entities to ensure the inclusion of refugees into local development plans. The Government cooperates with the World Bank and other development actors to support the establishment of more durable infrastructures and services in refugee hosting areas.



## REGIONAL RRP PARTNERS

- ABIOGET
- ACF
- ADES
- ADESA
- ADRA
- AEJTN
- AHA
- ALDEPA
- ALVF
- ASOL
- CAPROD
- CISP
- CLIRA
- CODAS CARITAS
- COOPI
- COPRESSA
- DIKO
- DRC
- FADEC
- FAO
- Handicap International
- IEDA Relief
- IMC
- INTERSOS
- IOM
- IRC
- IUCN
- Kaidiya
- Luxembourg RC
- LWF
- NRC
- ONAT
- OXFAM
- Plan International
- Public Concern
- Samaritan's Purse
- Save the Children
- SDO
- SFCG
- Solidarités International
- UNDP
- UNFPA
- UNHCR
- UNICEF
- WESDE
- WFP
- WHO



# Financial Requirements

## By Organization & Country

ORGANIZATION	CAMEROON	CHAD	NIGER	TOTAL
ABIOGET	1,883,130			1,883,130
ACF			390,000	390,000
ADES	10,000			10,000
ADESA			112,852	112,852
ADRA	150,000			150,000
AEJTN			65,551	65,551
AHA	590,000			590,000
ALDEPA	689,455			689,455
ALVF	300,000			300,000
ASOL	251,000			251,000
CAPROD	300,000			300,000
CISP			84,423	84,423
CLIRA	840,500			840,500
CODAS CARITAS	196,910			196,910
COOPI			60,000	60,000
COPRESSA	336,800			336,800
DIKO			95,295	95,295
DRC			976,116	976,116
FADEC	2,162,400			2,162,400
FAO		600,000	2,360,290	2,960,290
Handicap International			376,804	376,804
IEDA Relief	1,870,100			1,870,100
IMC	400,000			400,000
INTERSOS	2,336,672			2,336,672
IOM			696,381	696,381
IRC	1,249,000			1,249,000
IUCN	2,249,503			2,249,503
Kaidiya			104,676	104,676
Luxembourg RC			2,004,000	2,004,000
LWF	3,026,759			3,026,759
NRC	3,341,877			3,341,877
ONAT			35,205	35,205

ORGANIZATION	CAMEROON	CHAD	NIGER	TOTAL
OXFAM			275,000	275,000
Plan International	3,794,380		2,088,874	5,883,254
Public Concern	500,000			500,000
Samaritan's Purse			2,485,703	2,485,703
Save the Children			917,844	917,844
SDO			144,654	144,654
SFCG			174,373	174,373
Solidarités International	624,604			624,604
UNDP	2,003,400			2,003,400
UNFPA	1,200,000	1,992,000	3,040,000	6,232,000
UNHCR	29,293,677	8,021,684	32,246,906	69,562,267
UNHCR (regional)				534,782
UNICEF	150,000	1,583,000	2,841,402	4,574,402
WESDE	476,869			476,869
WFP	11,044,968	2,276,000	17,418,411	30,739,379
WHO	830,000		482,471	1,312,471
<b>TOTAL</b>	<b>72,102,004</b>	<b>14,472,684</b>	<b>69,477,231</b>	<b>156,586,701</b>

## By Sector & Country

SECTOR	CAMEROON	CHAD	NIGER	TOTAL
Protection	18,677,050	4,004,104	12,237,339	34,918,493
Education	5,865,565	274,469	3,163,309	9,303,343
Food Security	15,531,103	2,100,000		17,631,103
Food Security & Livelihoods			31,096,892	31,096,892
Health	4,668,671			4,668,671
Health & Nutrition		3,086,870	7,600,605	10,687,475
Livelihoods & Environment	13,867,421	1,998,962		15,866,383
Nutrition	1,442,108			1,442,108
Shelter & NFIs	5,631,085	1,720,328	10,735,677	18,087,090
WASH	6,419,001	1,287,951	4,643,409	12,350,361
<b>TOTAL</b>	<b>72,102,004</b>	<b>14,472,684</b>	<b>69,477,231</b>	<b>156,586,701 *</b>

\*This includes regional funding requirements of 534,782 USD.







# CAMEROON REFUGEE RESPONSE PLAN

**100,000**

REFUGEE  
POPULATION

**45,000**

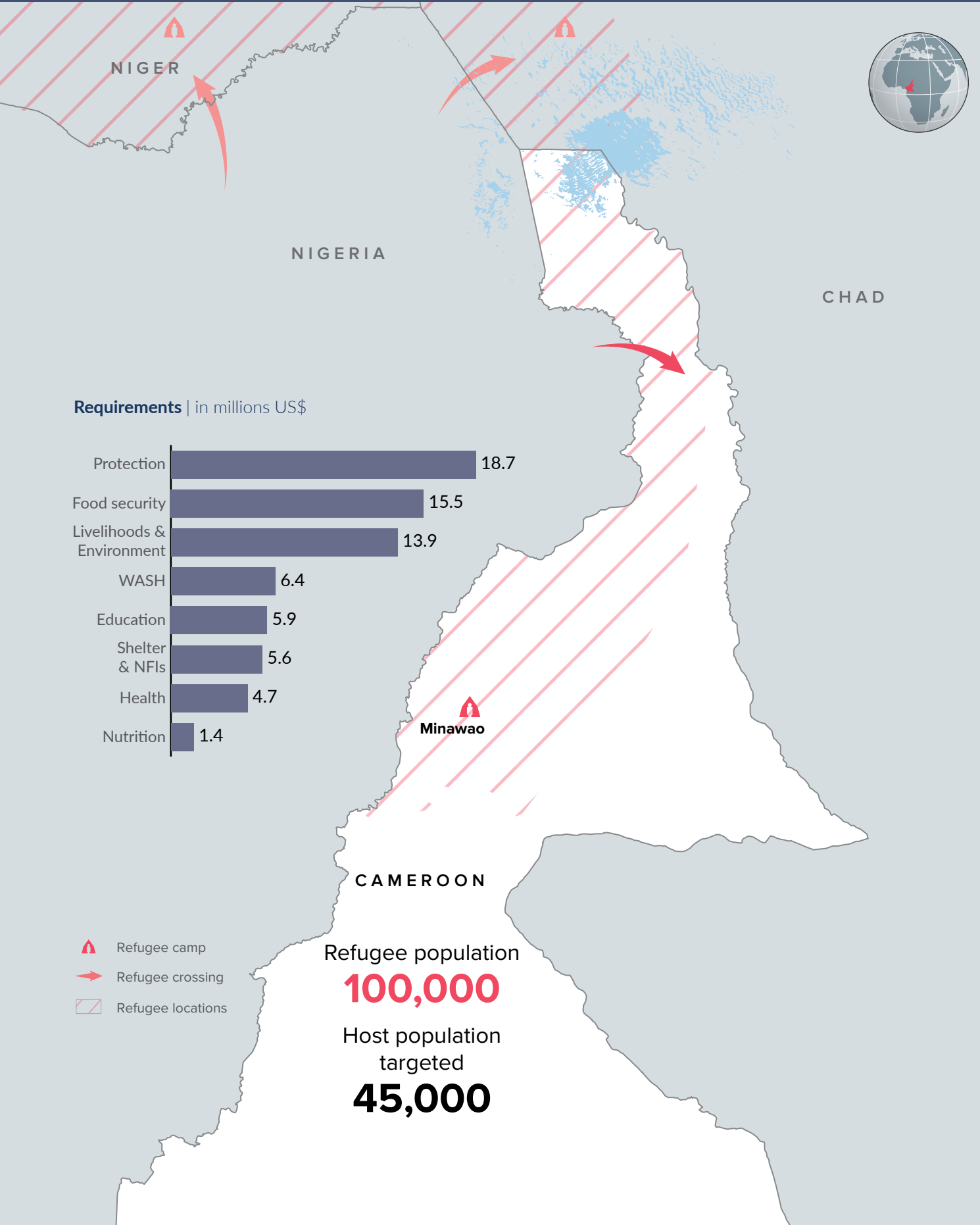
HOST POPULATION  
TARGETED

**US\$ 72.1M**

REQUIREMENTS

**29**

PARTNERS  
INVOLVED



# Country Overview

## Introduction

In 2017, the political, economic and social situation in the Far North region of Cameroon has been affected by a rise in violent Boko Haram attacks against the civilian population, and by the Cameroonian army and Multinational Joint Task Force's (MNJTF) military efforts to defeat the insurgents. Within this volatile security context, Nigerian refugees and their Cameroonian hosts have continued to be forcefully displaced. By the end of 2017, Cameroon will be host to 90,000 Nigerian refugees, including some 60,000 in Minawao refugee camp and 30,000 in out-of-camp settings and an estimated 238,000 internally displaced persons (IDPs).

Having entered its fourth year, the conflict in the region has continued to exacerbate pre-existing poverty, weak development and limitations in accessing basic services such as education, health and sanitation including clean drinking water. In addition, the conflict has created a difficult protection environment for all persons of concern, in particular for women and children who are increasingly exposed to sexual and gender-based violence. Civilians are constantly at risk of being aggressed, kidnapped or killed by the insurgents, and children have been the main targets for use in suicide-bombings. This has had the effect of deteriorating peaceful cohabitation between hosts and the displaced, as refugees are often suspected of being associated with Boko Haram. Furthermore, in their efforts to respond to national security concerns, Cameroonian authorities have arbitrarily detained refugees and Cameroonian nationals, without adhering to international human rights conventions. Overall, population movements have remained dynamic, with the conflict

leading to new internal displacements and refugee arrivals, as well as spontaneous and forced returns of refugees towards Nigeria.

Maintaining access to asylum and respecting the principle of *non-refoulement* have been of particular concern in 2017. UNHCR has observed a trend of non-admissions of Nigerian refugees who had fled to border areas, to which humanitarian actors, in particular UN agencies, have little access. Despite efforts to sensitize authorities about their international obligations, reports of forced returns have continued to reach UNHCR, post facto. In applying its legitimate right to protect its population from terrorist attacks, the Cameroonian Government has since the beginning of the crisis in 2014, effectively instituted an encampment policy for Nigerian refugees, restricting their freedom of movement, and thus undermining refugee protection and international protection obligations. This approach has been coupled with the requirement that Nigerian refugees in the Far North be registered exclusively at Gourounguel registration centre near Minawao refugee camp, instead of allowing monitoring, screening and registration of new arrivals at border entry points. Despite UNHCR's high-level advocacy efforts, it was only in June 2017 that the Government authorized the agency to start registering Nigerian refugees living outside the camp.<sup>1</sup> It is expected that advocacy efforts with local and State authorities on international protection obligations and proposed measures to support the Government in implementing them will have to be pursued in 2018.

1. The operation is ongoing and has been delayed by security concerns in some of the remote border areas and by administrative hurdles.



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## Overall Needs and Strategic Response

According to current planning scenarios, the number of refugees that will require protection and humanitarian assistance in 2018 is expected to reach 100,000, including 70,000 in Minawao camp and 30,000 living in host villages.

As the protection space has continued to shrink in the Far North region, ensuring access to asylum as well as maintaining protection and assistance programmes will be prioritized in 2018. Additional advocacy efforts are needed to reinforce refugee reception structures, and to maintain the civil and humanitarian character of asylum. As humanitarian needs remain high, the response will focus on reducing pressure on host communities by maintaining infrastructure and sustaining the provision of

basic services in host villages, expanding access to water, decreasing pressure on scarce natural resources such as firewood or arable land for farming, and stepping up livelihood activities in order to prevent agro-pastoral and intercommunal conflicts. As a complementary measure, reforestation activities in and around Minawao camp will continue, in order to prevent environmental degradation. In terms of shelter, RRP partners will focus on responding to the needs of out-of-camp refugees.

Furthermore, the rehabilitation and equipment of health centres in refugee hosting areas as well as the establishment of an early warning system and response (EWARS) for common epidemic diseases will also be prioritized.

Still, the key operational priority throughout the 2018-2020 period lies in providing durable solutions for Nigerian refugees, such as local integration or facilitated return. In order to support refugees living outside of the camp, RRP partners will reinforce the capacities of host communities and promote self-reliance mechanisms. In that respect, a total of 12 villages in the three departments most affected by the Boko Haram crisis (*Mayo Sava, Mayo Tsanaga and Logone-et-Chari*) have already been identified by local authorities and RRP partners as offering a favorable environment for local integration (*villages d'opportunités*). As an additional measure, partners plan to also assist 45,000 Cameroonians in these host villages.

Although UNHCR will not promote or organize any voluntary repatriation as long as conditions are not safe and conducive for return in north-eastern Nigeria, it will, in accordance with the Tripartite Agreement, signed on 2 March 2017, and within the framework of the Tripartite Commission and its Technical Working group, work closely with the Cameroonian and Nigerian Governments to facilitate the voluntary return of Nigerian refugees should they wish to go back home. According to a return intention survey carried out in May 2017, almost 44 per cent of refugees said they did not wish to return to north-eastern Nigeria in the near future. This is a significant drop from the 70 per cent of positive responses recorded in 2016, which clearly reflects the deteriorating security situation in the region. Still, it is expected that some 25,000 refugees may wish to go

back in the course of 2018 (20,000 assisted and 5,000 self-organized). It is worth noting that some of the 13,000 refugees who had returned spontaneously to Nigeria in April and May 2017, have come back to Cameroon since, as living and security conditions in their areas of origin were far from being adequate enough for them to restart their lives.

Given the volatile security situation in most return areas, the high level of food insecurity and lack of access to livelihoods and basic services such as education or health, further assessments will be required in Nigeria's Borno, Yobe and Adamawa States, to ascertain that Nigerian refugees can return in dignity and safety to their areas of origin.



UNHCR / Xavier Bourgois

## Coordination & Partnerships

In 2018, UNHCR will continue to coordinate the refugee response in line with the Refugee Coordination Model (RCM) and will remain closely engaged in wider coordination efforts in the Far North region. Following the outbreak of the conflict in early 2014, UNHCR established coordination mechanisms for the refugee response in Cameroon’s Far North, which are still in place. Each sector is operational and is led by a Government entity and co-led by UN agencies. There is a bi-monthly UNHCR-chaired Multi-Sector Operations Team meeting in Maroua, which brings together all sector-leads and co-leads as well as key humanitarian partners intervening in the region. UNHCR also leads a multi sectoral operations team for the refugee response as well as the national Protection Working Group in the capital, Yaounde and is actively engaged in all relevant humanitarian coordination fora, including the HCT and OCHA-led inter-sector meetings. In accordance with the “Joint OCHA – UNHCR Note on Mixed situations – Coordination in practice”, the responsibility to coordinate the overall humanitarian response for refugees and IDPs in the Far North has been delegated to UNHCR’s Head of Sub-Office in Maroua. The Humanitarian Coordinator remains accountable for the non-refugee related response while UNHCR maintains its accountability for the refugee response.

RRP partners remain committed to reinforcing partnerships with development actors and International Financial Institutions, such as the World Bank and the African Development Bank and most importantly will further deepen its engagement with government counterparts regarding the management of all refugee-related matters. Lastly, partners remain engaged in the UNDAF process and the joint UN-EU-WB Recovery and Peacebuilding Assessment process (RPBA).

**RRP PARTNERS**

- ABIOGET
- IRC
- ADES
- IUCN
- ADRA
- LWF
- AHA
- NRC
- ALDEPA
- Plan International
- ALVF
- Public Concern
- ASOL
- Solidarités International
- CAPROD
- UNDP
- CLIRA
- UNFPA
- CODAS CARITAS
- UNHCR
- COPRESSA
- UNICEF
- FADEC
- WESDE
- IEDA Relief
- WFP
- IMC
- WHO
- INTERSOS



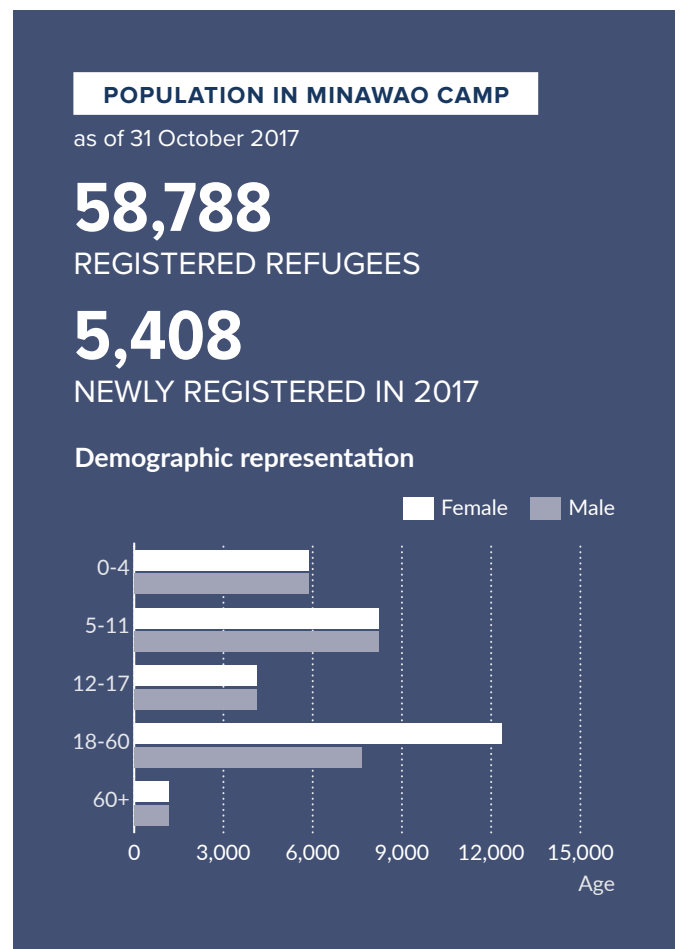


# Planned Response



The asylum system in Cameroon has strongly been affected by the Boko Haram crisis. In an environment marked by suicide attacks, incursions and high levels of violence in border regions, the Government is facing real challenges in safeguarding international protection principles whilst also maintaining national security. Refugees and asylum-seekers are not always admitted into Cameroonian territory and those who have been able to cross the border have been pushed back to Nigeria on several occasions during 2017. Authorities have cited insecurity when justifying these forced returns. Indeed, in the *Logone-et-Chari* and *Mayo Sava* departments, up to three attacks have been reported per week. Freedom of movement is therefore limited and refugees and asylum-seekers have at times also been charged with ‘irregular immigration’, requiring constant follow-up and legal assistance. Therefore, ensuring the civilian and humanitarian nature of asylum, respect for the principle of *non-refoulement*, the non-penalisation of refugees for illegal entry and freedom of movement will be among the key priorities in 2018.

Ongoing insecurity and shortcomings in the legal framework for managing emergency situations involving terrorism have contributed in some cases to local authorities’ mistrust towards refugees and asylum seekers living in host villages. The lack of adequate screening facilities close to the border (the only registration centre being near Minawao camp, some 50 kilometres inland) has further restricted asylum space. UNHCR had advocated for the establishment of transit centres closer to entry points at the border, which would allow authorities and UNHCR to conduct the joint



screening of new arrivals and monitor cross border movements, but these centres have still not received official authorisation to be operationalised. The organised forced return and deportation to Nigeria of individuals who have no proper identity documents led not only to *refoulement* of refugees, but also to the accidental deportation of Cameroonian nationals, increasing their risk of becoming stateless. The latter is of great concern to the protection sector, as the majority



of the ethnic community living alongside the Nigerian borders in the Lake Chad Basin region systematically lack civil documentation and proof of nationality, making them even more exposed.

During 2017, improved access to out-of-camp refugees allowed RRP partners to progressively register those living in border areas. The registration of new arrivals at Gourounguel transit centre near Minawao camp also continued and has been further strengthened. New born children receive birth certificates from Cameroonian civil registries, but these are often under-resourced and ill-equipped to cope with the high workload, despite on-going support provided by UNHCR.

The risk of being exposed to sexual and gender-based violence (SGBV) has increased, particularly for girls and women. SGBV related to pre-existing harmful traditional practices, such as early forced marriage, has been

exacerbated by the crisis, and cases of sexual assault, rape, physical and emotional abuse, sexual exploitation and resource denial are also reported.

Children represent the majority of the population in need of protection with 62 per cent of refugees aged under 18. The fact that they had fled from conflict in Nigeria only to be exposed to ongoing violence in Far North Cameroon has traumatized them even further. As a result these children are in need of adapted psychosocial assistance. In addition, 2,074 unaccompanied and separated children registered in Minawao camp require coordinated services to follow up on their cases in order for them to be placed in appropriate alternative care while partners continue with family tracing procedures. Children are also faced with specific risks of violence and exposure to abuse and exploitation, calling for robust prevention and response systems, as well as strong community-based child protection mechanisms.

#### **OBJECTIVE 1:**

##### **Access to the territory improved and risk of *refoulement* reduced**

300 military and security force elements trained on human rights and humanitarian principles

300 border guards and government officials trained on refugee protection

#### **OBJECTIVE 2:**

##### **Quality of registration improved and level of individual and civil status documentation increased**

100,000 refugees registered on an individual basis

50,000 persons at risk of statelessness identified

#### **OBJECTIVE 3:**

##### **Access to legal assistance and remedies improved**

2,300 individuals received legal assistance

#### **OBJECTIVE 4:**

##### **Community mobilization and services for persons with specific needs strengthened**

20,000 individuals with specific needs received appropriate support

**OBJECTIVE 5:**

**Durable solutions researched and implemented**

26 information sessions held on available durable solutions

4 evaluations and return intention surveys conducted

**OBJECTIVE 6:**

**Risk of SGBV reduced and quality of response improved**

90,000 people targeted by awareness-raising campaigns on the prevention of sexual and gender-based violence

1,400 cases of SGBV in which survivors received assistance using the survivor-centered approach (medical, legal, psychosocial, mental health, IGA)

**OBJECTIVE 7:**

**Child protection interventions for boys and girls at risk strengthened and harmonized**

1,200 UASC identified and/or placed in alternative care arrangements and/or who benefited from follow-up

20,000 children benefited from MHPSS services

Despite growing needs, protection indicator assessments have shown that as compared to the previous year, 2017 also witnessed improvements in the protection environment, particularly concerning access to out-of-camp refugees, but also with regards to an overall decrease in the number of forced returns, the signing of the Tripartite Agreement on the Voluntary Repatriation of Nigerian Refugees, the consolidation of monitoring mechanisms and the establishment or improvement of legal and judicial assistance structures.

The objective of 2018 is therefore to consolidate achievements made in 2017, with special emphasis on out-of-camp refugees, self-reliance and durable solutions, support to host communities, and capacity building of government counterparts. In this regard, RRP partners will focus on gaining access to territory and preventing *refoulement* as well as improving the quality of registration and increasing refugees' access to individual and civil status documentation. Refugees' access to legal aid and to legal remedies will also be strengthened alongside community mobilisation programmes and the protection of persons with specific

needs. Prevention of SGBV and access to respective multi sectoral quality response for survivors will remain key for the protection sector, as well as improving the protection of children.

Concerning durable solutions, significant focus will be placed on the implementation of the Tripartite Agreement Action Plan, the development of cross-border coordination mechanisms and on improving information-sharing with Nigerian refugees, on living conditions in their areas of origin. The identification of refugees who opt for voluntary repatriation will be strengthened, as will the registration of out-of-camp refugees, to obtain a more detailed picture of this population.

## Education

Children make up almost half of the entire population in Minawao camp. Out of over 58,000 registered Nigerian refugees in the camp (as of 31 October 2017), some 29,000 are children aged 3 to 17. At the end of the 2016-2017 academic year, over 20,000 children were enrolled in school.

To date, 9,000 children of school-going age are not yet enrolled in education programmes, including some 3,500 adolescents aged 14 to 17 years who have never attended school and who have exceeded the enrolment age for formal education. The latter are extremely vulnerable and at risk of being forcibly recruited or abused. Therefore, providing access to quality education

in the Far North region is essential in order to prevent the radicalization of young refugees and children and offer them viable prospects for their future.

For out-of-camp refugees, the situation is more preoccupying. Of the 21,600 out-of-camp refugees registered at end September 2017 (registration ongoing), 9,800 are of school-going age. Some 7,000 children from host communities also need access to education. Therefore, the provision of quality and safe education remains a challenge at all levels. Participatory assessment findings have revealed that despite responses provided by the Government and humanitarian actors, needs identified for in-camp and



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out-of-camp refugees as well as host community members include classrooms and equipment, security installations, qualified teachers, school materials etc. Moreover many refugee girls continue to not attend school for cultural reasons. In 2018, a total of 52,000 children (refugees and host community members) will need formal education. The Education sector will prioritize access to formal education in targeting 70 per cent of children of school-going age by increasing the absorption capacity of the school system for refugees and host community members. In order to provide better learning conditions, classrooms will have to be constructed or rehabilitated and equipped. This includes purchasing desks, providing school kits and didactic kits and uniforms. To guarantee the safety of students, security fences will have to be built around school premises. Funds permitting, the high school in Minawao camp will be equipped with a scientific laboratory.

The sector will also seek to improve the quality of education provided to refugees and host community members, as there continue to be short-comings and gaps. In the best case scenario, it is expected that the Government’s Ministry of Education and humanitarian actors will put preschool activities in place, strengthen primary and secondary school education, create opportunities for adolescents and adults to improve their

<p><b>OBJECTIVE 1:</b>  <b>Population has optimal access to education</b></p> <p>12,500 children attended early childhood education</p> <p>32,500 children enrolled in primary education</p> <p>7,000 students enrolled in lower secondary education</p>
<p><b>OBJECTIVE 2:</b>  <b>Improve girls’ education by reducing SGBV in schools</b></p> <p>30 schools with infrastructure and protection mechanisms that are favorable to girls</p>
<p><b>OBJECTIVE 3:</b>  <b>Adult education (literacy) provided</b></p> <p>3,000 persons regularly attended adult education in the camp</p>

literacy, strengthen the involvement of parents in the education of their children, promote the education of girls by making schools more accessible to them, increase advocacy for the deployment of qualified teachers, engage in capacity building of teachers, ensure community involvement through awareness-raising campaigns, contribute to obtaining birth certificates for children in need as a first step to affording them the possibility of enrolling in school in the future and build playgrounds for pupils and students.



## Food security



UNHCR / Xavier Bourgois

As a result of the Boko Haram conflict and its economic side effects, owing to security restrictions, the needs for humanitarian food assistance continue to be critical in Cameroon's Far North region. In 2017, all refugees in Minawao camp received food through monthly distributions organized by WFP. The food basket varied from 1,575 to 2,100 Kcal/person/day among over the 12 distributions that were carried out. In addition, 5,000 new arrivals received 20,135 hot meals (cereals, sauce and meat for a nutritional value of 2,100 Kcal for an average of 5 meals per week) provided by UNHCR until they were eligible for the next monthly food distribution. Furthermore, WFP distributed 1.47 tons of biscuits to 847 refugees in the transit centre.

Despite these efforts by RRP partners, there are still major gaps to address, mainly for refugees living in host villages. Nearly 30,000 out-of-camp refugees do not have guaranteed access to food or livelihood activities. More importantly, some members of host communities

are food insecure themselves. The emergency food security assessment (EFSA) carried out in September 2016 revealed alarming food insecurity levels, with close to 1.5 million people estimated to be food insecure in the region, including 180,000 qualifying as severely food insecure. The part of the Lake Chad Basin region that has been affected by Boko Haram was also included in the UN's 2017 Famine appeal for Africa. In Minawao, over 95 per cent of the refugee population are fully dependent on food aid.

The findings of FAO's latest study on refugee self-reliance in the Far North, conducted in 2017, stressed the need to facilitate refugee access to livelihood activities to ensure and sustain their self-reliance, socio-economic integration in host communities and social cohesion. To improve refugee self-reliance in the medium term, RRP partners will contribute to improving food security by pursuing in kind food distributions, diversifying food choices and implementing cash activities, where feasible. They will also seek to enable refugees and hosts to grow their own food through distributing seeds and tools, thus reducing the affected populations' vulnerability to food insecurity. In addition, vulnerable host households living around the camp and in the villages welcoming refugees will receive in kind food assistance.

### **OBJECTIVE 1:** Improve food security

82,500 beneficiaries received food assistance

### **OBJECTIVE 2:** Reduce the population's vulnerability to food insecurity

37,000 people received seeds and agricultural tools



Comprehensive health assistance has so far been provided solely to Nigerian refugees in Minawao camp. The health situation in the camp is relatively stable and has been kept within acceptable standards of 0.3 deaths/1000/month. However, access to health facilities for out-of-camp refugees often proves challenging in many host villages, as public health structures are either not operational, because they were destroyed or abandoned during attacks, or are insufficiently equipped and staffed. Moreover, refugees often do not have the financial means to pay for health services.

As far as overall needs in 2018 are concerned, existing health facilities will have to be rehabilitated or reconstructed and medical staff recruited, and RRP partners plan to continue providing essential drugs. Furthermore, refugees will increasingly be sensitized on family planning measures, an exercise that will require addressing cultural barriers at first.

The health sector will prioritize the following key interventions to address the most urgent needs of refugees and their hosts. As needs are higher in out-of-camp health centers, the current setup will be maintained in Minawao camp and public facilities will obtain additional support, in the form of medical doctors, midwives, nurses, psychiatric nurses and psychologists. The health sector will provide essential drugs, including for emergency treatment, through international procurement.

As epidemics are very frequent in the region, disease control will be strengthened. To achieve this goal, the sector will prepare contingency plans and set up preparedness stockpiles to respond in the case of major outbreaks. In order to prevent malaria, 62,000 bed nets will be distributed and all out-of-camp refugees, as well

**OBJECTIVE 1:**  
**Health status of the population improved**

- 170,000 new curative consultations carried out
- 40,000 new refugees vaccinated against measles

**OBJECTIVE 2:**  
**Population has optimal access to reproductive health, HIV and SGBV services**

- 2,500 livebirths attended by skilled personnel
- 8,000 adolescents tested for HIV

as all new arrivals at Minawao camp, will be vaccinated against measles and poliomyelitis.

Regarding cost recovery measures for out-of-camp refugees, a system is already in place. As per the convention signed between UNHCR and the Ministry of Health in August 2016, in order to guarantee free treatment for out-of-camp refugees, 70 per cent of health care costs will be subsidized by UNHCR, and the Government will cover the remainder. The Ministry of Health will receive support to ensure the deployment of trained staff and equipment to run health facilities in host districts. If conditions for voluntary return are met in accordance with the Tripartite Agreement, the sector plans to deploy a dedicated medical team and necessary logistics.

Funding shortages in the health sector may lead to further reductions in staffing, drugs and equipment, and eventually to a high morbidity and mortality in and outside the camp. Furthermore, continued insecurity in host villages might limit access to health care, negatively impacting health staff deployment or retention and lead to poor supply and services.

## Nutrition



UNHCR / Xavier Bourgois

The nutrition levels in Minawao refugee camp stood within the WHO classification for an acceptable situation according to the [Standardised Expanded Nutrition Survey \(SENS\)](#) conducted in August 2016 with global acute malnutrition (GAM) rates of 4.2 per cent among children aged 6 to 59 months and severe acute malnutrition (SAM) rates of 0.2 per cent. However, a seasonal malnutrition peak was recorded in the camp from April to July 2017 with GAM rates marginally increasing to 6.5 per cent, mainly due to shortages in food distributions. Encouragingly, in August 2017, it was found that the nutrition situation had improved as a 50 per cent reduction in the number of cases admitted

into the camp's nutritional out-patient therapeutic programme was observed.

Overall, nutritional programme coverage improved in 2017. Mothers with children aged 6 to 23 months were monitored, and a Blanket Supplementary Feeding Programme (BSFP) was carried out each month. However, due to financial constraints, only two out of four planned Infant and young child feeding centres (IYCF) are operational.

The nutritional situation in the refugee hosting area outside the camp is of particular concern in the *Logone-et-Chari* department, with a SAM prevalence of 2 per

cent and a GAM rate of 10.9 per cent. Various assessments (Age, Gender and Diversity Mainstreaming participative assessments, comprehensive nutritional screening, SENS, SMART survey and Food Security) carried out in Minawao camp and in the most affected departments of the region revealed the need for qualified staff, better infrastructures and equipment. The community’s level of awareness on good nutritional practices is poor and negatively affects access and use of the rare nutritional services that are available. In the camp, key needs lie in micronutrient supplementation for children aged 6 – 59 months, infrastructure for IYCF, and increasing the awareness of refugees on good nutritional practices.

In 2018, the sector response will address all populations in need, namely 100,000 refugees and 45,000 hosts. It will strengthen human resources, expand community-based nutrition activities in a decentralized manner in the camp, strengthen IYCF activities (coupled with BSFP) and develop a response strategy to reduce anaemia in Minawao. More IYCF centres will be set up in the camp to sensitize mothers of children aged under two. For refugees settled outside the camp, these services will be integrated into primary health facilities, where this is feasible. Culinary demonstration sessions will be organized to educate mothers on how to prepare high nutritional value meals, using locally available ingredients and those from the distribution basket. These sessions will also raise awareness on good hygiene practices around food and water. The case management of severe malnutrition both inside and outside the camp will be strengthened. While this activity also remains integrated into primary health facilities, it will also be set up separately in districts where this is needed. The sector expects a total of 1,600 severely

malnourished children to be admitted in 2018. Children presenting severe medical malnutrition complications will be referred to Inpatient Therapeutic Feeding Centres (ITFC) in district hospitals.

Exhaustive malnutrition screenings for children under five will be carried out on a quarterly basis in the camp and in “*villages d’opportunités*” where a mixed population of refugees, IDPs, returnees and the host community are settled. It is expected that 80 per cent of new admissions in the Outpatient Therapeutic Programme (OTP) will come from community-based screening. BSFP will be continued in the camp and extended out of the camp. The programme is expected to admit a total of 9,000 children aged 6-59 months in 2018.

**OBJECTIVE 1:**  
**Ensure the prevention of malnutrition and the promotion of optimal infant and young child feeding practices (IYCF)**

9,000 children (aged 6-23 months) admitted into blanket supplementary feeding programme (BSFP)

**OBJECTIVE 2:**  
**Ensure the implementation of integrated management of acute malnutrition programmes**

1,600 children screened with SAM referred to and admitted into nutrition programme

**OBJECTIVE 3:**  
**Prevent, treat and monitor anaemia/micronutrient deficiencies**

11,500 children admitted into micronutrient supplementation programmes



## Livelihoods & Environment

In 2017, within the framework of agricultural production support programmes for Minawao refugees and neighbouring communities, 40 mixed groups were set up to cultivate a surface area of 30.5 hectares. For small livestock breeding, 30 groups of breeders were created at the camp and in host villages and 75 groups were set up for income generating activities (IGAs) such as selling grains, processing groundnut into oil, selling cakes, operating small restaurants and cafeterias, and selling flour. In addition, a total of 50 students are receiving vocational training in sewing and carpentry.

A study on self-reliance conducted in 2017 revealed that 90 per cent of refugees in Minawao camp are still

completely dependent on humanitarian assistance, hence the need for livelihood activities. About 25 per cent of refugees were farmers in Nigeria but now find themselves impeded by limited access to land and insufficient water. In addition, the shortage of grazing land for livestock is causing agro-pastoral conflicts with the host populations. Worthy of concern is the fact that 16 per cent of young refugees do not attend school and that owing to the movement restrictions, are confined in the camp, which makes it impossible for them to find work outside.

The location of the refugee settlement area does not offer any economic opportunities other than agriculture.



UNHCR / Xavier Bourgois

Even prior to this crisis, the Far North region faced considerable structural obstacles to development, and its socio-economic and human development indicators rank as some of the lowest in the country. The region is largely isolated from the rest of Cameroon in terms of economic integration and is burdened by the presence of large numbers of refugees.

Regarding the environment and access to energy sector, the situation has slightly improved in 2017. The reforestation of 33.35 hectares with 40,000 plants was completed. Unfortunately, these efforts remain insufficient in view of the demand for wood and slow growth caused by soil aridity, a lack of water for crop irrigation, an insufficient promotion of alternative energies, and limited access to land and resources, which increase the risk of intercommunal tensions and result in insufficient income for persons of concern.

All households use wood as their main energy source for cooking. Overall, 97 per cent of households use traditional fire places and only three per cent use improved, energy efficient stoves. A survey conducted in 2016 showed that 46 per cent of the population harvests wood to use for cooking purposes. Unfortunately, the proportion of the camp that has been electrified is still low, with barely 30 streetlights installed in 2015, which provide a coverage rate of just six per cent.

**OBJECTIVE 1:**  
**Population has sufficient access to energy**

- 10,000 households had access to sustainable energy
- 10,000 households provided with energy saving equipment

**OBJECTIVE 2:**  
**Natural resources and shared environment better protected**

- 132,500 tree seedlings planted

**OBJECTIVE 3:**  
**Self-reliance and livelihoods improved**

- 10,000 individuals received production kits or inputs for agriculture/livestock/fisheries activities
- 500 small business associations formed/supported

In 2018, RRP partners will focus on enhancing refugee self-reliance, increasing access to energy and improving the protection of natural resources and the environment. Activities will include the continuous reforestation of Minawao camp and its surrounding areas through developing green nurseries and education programmes on environmental protection. The sector will reinforce the local production of energy-efficient stoves and the promotion of agricultural activities including investing in sustainable IGAs. Projects will be implemented in the camp and in selected villages through a participatory community approach. Beneficiary groups will include refugees and host populations.

## Shelter & NFIs

Minawao camp was established in 2013 and its population grew from 7,000 persons in December 2013 to 22,000 in December 2014. By the end of 2016, the population of the camp had already reached 62,000 persons. With the spontaneous/self-organized departures recorded between April and June 2017, the camp's current population will stand at approximately 60,000 persons by the end of 2017. Between 2015-16, Cameroon's administrative authorities increased the camp area, from 118 ha to 319 ha, and then to 623 ha by the end of 2016.

All refugee households have been allocated a piece of land (10 m x 15 m), emergency shelter and an NFI kit. Information sessions have been organised for all households still living in emergency shelters in the camp on how to transform these into transitional shelters. However, with the spontaneous departure of 13,000 people in 2017, several emergency and transitional shelters were destroyed or dismantled by some of the refugees who had decided to go back to Nigeria. An assessment carried out in June 2017 revealed that the

camp consists of a total 6,372 transitional shelters (54 per cent) and 5,333 emergency shelters (46 per cent) including 4,333 emergency family shelters, 63 UNHCR tents and 937 shelter boxes. The average number of people per shelter in the camp is five.

In 2018, emphasis will be placed on assisting out-of-camp refugees. RRP partners plan to provide household items and shelter assistance to 30,000 out-of-camp refugees living in host villages in the three departments of *Mayo Tsanaga*, *Mayo Sava* and the *Logone-et-Chari*. The priority response for these populations will consist in constructing appropriate shelters for all refugees, and distributing NFI kits to them.

Furthermore partners plan to construct and rehabilitate shelters and community facilities as well as transit centres, repair the roads within Minawao camp and distribute hygiene kits to women of child-bearing age. As part of the assistance provided to host populations, around the camp and in villages, RRP partners will ensure the rehabilitation and construction of social and community facilities and the distribution of transitional shelter kits and NFIs to vulnerable households.

### OBJECTIVE 1:

**Shelter and infrastructure established, improved and maintained**

4,500 emergency shelters provided

4,200 transitional shelters provided

### OBJECTIVE 2:

**Land allocation for shelter supported**

7,500 individuals received land allocations for shelter

### OBJECTIVE 3:

**Population has sufficient basic and domestic items**

18,000 basic and domestic items provided



By the end of September 2017, the WASH sector was able to provide an average of 16 litres per person per day to refugees in Minawao camp. This is still below the minimum standard, but needs to be seen within the context of a region with a high scarcity of natural resources.

To date, water has been predominantly obtained from boreholes and the new Mokolo-Minawao water pipeline, which was completed in April 2017. In the area of hygiene and sanitation, facilities were installed and the following ratios have been reached: 21 persons per latrine, 23 persons per shower, 1,270 persons per garbage pit, one trash can for 15 households, 561 persons per hygiene and sanitation assistant and one waste management site.

**OBJECTIVE 1:**  
**Supply of potable water increased or maintained**

20 litres of potable water available per person per day

130 boreholes constructed

100 tap stands constructed

**OBJECTIVE 2:**  
**Population lives in satisfactory conditions of sanitation and hygiene**

1,500 emergency latrines constructed

6,379 household sanitary latrines constructed

9,909 hygiene kits distributed

In 2018, for the 145,000 refugees and hosts to be assisted, the WASH sector will ensure considerations relating to gender, protection and the environment are taken into account and streamlined into the sector’s response. Partners aim to increase or maintain the current potable water supply to respect the standard of 20 litres per person per day in Minawao camp and surrounding areas. Additional standpipes in the camp and boreholes in host villages around the camp will be constructed, and the rehabilitation and maintenance of boreholes will be carried out. In parallel, water point management committees will receive capacity building.

Regarding sanitation response, particular focus will be placed on waste management, namely collection, disposal and treatment. Furthermore RRP partners will distribute hygiene kits, and train hygiene and sanitation assistants. In addition, a “WASH in school” pilot strategy will be instituted. For the “*villages d’opportunités*”, activities will be conducted on the basis of the Participatory Hygiene and Sanitation Transformation (PHAST) programme, alongside the construction of latrines and showers in schools, health centres and markets. Partners will further ensure that local committees will engage in waste management and that a minimum WASH package in schools will be distributed.

# Financial Requirements

## By Organization & Sector

ORGANIZATION	PROT	EDU	FOOD SEC	HEALTH	NUTR	LIVELI-HOODS & ENVIRON	SHELTER & NFIS	WASH	TOTAL
ABIOGET						1,406,880		476,250	1,883,130
ADES						10,000			10,000
ADRA		150,000							150,000
AHA				590,000					590,000
ALDEPA	689,455								689,455
ALVF	300,000								300,000
ASOL								251,000	251,000
CAPROD	300,000								300,000
CLIRA	840,500								840,500
CODAS CARITAS								196,910	196,910
COPRESSA			300,000			36,800			336,800
FADEC	2,162,400								2,162,400
IEDA Relief		74,000		60,000		102,372	1,483,728	150,000	1,870,100
IMC					400,000				400,000
INTERSOS	502,900	450,364	356,250				579,705	447,453	2,336,672
IRC	500,000		84,000			15,000	300,000	350,000	1,249,000
IUCN						2,249,503			2,249,503
LWF						2,662,416		364,343	3,026,759
NRC	490,000	600,000	650,000			120,000	641,167	840,710	3,341,877
Plan International	670,000	510,182	1,970,000	60,000	298,000			286,198	3,794,380
Public Concern		500,000							500,000
Solidarités International			125,885			370,521		128,198	624,604
UNDP						2,003,400			2,003,400
UNFPA	450,000			750,000					1,200,000
UNHCR	11,771,795	3,581,019	1,000,000	2,378,671	594,108	4,635,827	2,626,485	2,705,772	29,293,677
UNICEF					150,000				150,000
WESDE						254,702		222,167	476,869
WFP			11,044,968						11,044,968
WHO				830,000					830,000
<b>TOTAL</b>	<b>18,677,050</b>	<b>5,865,565</b>	<b>15,531,103</b>	<b>4,668,671</b>	<b>1,442,108</b>	<b>13,867,421</b>	<b>5,631,085</b>	<b>6,419,001</b>	<b>72,102,004</b>







# CHAD REFUGEE RESPONSE PLAN

10,000

REFUGEE  
POPULATION

15,000




HOST POPULATION  
TARGETED

US\$ 14.5M

REQUIREMENTS

5

PARTNERS  
INVOLVED

-  Refugee camp
-  Refugee crossing
-  Refugee locations



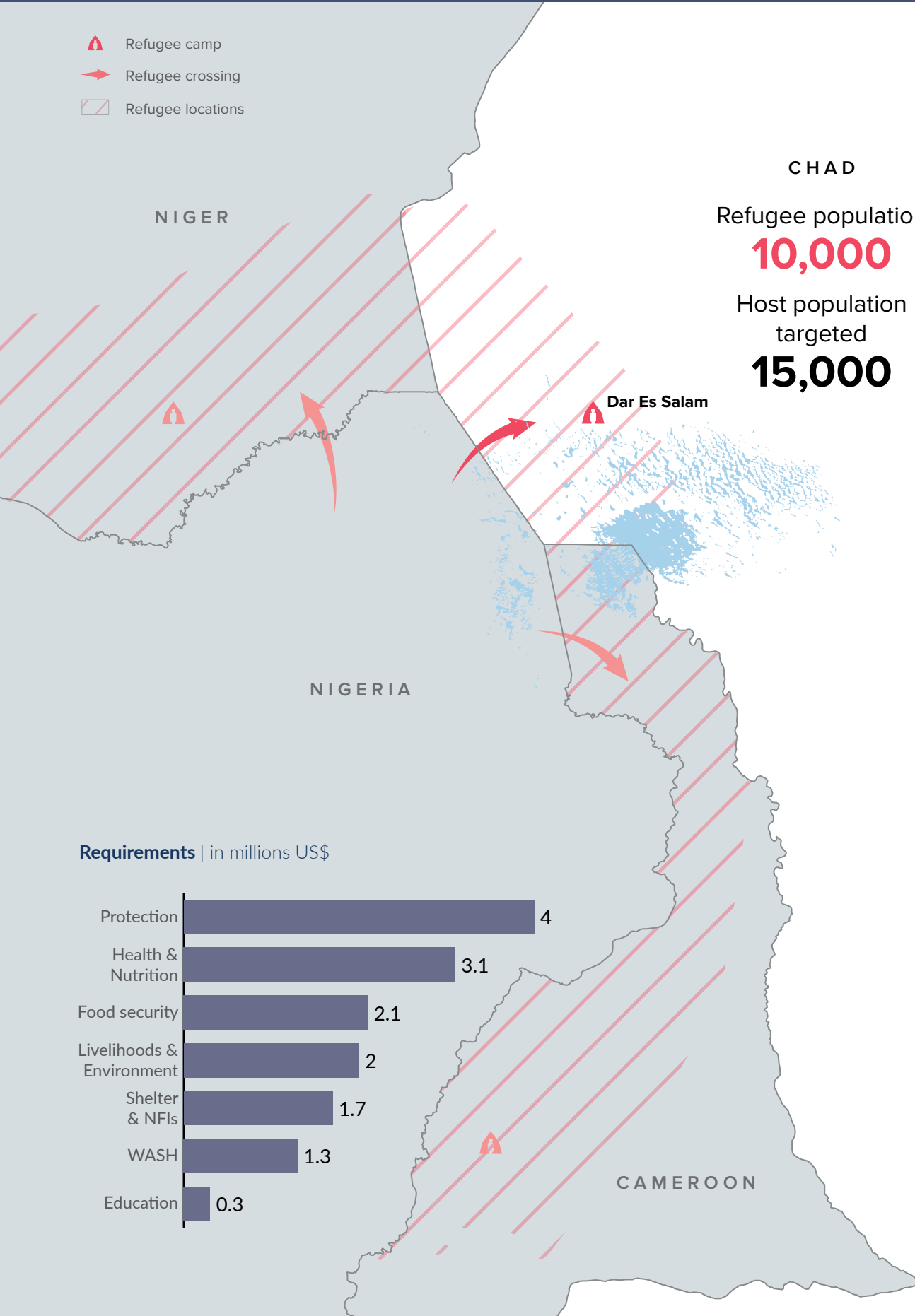
CHAD

Refugee population

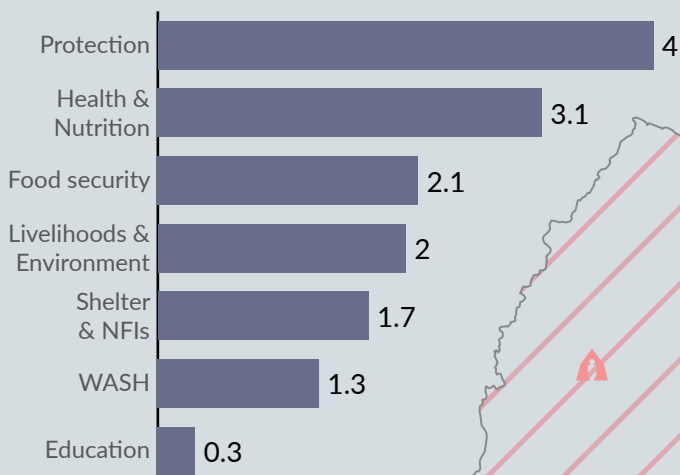
**10,000**

Host population  
targeted

**15,000**



Requirements | in millions US\$



# Country Overview

## Introduction

The overall security situation improved in Chad's Lake department in 2017, with fewer reported Boko Haram incursions. The situation worsened in Nigeria, Cameroon and Niger however, prompting the Chadian government to reinforce security restrictions, carry out military counter-insurgency operations and keep its borders closed. Not only did these measures negatively affect refugee movements and impact cross-border trade, but they also limited humanitarian access in the region. As has been the case in previous years, these measures have had a severe impact on the affected populations, mainly with regards to food security. Furthermore, the removal of Chadian troops from Niger led to security vacuums which prompted the departure of Chadians who had been living in Niger for decades, and who chose to return to Chad.

The crisis in Chad's Lake department is aggravated by poverty, underdevelopment and harsh climatic conditions, which also cause infrastructure to deteriorate at a much higher pace. As of October 2017, Chad hosted over 9,000 Nigerian refugees, out of which 8,675 live in the Lake area. The remaining live as urban refugees in the capital N'Djamena. In 2018, RRP partners plan to assist 10,000 Nigerian refugees, including eventual new arrivals and 15,000 host community members.

Over 152,000 people remain internally displaced, mostly in remote areas or on Lake Chad's islands. The latest group of Chadian returnees (6,500 persons) is currently hosted in two sites, *Dar Al Kheir* and *Dar Al Amné*, near Dar es Salam refugee camp. Although the members of this group are not considered refugees, they are entitled

to benefit from existing local services, and their arrival has put a heavy strain on already limited resources in the camp's health centre and schools. As a result, the quality of assistance delivered to Nigerian refugees has deteriorated. As conditions for voluntary repatriation are not yet met in Nigeria, RRP partners foresee no returns to Nigeria in 2018.

In addition to its semi-arid climate, Chad is also characterized by a scarcity of natural resources such as water, wood, and arable land. The country's socio-economic state is severely affected by these factors. Although nearly 80 per cent of the population is engaged in the agro-pastoral sector, the country experienced remarkable economic growth as of 2003, when Chad started to exploit its oil fields in the south-west. However, from 2015 onwards, falling oil prices, insufficient rainfall and a deteriorating security environment led the economy into recession, further exacerbating an already difficult socio-economic environment. Food security and access to basic services remain a challenge, with presently close to 3.5 million people in the country facing food insecurity and 220,000 cases of severe acute malnutrition expected country-wide in 2018. To address these challenges, the Government of Chad launched the "16 urgent austerity measures", requested a loan from the International Monetary Fund, and organized a round table of donors in Paris in September 2017, during which over \$20 billion in commitments were pledged for the implementation of its National Development Plan 2017-2021.



## Overall Needs and Strategic Response

Together with the Government, RRP partners continue to provide protection and humanitarian assistance to Nigerian refugees. Due to lack of humanitarian access in many areas, this is easier in the refugee camp, than outside of it.

Refugees still have serious protection needs that must be addressed, such as ensuring access to asylum, given that the border to Nigeria is closed. Civil registration and documentation need to be further strengthened, especially with regards to the issuance of birth certificates. The recently launched “Support to Citizenship and Prevention of Statelessness” project, will only cover babies born as of September 2017, but not cover children born prior. Assistance to persons with

specific needs also has to be improved. Most of all, support for unaccompanied and separated children such as Best Interest Determination and family tracing, needs to be strengthened. As regards access to education, existing infrastructures will have to be repaired and equipped, mainly by building classrooms with durable materials.

Overall, in Chad’s Lake region, women, including female refugees, are increasingly at risk of sexual and gender-based violence (SGBV). The reluctance of victims to denounce abuse, the inadequacy of referral mechanisms, the dysfunctionality of the judicial system, which fails to prosecute a great number of perpetrators such as military and administrative officials, and the tendency of concerned families to resolve these issues



UNHCR / Oualid Kheififi

amicably with the help of religious or traditional authorities, all contribute to complicating the fight against SGBV. Therefore, RRP partners plan to further strengthen SGBV prevention and response, including by increasing the capacity of community-based protection mechanisms.

In terms of the most recurrent health issues, the main illnesses recorded are acute respiratory infections, malaria, diarrhoea, intestinal parasites and eye infections. The coverage rate of routine immunization in the Lake region is among the lowest in the country. There is a lack of appropriate health infrastructures, especially for deliveries (maternity) and there are persistent breaks in ARV drugs for individuals affected by HIV/AIDS. In 2018, RRP partners will continue to provide primary health care and support the hospital in Baga Sola as well as improve infrastructures and carry out routine immunization programmes. Patients needing emergency interventions, will be transferred to the district hospital. Partners also plan to establish health committees to increase the awareness of the community on health risks, and negotiate ARV medication supply with the Ministry of Health.

The installation, maintenance and repair of water/sanitation infrastructures and domestic waste management remains a challenge. More importantly, refugees still need sensitization on appropriate hygiene practices. Therefore, RRP partners will continue to provide capacity building for water management

committees, increase the number of water/sanitation installations infrastructures and ensure the promotion of hygiene improvement activities by mobilizing and empowering communities.

As regards shelter, emergency shelters will need to be replaced with more durable structures, because temporary measures such as tarpaulins are proving grossly inadequate. As durable shelters are cost intensive, partners can only provide them for a limited number of persons with specific needs. However, they will encourage and guide other households to construct their own shelters with local materials, which are far better adapted to prevailing climatic conditions. Mainstreaming the use of cash/vouchers in several assistance activities will also be prioritized in 2018, where possible.

Given the rising level in food insecurity, refugees will continue to need unconditional food assistance. Difficult access to arable land in the Lake department limits the ability of refugees, who are largely farmers, to engage in agricultural activities and earn an income. Therefore, RRP partners will continue to provide food and nutrition assistance, while at the same time support livelihood activities and, together with local authorities, negotiate the access to land. Host communities will be integrated in beneficiary groups/associations. In addition, partners will aim to significantly increase the proportion of households using alternative energy and energy-saving equipment.

## Coordination & Partnerships

Concerning the refugee response, the Refugee Coordination Model (RCM) will remain the basis for inter-agency coordination in the Lake department. Together with the Chadian government, UNHCR will coordinate the response of the respective sector activities with partner agencies through regular coordination meetings in N'Djamena and Baga Sola.

However, humanitarian partners will increasingly act as catalysers and advocate for development interventions in the area. To this end, partnerships with traditional and non-traditional donors to increase political support and understanding will continue to be nurtured. In particular, the World Bank is expected to cooperate with the Chadian Government, including in the Lake region, through its IDA-18 sub-window for refugees and host communities. This could create the necessary conditions for economic leverage in the area, especially if additional development partners get involved. An encouraging development is the recent partnership signed between UNDP and the Lake Chad Basin Commission, to engage in development activities in the region.

The traditional partnership with UNHCR's government counterpart, the *Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés* (CNARR), will be sustained. Collaboration with national and international NGOs such as IRC, CRT and AIRD in the Lake area will also continue. Local and traditional authorities such as Préfets, Sous-Préfets and Chefs de Canton have been the first responders to the humanitarian crises in the Lake area and humanitarian partners have been constantly engaging with them through regular information sharing. This fundamental cooperation will continue in 2018.

**RRP PARTNERS**

- FAO
- UNFPA
- UNHCR
- UNICEF
- WFP







# Planned Response

## Protection

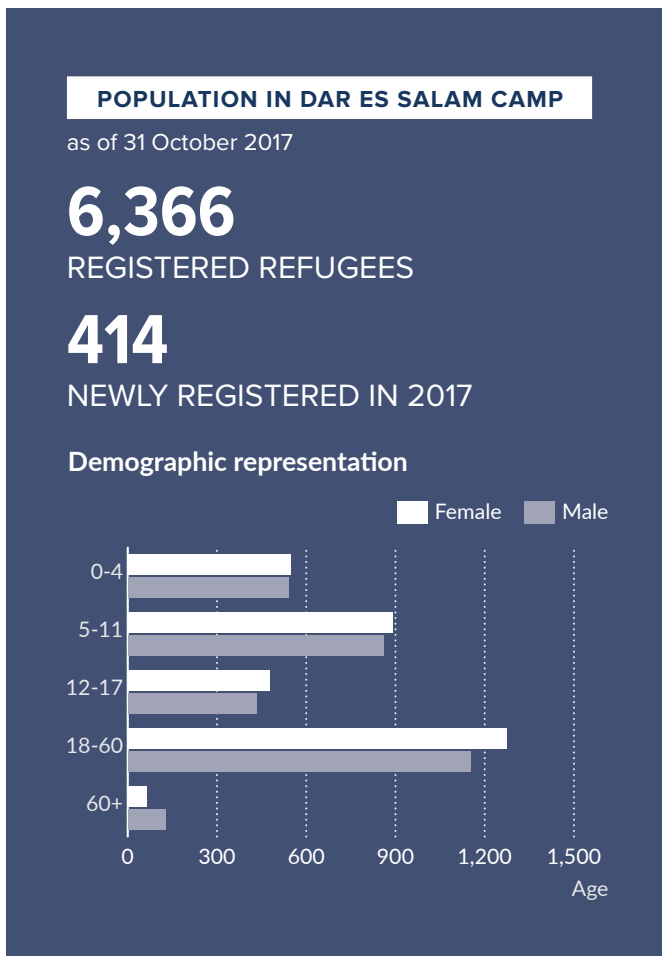
By the end of October 2017, the number of Nigerian refugees in Chad stood at 9,191 individuals, including 6,366 in Dar es Salam camp and 2,825 residing outside the camp. More than half (58.8 per cent) of the population is composed of children. All of the refugees in the camp have been biometrically registered by CNARR and UNHCR, while the registration of refugees living in out-of camp settings will continue in 2018. A joint UNHCR-CNARR mission carried out in October

identified more than 500 households (consisting of over 2,200 persons) living in the localities of Litri, Kabirom and Kaiga Ngouboua, as well as 2,700 asylum-seekers in the Kangelom area that were known to UNHCR but to whom access had not until then been possible due to security restrictions. In 2018, RRP partners will also continue to support birth registrations, including for late birth registration, and support the issuance of identity documents.

UNHCR, CNARR and partners will continue to closely monitor population movements at the border to ensure, *inter alia*, that people in need of international protection have unrestricted access to asylum. These activities will be carried out in areas surrounding the sub-districts of *Daboua, Kaiga-Ngouboua and Kangelom*.

Of major protection concern in Dar es Salam refugee camp are the frequent intrusions of armed elements such as Chadian military and security forces. As a response, the protection sector will continue to conduct trainings and sensitization sessions for the military on the principle of the civilian and humanitarian character of refugee camps. Moreover, refugees are sometimes suspected of being associated to Boko Haram and are arbitrarily detained. Regular protection monitoring will be conducted to identify detained refugees, investigate their detention conditions, and to propose adequate solutions.

Assistance for persons with specific needs (PWSN) will need to be stepped up in order to ensure that they live in dignified conditions and receive the necessary





protection. So far, over 700 PWSN in Dar es Salam camp have been receiving adequate assistance and protection. In 2018, partners will continue to provide support, especially for those who do not have necessary support from the community. Doing so will contribute to the prevention of sexual abuse and other negative coping strategies.

Children are among the most vulnerable refugees. There are currently 97 separated children and 14 unaccompanied children in Dar es Salam camp who are receiving protection and assistance. With the progressive improvement of the security situation and increased humanitarian access to host villages, more children in need of support will be identified in the months to come. In parallel, Best Interests Determination (BID) processes for this population group will be strengthened.

SGBV against refugee women and girls but also boys, is one of the major protection concerns in the Lake Chad

region. Unfortunately, weak legal/judicial system response constitutes one of the main barriers to remedying this issue. The majority of abuses go unpunished, with victims often being forced to continue to live with the perpetrators. Some areas (sub-prefectures) do not have judicial authorities to prosecute perpetrators and customary practices contribute to perpetuating these crimes, such as child marriage. During the first three quarters of 2017, at least 1,365 GBV incidents were reported. It is within that framework that RRP partners intend to strengthen the community and institutional capacity in Dar es Salaam camp and in refugee settlements to prevent and respond to SGBV through case management and referral towards essential services. In effect RRP partners will provide capacity-building for SGBV committees and community mobilisers will organise awareness-raising campaigns on SGBV prevention and response.

**OBJECTIVE 1:**

**Quality of registration and profiling improved and level of individual and civil status documentation increased**

90% of refugees registered

260 refugee children issued with birth certificates under the regular birth registration procedure

3,376 refugees aged 18 years+ were the holders of an individual identity document

**OBJECTIVE 2:**

**Access to asylum, protection and community-based protection mechanisms strengthened**

Women involved in 50% of decision-making instances

100 representatives of the Government, NGOs and members of civil society trained on refugee protection

100 military and security force elements trained on human rights and principles

**OBJECTIVE 3:**

**Protection of children strengthened**

100 UASC identified and documented who benefited from psychosocial support or mental health services

30 children for which best interest determination (BID) procedures were carried out

15 UASC identified and reunited with their families or placed in alternative care arrangements

**OBJECTIVE 4:**

**Risk of SGBV is reduced and quality of response improved**

30 awareness-raising campaigns on SGBV prevention and response conducted

150 SGBV incidents reported for which survivors received assistance, including judiciary assistance

**OBJECTIVE 5:**

**Community mobilization strengthened and expanded including for populations with specific needs**

100% of social groups represented in community gatherings and involved in decision-making

360 PWSN received adequate assistance

**OBJECTIVE 6:**

**Potential for voluntary return realized**

2 assessments on return intentions conducted or updated

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## Education

The emergency education response in Dar es Salam camp has enabled 851 children who had never been to school before, to get access to education. There are two primary schools, *Espoir 1* and 2, in Dar es Salam camp; one attended by refugee and local children, and the other, by refugee children only. A total of 1,818 pupils (including 803 girls) were enrolled in both schools as of end June 2017. The two schools consist of 19 classrooms, including 13 built with durable materials while six are Temporary Learning Spaces. Out of the 27 teachers recruited, only 15 are qualified and seven have been appointed by the Ministry of Education. The student to teacher ratio is 67:1, considerably higher than the standard of 40 students per teacher. Since September 2017, pupils from *Espoir 1* and 2 have been provided with school meals.



UNHCR / H el ene Caux

### OBJECTIVE 1:

#### Population has optimal access to education

1,950 refugee children and 550 children from the host community of school-going age enrolled in primary education

21 qualified teachers trained

No secondary level school exists in the camp because until recently there were no secondary level students. In 2018 however, it will be necessary to open a lower secondary school to meet the demand and ensure students are able to pursue their studies without interruption.

To improve learning conditions and to address the low capacity of existing school infrastructures, 24 additional classrooms would have to be constructed, and 20 teachers recruited. In addition, the number of latrines, school equipment, textbooks and teaching materials is also insufficient.

Despite these considerable needs, RRP partners will concentrate on enhancing the basics. In 2018, partners will continue to provide primary level education to refugees and to children from the host community. They will construct and equip new classrooms for primary and lower secondary education and rehabilitate temporary classrooms. This will include installing latrines to improve hygiene and sanitation, with the added effect of increasing school attendance. Such measures should particularly affect girls, who often refrain from attending school due to safety concerns. Partners will also provide teacher training and aim to support the Parent's Teacher Association by offering parents the opportunity to engage in Income Generating Activities (IGAs).





## Food security

Food security is essential for preventing malnutrition, maintaining good health, and helps children to perform better in school, among many other benefits. Depending on market conditions in refugee settlement areas, monthly food assistance is provided by WFP in-kind or through vouchers worth 6,000 FCFA/person/month, which is supposed to roughly allow each beneficiary to purchase food for a calorific value of 2,100 Kcal/day. For in-kind assistance, the basket is composed of cereals, pulses, salt, sugar and oil, for the same calorific value as mentioned above. A total of 9,000 women, men, boys and girls and other vulnerable refugees benefited from food assistance throughout 2017, including 6,500 through the cash and voucher program and 2,500 in-kind. The quality of food and cash distributions is monitored through monthly Food Basket Monitoring (FBM) exercises conducted on-site. Post Distribution Monitoring (PDM) is organized in beneficiary households each quarter to assess the impact of assistance on food consumption habits, diet diversity and coping strategies as well as to verify whether beneficiaries have been served with dignity, security and safety.

Despite the food assistance provided, a number of households continue to live in precarious conditions as they face hurdles in generating enough income to cover

### OBJECTIVE 1:

#### Ensure the food needs of crisis affected population is met

9,000 refugees received food assistance on a monthly basis, including 6,500 through cash and voucher programmes and 2,500 in kind

their basic needs. For households that are composed of more than seven persons, the amount of resources is insufficient. Assistance levels must be maintained to avoid food insecurity and the negative consequences that accompany it, such as malnutrition, increased morbidity and mortality, decreased school enrollment, increased vulnerability to protection risks such as sexual exploitation and an increase in negative coping mechanisms.

Therefore, in 2018, RRP partners plan to continue to provide food assistance to refugees through the cash and voucher programme and through in-kind assistance. Additional resources are sought to cover needs for households comprised of more than seven persons. They will continue to organize monthly Food Basket Monitoring (FBM) exercises. In addition, they plan to call for tenders at the national level to find suppliers that respect market prices.

## Health & Nutrition

Free health care is provided to refugees and host communities at the Dar es Salam camp health center, which offers preventive, curative mental and reproductive health care, prevention and response to malnutrition and vaccinations. However, the center is made of plastic sheeting, which has been damaged, leaving unprotected areas exposed to sand, wind and rain. Consultation tents have no electricity or lighting. Health facilities outside the camp are either ill-equipped or lacking in capacity to respond to the needs of the local population and Nigerian refugees.

The medical team in the refugee camp is understaffed and the arrival of new populations from Niger since July 2017 has stretched the health centre beyond maximum capacity. In 2018, RRP partners will improve the Dar es Salam health center's infrastructure, recruit and train additional qualified health personnel, and provide equipment, and drugs, including psychotropic drugs, and other medical supplies. The health sector will also support existing referral mechanisms to tertiary health facilities.



UNHCR / Oualid Khelifi

**OBJECTIVE 1:  
Health status of the population improved**

- 380 children vaccinated against measles

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- Crude mortality rate < 2 (1000 population/month)

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- Crude mortality rate of children aged under 5 years < 3 (1000 population/month)

**OBJECTIVE 2:  
Population has optimal access to reproductive health and HIV services**

- 120 individuals living with HIV received anti-retroviral treatment (ART)

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- 90% of livebirths attended by qualified personnel

**OBJECTIVE 3:  
Strengthen the prevention of and response to malnutrition**

- 200 children aged 6-59 months admitted into SAM treatment

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- 500 children aged 6-59 months admitted into MAM treatment

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- Prevalence of global acute malnutrition (GAM) among children aged 6-59 months < 10%

The leading causes of illness are acute respiratory tract infections, malaria and diarrhea. Furthermore, the region is prone to disease outbreaks such as cholera, measles and polio. In addition to vaccination campaigns, the sector will manage a disease surveillance system to ensure early detection and response. The prevalence of HIV/AIDS in the Chad's Lake region is relatively high compared to other regions in the country and currently, 116 Nigerian refugees with HIV are on antiretroviral treatment (ART) in the camp. In collaboration with the health district, activities such as HIV/AIDS awareness-raising, especially by health committees; voluntary testing, counselling, and support for the prevention and treatment of mother to child transmission, and for persons living with HIV, including through the provision of ART, will be carried out in 2018. The sector will work

closely with the health district to reduce the frequency of cuts in ART drug provision, which increase the risk of patients developing resistance to the medication.

The results of the specific, measurable, attainable, relevant and timely (SMART) Standardised Expanded Nutrition Survey (SENS) of January 2017 carried out in Dar es Salam camp presented a critical situation for chronic malnutrition and anemia. While according to WHO, the prevalence of chronic malnutrition and overall anemia should be under 20 per cent, it stands at 64.8 per cent for children aged 6 to 23 months and at 46.5 per cent for children aged 24 to 59 months. The SMART survey conducted in July/August among host communities in the Lake region by the Ministry of Health and UNICEF, showed that the rate of global acute malnutrition (GAM) increased to 18.1 per cent, compared to 12.2 per cent in 2016. It is likely that this has been caused by inadequate dietary intakes and unbalanced diets characterized by a micronutrient deficiencies.

In order to address this nutritional imbalance and to protect children from irreversible physical, cognitive and mental harm, RRP partners will distribute nutritional supplements to infants aged 6-23 months, and provide treatment to all malnourished children in 2018. To measure the nutritional status of children and pregnant and lactating mothers in the camp, a monthly malnutrition screening exercise will be carried out by community health workers.



## Livelihoods & Environment



UNHCR / Ibrahima Diane

Providing Livelihoods support to Nigerian refugees is crucial to allow them to cover theirs and their families' basic needs, become self-reliant, less dependent of humanitarian assistance and to live in dignity.

Dar es Salam camp is located on the mainland, far from Lake Chad's shores, which limits refugees' access to fertile agricultural and exploitable land, a rare resource, even for local populations. Security-related access restrictions imposed on fishing, one of the most promising activities in the region, have contributed to limiting the number of livelihood opportunities available to refugees. Although such activities have been implemented in 2017, only 19 per cent of the population

in need was able to benefit from them due to limited resources. Refugees and host community beneficiaries were organized into mixed groups and received agricultural inputs, fishing kits, market gardening kits and/or micro-loans for income-generating activities (IGAs). Adding to already difficult circumstances is the absence of vocational training opportunities and of financial institutions in the area, making official microfinancing/loans impossible. Complicating matters further are the socio-economic conditions in which refugees find themselves after only recently coming out of emergency conditions.



**OBJECTIVE 1:  
Self-reliance and livelihoods improved**

3,800 individuals received production kits or inputs for agricultural/fishery activities

365 individuals received loans through UNHCR partners

**OBJECTIVE 2:  
Natural resources and shared environment better protected**

5,000 tree seedlings planted

2,000 households provided with energy saving equipment

**OBJECTIVE 3:  
Peaceful coexistence with local communities promoted**

2,309 refugees provided with support with a view to achieving socio-economic self-reliance in host villages

In 2018, RRP partners will increase the provision of production kits or inputs for agricultural/fishery activities. They will continue to support access to land with the support of local authorities and host communities. In addition, they will strengthen polder exploitation by collaborating with the land owners, with the support of state technical services. Support for livestock activities will include vaccinations and veterinary care. RRP partners will also provide loans for IGAs. A recently developed livelihood and food security project for IDP returnees in the Lake Chad region, which combines unrestrictive cash and agricultural/small ruminant inputs, will be replicated and adapted for refugees in 2018.

Dar es Salam camp is located in an arid environment where strong winds and sand storms affect the daily activities of refugees. In addition, as a result of the demographic pressure this population has placed on the area, firewood for cooking is becoming scarce, forcing women to travel long distances to collect it, exposing them to protection risks such as rape and other physical attacks. Furthermore, fireplaces used are not energy

efficient. To limit the negative effects of the wind and to provide adequate amounts of wood, the reforestation of sites becomes a capital necessity. This will begin with the installation of a nursery in 2018, in which tree seedlings will be planted and protected. Reforestation efforts will be implemented through a cash-for-work approach. Partners will also train refugees in caring for seedlings and planting trees in cooperation with the local environmental technical services. In further efforts to mitigate the negative effects on the environment, sensitization and education sessions will be organized and the use of improved banco fireplaces will be encouraged. Moreover, RRP partners will provide energy-saving equipment to 2,000 households.



UNHCR / Ouaid Khelifi

## Shelter & NFIs

The great majority of refugees in Dar es Salam camp still live in emergency shelters, which are made of plastic sheeting. A total of 1,144 emergency shelters have been built or rehabilitated, 500 of which using local materials. Due to the extreme climatic conditions, characterized by heavy winds and rain, emergency shelters are frequently destroyed or damaged and often do not reach their expected six month lifespan. A tarpaulin distribution was organized at the onset of the rainy season to help refugees protect themselves from rain, but the need to upgrade shelters in the camp remains, so that its population can live in adequate conditions.



### OBJECTIVE 1:

**Shelter and infrastructure established, improved and maintained**

1,684 households living in adequate shelters in the camp

### OBJECTIVE 2:

**Population has sufficient basic and domestic items**

100% of households' needs for basic and domestic items met in the camp

Refugees are in need of shelters made of durable, local materials that are better adapted to the environment in which they are living. Although 50 semi-durable shelters have been built and allocated to persons with specific needs, the need is much higher. It is difficult for refugees to collect and transport local materials, which are very scarce. Therefore, in 2018, RRP partners will distribute construction materials to the refugee population, who will not only construct new shelters but also rehabilitate existing ones within the camp. The refugee community will be encouraged to participate in these efforts and training will be organized on construction techniques and fire prevention methods.

As the Alternative to Camps strategy is gradually implemented in the Chad's Lake region in 2018-19, to promote the socio-economic empowerment and integration of refugees, the most vulnerable individuals will be prioritised for NFI distributions. This response will cater for over 1,000 individuals with specific needs who do not have the socio-economic and/or physical capacity to carry out productive activities and acquire or replace domestic NFIs on their own. Monthly soap distributions will be maintained to continue improving hygienic and health conditions in the camp.



The main issues that exist within the WASH sector relate to refugees’ access to latrines and to unsanitary household waste management and hygienic practices. There are currently 19 boreholes in Dar es Salam camp, and the entire camp population lives within 200 meters of a water point. Eleven committees have been set up to manage water points and at 30 liters, the amount of water available per person per day exceeds the UNHCR standard of 20 litres. Water quality is monitored and analyzed on a regular basis.

In 2018, in order to maintain the quantity and quality of water available, RRP partners will strengthen the capacities of the water management committees to ensure they repair existing boreholes. Community outreach “hygiene promoters” will continue to carry out sensitization sessions on the water chain to encourage households to better manage water collected from the boreholes at home. Furthermore, refugees have agreed to contribute financially in the collection and saving of

funds to purchase spare parts for mechanized pumps if needed, in an attempt to sensitize the population to use these pumps carefully.

To fight water-borne diseases and cholera, water quality will be monitored regularly and a health survey will be conducted to ensure that appropriate and timely measures are taken in the event of contamination.

Sanitation and hygiene conditions are of concern. There are 440 latrines in Dar es Salam camp, which cover only 24 per cent of the total needs. This figure includes a very limited number of family latrines, that fill up rapidly and cannot be emptied. The soil in the camp does not favor the construction of durable latrines, because it is sandy and structures collapse or fill up within one year. Since the coverage rate cannot increase significantly, it is essential that the type of constructions be changed and that durable and drainable materials be used instead. Hygienic and health conditions are intricately linked and if a sufficient number of latrines is not constructed, refugees will revert to open defecation, which will encourage the propagation of diseases.

In 2018, RRP partners will construct new boreholes in host communities and rehabilitate and maintain boreholes in Dar es Salam camp. To increase the coverage from 24 per cent to 49 per cent, RRP partners plan to construct new shared family latrines made of durable and drainable materials. They will organize trainings and 12 sensitization campaigns covering environmental health and good hygiene practices as well as distribute hygiene and sanitation kits. Finally, the capacities of the eleven water management committees will be strengthened.

**OBJECTIVE 1:**  
**Population lives in satisfactory conditions of sanitation and hygiene**

- 150 drainable shared family latrines constructed
- 12 sensitization campaigns on environmental health and basic hygiene practices conducted

**OBJECTIVE 2:**  
**Supply of potable water increased or maintained**

- 19 boreholes rehabilitated or maintained in the camp
- 11 water management committees active in the camp
- 20 litres of potable water available per person per day

# Financial Requirements

## By Organization & Sector

ORGANIZATION	PROTECTION	EDUCATION	FOOD SECURITY	HEALTH & NUTRITION	LIVELIHOODS & ENVIRONMENT	SHELTER & NFIS	WASH	TOTAL
FAO				100,000	500,000			600,000
UNFPA	642,000			1,350,000				1,992,000
UNHCR	1,779,104	274,469		1,460,870	1,498,962	1,720,328	1,287,951	8,021,684
UNICEF	1,583,000							1,583,000
WFP			2,100,000	176,000				2,276,000
<b>TOTAL</b>	<b>4,004,104</b>	<b>274,469</b>	<b>2,100,000</b>	<b>3,086,870</b>	<b>1,998,962</b>	<b>1,720,328</b>	<b>1,287,951</b>	<b>14,472,684</b>





# NIGER REFUGEE RESPONSE PLAN

**108,000**

REFUGEE  
POPULATION

**15,000**




HOST POPULATION  
TARGETED

**US\$ 69.5M**

REQUIREMENTS

**24**

PARTNERS  
INVOLVED

-  Refugee camp
-  Refugee crossing
-  Refugee locations



**NIGER**

Refugee population

**108,000**

Host population  
targeted

**15,000**

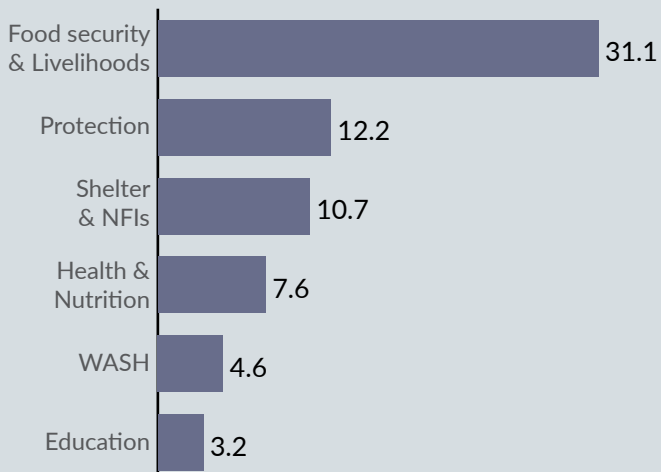
 Sayam Forage

CHAD

NIGERIA

CAMEROON

**Requirements** | in millions US\$





# Country Overview

## Introduction

For populations in Diffa, Niger, 2018 will mark the fifth year since they began hosting Nigerian refugees fleeing the Boko Haram conflict. Since it spilled over from Nigeria in 2014, Niger has suffered from the consequences of an insurgency that has since then destabilized the Lake Chad Basin region as a whole. According to figures from the Niger Government, 240,000 people (including refugees, returning nationals, and internally displaced persons (IDPs)) are currently scattered across 147 sites, most of whom are hosted by local communities. The majority of the over 108,000 Nigerian refugees in Diffa (13 per cent of the region's total population) live in out-of-camp settings, with only 12,000 settled in Sayam Forage camp, which is the only formal refugee camp in the area.

In 2017, Boko Haram carried out less incursions and the protection environment in the Diffa region improved. This, in turn, allowed RRP partners to access more areas and humanitarian presence grew as opportunities presented themselves, calling for new partners to get involved.

Due to the limited capacity of the civil registration system in the region, 80 per cent of the forcibly displaced population do not have proper identity documents, which puts them at risk of statelessness. To address these protection concerns and to ensure refugees have access to basic services, several initiatives have been launched by different sectors throughout 2017 in Diffa. One of them is the ongoing

Government-led biometric registration process (BIMS), which began in September 2017. It will produce more accurate data on the refugee population, including on vulnerabilities, and will in turn improve needs-based targeting in 2018. BIMS will also support the issuance of identity documents to refugees.

The provision of basic services such as education, health or water and sanitation, principally depends on the humanitarian community. The absorption capacity of infrastructures and quantity of natural resources have been stretched to the limit and depleted; this was already a concern prior to the crisis. In this difficult context, the region also suffered from a Hepatitis E outbreak in 2017, with 2,000 cases reported, making matters worse.

In terms of food security and livelihoods, insecurity has caused many fertile lands along the Komadougou River and around Lake Chad to be abandoned, as have a number of pastoral routes. Furthermore, emergency measures taken by the Government as well as violent attacks and military counter-insurgency operations have also resulted in the reduction of commerce and cross-border trade. As a result, the population is facing an unprecedented level of impoverishment. It is estimated that the average income of a family of eight persons in the area ranges around 30 USD a month or 1 USD a day. In the best case scenario, security conditions will continue to improve and stabilize in 2018, which should positively affect all sectors.



## Overall Needs and Strategic Response

Nigerian refugees are hosted across 147 sites in the Diffa region where they live together with the host population, IDPs and Niger returnees. Only some 12,000 live in Sayam Forage refugee camp. After the double suicide attack in June 2017, Kabelawa IDPs left the site and 461 refugees were transferred to Sayam Forage, prompting the camp's expansion.

For the protection sector, the lack of documentation and delays in registering new born babies continues to be a key protection issue for refugees hosted in Diffa, potentially restricting their movements and increasing their risk of being arbitrarily detained.

According to a protection baseline survey carried out among refugees in Diffa<sup>1</sup>, access to food, water/ sanitation and education are among the main shortfalls in terms of assistance. This is particularly relevant in out-of-camp sites. While important investments have been made to ensure essential infrastructures are up and running in large displacement sites, refugees living in remote villages and in areas where the security situation remains unstable, are in dire need of improved infrastructures.

After five years in Niger, refugee families' access to livelihoods remains limited. Insecurity around Lake Chad and the Komadougou River, harsh climatic conditions and measures taken as part of the State of Emergency have seriously hindered their capacity to become self-reliant and continue to have a negative impact on the host population's socio-economic situation<sup>2</sup>.

In 2018, the refugee response will prioritise the following areas: First of all, RRP partners will contribute to

strengthening the protection environment through increased community-based protection interventions. Focus will be placed on women, youth, children and individuals with specific needs. However, specialized assistance for individuals with special needs will remain a challenge given the lack of funding. Ongoing pendular movements of refugees to and from Nigeria will require increased monitoring capacity and an adjusted response. The BIMS registration programme will help to provide more accurate information on the refugee population, and issue identity documents to refugees, as well as enhance assistance delivery monitoring.

Secondly, RRP partners will aim to improve access to basic services and infrastructure. Partners will continue to adopt a transitional approach, involving the authorities at the central and local levels to ensure durable infrastructures are established, including water networks, sanitation structures, transitional shelters in the largest and most stable displacement sites as well as in Sayam Forage refugee camp, while providing emergency shelters and infrastructure in smaller more unstable areas. Cash-based interventions in the region will be carried out with the provision of cash/vouchers in some areas in lieu of food and non-food items. Further investments to promote and improve the quality of education will also be considered essential. However, the quality of the delivery of these services will ultimately depend on the prevailing security situation in the region.

Thirdly, RRP partners will support refugees' self-reliance and local integration through programmes targeting the host population. Expanding the number of beneficiaries of income generation interventions will be essential towards gradually decreasing their dependency on

1. Protection Baseline Survey, Protection Working Group, May 2017

2. L'or Rouge Et La Pêche Dans Le Bassin Du Lac Tchad, Oxfam, February 2017



UNHCR / Hélène Caux

humanitarian aid and support their local integration. These interventions will be coupled with further investments in the provision of alternative energy to refugee households and access to land through the Urbanization programme, also at the benefit of host populations. RRP partners will seek the support of development actors to enable them to concentrate on emergency response allowing the former to focus on longer term stabilization projects.

The voluntary repatriation of Nigerian refugees is not foreseeable in the near future as conditions for a return in safety and dignity are not met. Notwithstanding, the protection sector foresees the spontaneous, self-organized return of some 30,000 Nigerian refugees over the course of 2018. They may travel frequently back-and

forth between Niger and their areas of origin in north-eastern Nigeria, as security conditions in their home villages are still far from being stable and access to basic services is non-existent. A protection evaluation conducted<sup>3</sup> in the first half of 2017 showed that the majority of the refugee population does not foresee a sustainable return in the short term.

3. Protection Baseline Survey, Protection Working Group, May 2017

## Coordination & Partnerships

The response to the needs of the Nigerian refugee population and other displaced persons is coordinated by the Governor of the Diffa region. Regional sectoral working groups are led by Regional Technical Directorates, and supported by humanitarian actors. An Inter-Organization Coordination Committee, co-led by UNHCR and OCHA, and directly linked to the Humanitarian Country Team (HCT), ensures the interface between humanitarian agencies and the authorities. UNHCR works closely with the Governor, the working groups and the HCT, in leading the refugee response, and ensures actions carried out in this respect are coordinated, in line with the Refugee Coordination Model (RCM).

Since September 2017, a Government-led decentralization process has increased the responsibility and autonomy of Regional Councils and Communes in particular, for four key sectors: education, health,

environment and water/sanitation. Since 2017, a sectoral working group platform has been set up in Diffa as well. Increased interaction between humanitarian agencies and local entities is therefore essential, including for the refugee response under the RCM. In parallel, refugees' inclusion in local development plans will be prioritized. It is foreseen that this will be facilitated by the *Crisis Recovery Plan* for Diffa that will be introduced by the national High Authority for the Consolidation of Peace at the beginning of 2018. CIVMIL coordination has become more efficient in 2017 with bi-monthly meetings discussing protection of civilians among other issues.

Strengthening the nexus between humanitarian and development programmes, through increased interactions between humanitarian and development actors as well as with financial development institutions such as the World Bank will also be essential for the refugee response. This complementarity will enable humanitarian actors to continue to respond to emergency situations caused by security incidents, while allowing development actors to develop more durable infrastructure and services in displacement sites.

### RRP PARTNERS

- ACF
- ADESA
- AEJTN
- CISP
- COOPI
- DIKO
- DRC
- FAO
- Handicap International
- IOM
- Kaidiya
- Luxembourg RC
- ONAT
- OXFAM
- Plan International
- Samaritan's Purse
- Save the Children
- SDO
- SFCG
- UNFPA
- UNHCR
- UNICEF
- WFP
- WHO







# Planned Response

## Protection

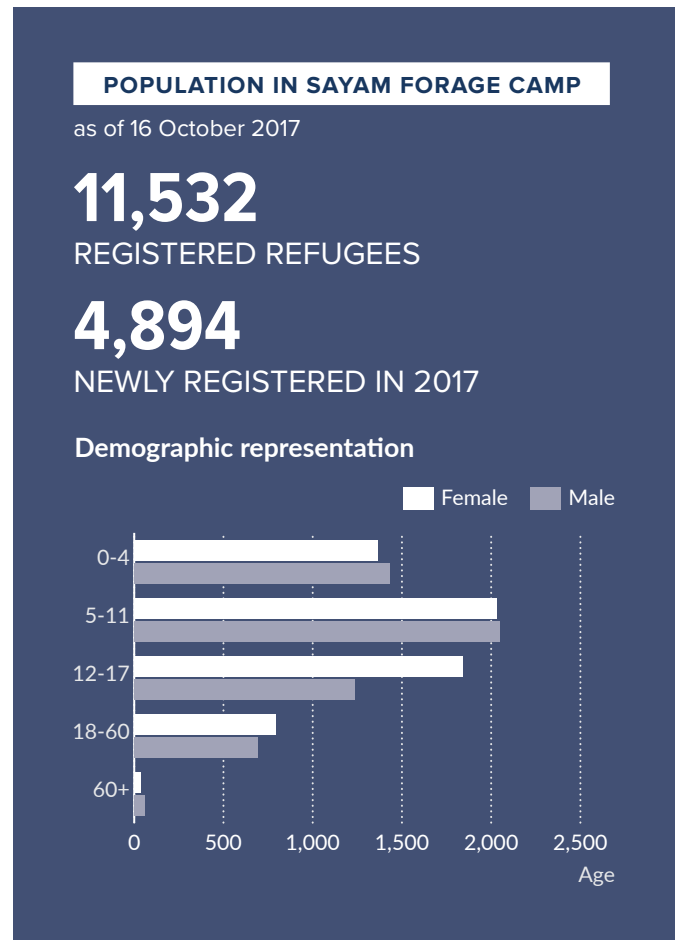
Regarding the overall protection situation in Diffa, some positive developments in terms of coordination and response were observed in 2017, which in turn will improve the impact of the humanitarian response in 2018. The number of new arrivals within the region and secondary displacements remained relatively low in 2017 compared to previous years. While 9,182 new refugee arrivals were recorded in 2017, protection monitors estimate that nearly 17,000 refugees engaged in pendular movements between Niger and Nigeria to check on living conditions in their areas of origin. It is foreseen that they will eventually start to rebuild their houses in the Damasak area, Nigeria, but regularly return to Diffa, to seek humanitarian assistance and safety.

Between January and October 2017, over 14,500 IDPs living in the area of Gueskerou, Kablewa, Bosso and N’Guigmi, decided to frequently change site, mainly out of fear of Boko Haram attacks. Meanwhile, humanitarian access to the spontaneous displacement sites significantly improved, thus allowing for better protection monitoring and assistance.

In 2017, UNHCR and RRP partners identified persons at risk of statelessness and supported the authorities in facilitating birth registration and the issuance of birth certificates for displaced and refugee children born in Niger. The ongoing Government-led biometric registration process (BIMS) for populations in Diffa will, together with other identification activities carried out by the protection sector, allow actors to identify and

address the lack of civil documentation that exposes refugees and other affected population to additional protection risks.

As regards child protection, adolescent refugees and children are particularly affected by insecurity linked to Boko Haram attacks. They do not have access to education, because of the limited school facilities in local villages and sites, and are at risk of forced recruitment by the insurgents; girls risk sexual assault when





UNHCR / Louise Donovan

travelling long distances in search of water or firewood. And last but not least, boys and girls risk being kidnapped by Boko Haram elements, to be used as fighters or servants. Therefore, involving youth in decisions that directly affect them and their future will constitute a key task for 2018. The 2017 mapping of youth activities in the region will help partners formulate a strategy and targeted advocacy messages to reach out to this group in order to reduce the many protection risks they are exposed to.

The 2017 response to sexual and gender-based violence (SGBV) showed encouraging progress. Some 327 survivors (316 women and 11 men) were assisted by protection partners and 2,383 (1,473 men and 910 women) were trained on SGBV prevention and response. SGBV standard operating procedures and referral systems were validated by the sub-working

group and practical exercises conducted to assess the extent of their application in N'Guigmi, Goudoumaria, and Diffa. Several community-based committees working on preventing SGBV are functional in Sayam Forage camp and in some spontaneous sites. Their members were trained throughout the year. In total, nearly 42,000 persons were reached through sensitization activities on the prevention of SGBV. It is noteworthy that girls and women continue to face forced marriage, despite the various sensitization activities conducted in the region. In fact, Niger itself has one of the highest rates of child marriage in the continent.

Meanwhile, providing specific assistance for individuals living with disabilities remains challenging, due to a lack of partners working in this domain. A detailed assessment on their needs has already been conducted. In 2018, renewed efforts will be put into strengthening

the protection environment for the forcibly displaced, including refugees, by improving the analysis regarding persons with specific needs and their access to services. Once the BIMS exercise is completed, it will also result in more accurate data on the refugee population, including on vulnerabilities, and allow improved needs-based targeting in 2018. Through the BIMS, refugees above 14 years of age are issued an individual refugee identity card while all heads of household are issued a family refugee certificate.

In 2018, RRP partners plan to provide adapted assistance, including psychosocial interventions and access to tailored care to refugees with specific needs. Child protection will be strengthened and psychosocial support and recreational activities will be provided through child-friendly spaces. With regard to unaccompanied and separated children, RRP partners

will continue family tracing and reunification activities, and enhance best interest determination (BID) processes and alternative care arrangements.

In Diffa, only 11 per cent of Nigerian refugees live in Sayam Forage refugee camp, while all others are settled in out-of-camp settings. Therefore, activities related to strengthening community-based protection through training and the sensitization on risk mitigation and respective referral pathways will also be prioritized.

Arbitrary detention and lack of access to legal services still range high among the major protection risks. Protection actors will therefore continue to advocate with the authorities to ensure that the fundamental requirements of due process are observed in detentions cases and will provide legal assistance for refugees.

**OBJECTIVE 1:**  
**Improve or maintain the quality of registration and profiling**

108,000 refugees registered and issued with documentation

**OBJECTIVE 2:**  
**Improve child protection including prevention and response**

20,000 refugee children benefited from socio-recreational activities in child-friendly spaces

481 UASC placed in alternative care arrangements and/or who benefited from individual follow up

**OBJECTIVE 3:**  
**Contribute to a more protective environment**

1,200 people (staff, communities, authorities) trained on protection

150 military and police elements trained on protection-related topics

50,000 people reached through protection-related sensitization activities

1,800 refugees referred to protection services

6 analyses conducted on durable solutions

**OBJECTIVE 4:**  
**Improve the prevention of and response to sexual and gender-based violence**

500 SGBV survivors received health care (medical/mental health)

## Education

In 2017, due to prevailing insecurity, many schools remained inaccessible in Diffa. The gross primary enrollment rate reached 46.2 per cent, compared to the national average of 68.6 per cent in 2012. However, after more than five years spent in Diffa, access to education for Nigerian refugee children has improved consistently thanks to significant efforts made towards building infrastructure, enrolling new arrivals and improving the quality of education as well as raising awareness on the importance of going to school.

For instance, since 2015, the number of primary school facilities in displacement areas increased more than fourfold to 261, decongesting schools by 36 per cent. Furthermore, female student enrollment increased from 47 per cent to 51 per cent.

In light of this, by the end of the 2016/2017 school year, more than 11,000 refugee children were enrolled in school with 10,179 refugees (including 5,240 girls) enrolled in primary school and 1,453 refugees (530 girls) enrolled in non-formal education programmes, including Bridging Classes, Alternative Education Classes as well as Distance Education Programmes for secondary education.

Despite increases in access to education, an alarming 85 per cent of refugee children in Diffa remain out of school. Among the main challenges, aside from parents' lack of understanding of the importance of formal education, are the difficult security conditions in certain parts of the region, discouraging children from attending





school, as they fear Boko Haram attacks. In addition, the qualifications of teachers are sub-standard. Indeed, the Government carried out a competency test which raised noteworthy concern as only 16 per cent of teachers passed the exam.

Improving the quality of education is therefore among the priorities of Niger authorities and the humanitarian community in 2018. In September 2017, significant efforts had been made to select qualified teachers and train them for the 2017/2018 school year. Additional psychosocial and pedagogic training will be provided in 2018.

Teachers will work with community leaders in villages where attendance rates are low to encourage students to show up for school in a sustained manner. Several successful initiatives, which started in 2017, will be pursued and/or expanded depending on available resources. Additional Alternative Education Classes, including training in practical skills, as well as basic literacy training, will be proposed in the region to enroll additional children who cannot follow the regular curriculum of Niger. For children living in remote and/or unstable areas, literacy trainers recruited within the community will offer classes in the villages.

Nigerian refugee children who want to continue with the Nigerian curriculum in English will be able to attend Distance Learning Programmes in one of the five Distance Education Centers where 650 refugees are currently enrolled. Three centres have been operational since 2015, while a fourth centre in Bosso initially closed due to insecurity, has been reopened, and a fifth has been established to cater to the needs of refugees in Sayam Forage camp. Currently, only 33 out of 261 schools in displacement sites have a canteen. An additional 45 canteens need to be established to improve nutritional levels and to boost attendance.

**OBJECTIVE 1:**

**Ensure access to formal and non-formal education for refugee children affected by the crisis**

- 14,063 boys and girls learning in protected learning spaces
- 650 girls and boys learning in Distance Education Centres

**OBJECTIVE 2:**

**Provide high quality formal and non-formal education to children affected by the crisis**

- 14,063 of boys and girls affected by the crisis learning in a classroom where the teacher has received psychosocial training
- 7,032 boys and girls received a meal or snack at least 80% of the school days



## Food security & Livelihoods

The mid-term results of the 2017-2018 agro-pastoral campaign indicated that agricultural production rates are encouraging, with 77 per cent of villages experiencing adequate harvests. There are, however, 71 villages with a total population of 54,000 people in the Bosso and Toumour areas bordering Nigeria, who have been unable to sow due to insecurity, and are therefore finding themselves at high risk of food insecurity. In addition, 230 villages in Diffa could face poor agricultural production in 2018 due to insecurity and lack of rains, bringing the number of people at risk up to 162,000.

The main reason for food insecurity in Diffa are the frequent attacks and incursions carried out by BH, especially in areas bordering Nigeria, where populations have had to endure agricultural losses. Moreover, extended measures such as restrictions on movement and the closure of several markets (enforced under the State of Emergency first declared in February 2015) have impeded economic growth and stability in the area<sup>4</sup>. All these elements have left host communities and refugees without a regular revenue, in a region where prices remain high. It is therefore particularly important to monitor food and nutrient availability in the markets, on a regular basis.

Within this context, the impact of livelihood interventions and potential for increased economic self-reliance for refugees remains limited<sup>5</sup>, as these programmes can only be conducted in more stable areas. Moreover, the impact of cash-based interventions needs to be continuously monitored in this context, to anticipate inflation for example.

4. L'or Rouge Et La Pêche Dans Le Bassin Du Lac Tchad, Oxfam, February 2017

5. WFP mVAM Niger Bulletin#11: May 2017

6. Result of the Evaluation de la faisabilité du transfert monétaire conjoint en situation d'urgence, January 2017

### OBJECTIVE 1:

**Provide food and/or cash assistance to save lives and protect livelihoods**

70,485 refugees received unconditional or conditional food or cash assistance

### OBJECTIVE 2:

**Strengthen the capacity of households to respond to and withstand shocks in areas affected by the crisis**

500 refugee households received agricultural/livestock support in kind or in cash

11,000 refugees in the camp had access to gas

In light of this, and in line with interventions in other sectors, food security and livelihoods programmes will continue using a two-fold approach: on the one hand, distributing unconditional food assistance, targeting the most vulnerable and on the other hand, strengthening self-reliance in the region, through distributions of seeds and tools while providing conditional food assistance, in the more stable areas (e.g. in *Chétimari* and *Mainé Soroa*). Unconditional food assistance for the most vulnerable refugee households in need will be carried out as in-kind distribution such as in Sayam Forage camp, or through cash-based interventions in areas where markets are accessible, functional and adapted to this modality<sup>6</sup>.

As regards livelihood activities, food-for-work and cash interventions will be stepped up in 2018 to provide an income to refugees if they engage in land restoration programmes aimed to protect the ecosystem such as sand dune stabilization. The conditional cash programme for the construction of houses, in line with

the ongoing urbanization project, will also be expanded. To complement food distribution and to strengthen families' autonomy, agro-pastoral activities will continue to be supported through capacity building and the provision of seeds and tools.

Over-reliance on wood, mainly for cooking purposes, has severely degraded woodland areas and increased tension between refugees and host populations. In order to promote the use of alternative energy, a gas provision programme was initiated in 2015. In total 5,000 refugee households in Sayam Forage camp and 20,000 other

vulnerable households in the region received gas cylinders. With the involvement of a local private company that has taken over the supply and provision of gas, the programme is now autonomous and requires little intervention from the humanitarian community. In 2018, the latest refugee arrivals in Sayam Forage camp who have yet to receive gas (more than 300 households) will be provided with gas cylinders.



UNHCR / Alan Mouton

## Health & Nutrition

Health care in Diffa is provided by 53 government-run integrated health centres (*Centres de Santé Intégrés/CSIs*) and one health centre in Sayam Forage refugee camp, which provides free primary and secondary health care to the displaced. Refugees have access to health facilities along with the rest of the population. Despite support provided by humanitarian agencies in the form of equipment, medicine, rehabilitation and funds for paying personnel, these structures remain understaffed and under-equipped. Frequent medicine shortages, in particular for adults, and difficulties in recruiting qualified staff to be deployed in the area are among the main challenges faced. Moreover, security incidents in the area have forced many structures to temporarily close. Out of the 53 CSIs, four are currently closed and four have been relocated to safer areas. In addition, many infrastructures were built with semi-durable materials at the onset of the emergency and need to be refurbished. While mobile clinics have been set up in some of the remote areas, security constraints, lack of staffing and financial resources limit their impact.

In 2018, health care coverage will be expanded for refugees by financing health staff for the CSIs, and by providing equipment and medicine. Mobile clinics will continue to play an essential role in remote areas and additional resources will be necessary to expand their coverage.

In 2017, a Hepatitis E epidemic broke out in Diffa, with some 2,000 cases reported to date. Although the number of new cases has gradually decreased throughout the year, prevention activities will remain essential in 2018, in order to put an end to this epidemic, while at the same time reducing risks of other outbreaks such as cholera, measles and meningitis. In this respect, additional sanitary kits will be pre-positioned in CSIs,

### OBJECTIVE 1:

**Improve access to and the quality of health services in the region**

33,000 consultations carried out for refugees by mobile clinics

### OBJECTIVE 2:

**Prevent epidemics from spreading**

> 95% of refugee children under 5 years old vaccinated against measles

### OBJECTIVE 3:

**Ensure equitable access to quality nutritional support for children suffering from acute malnutrition**

1,100 new SAM refugee admissions

22,800 new MAM refugee admissions

awareness-raising activities will be organized and water/sanitation interventions carried out to prevent further contamination.

In the absence of recent data on the prevalence of malnutrition in the Diffa region, the current analysis is based on data from the specific, measurable, attainable, realistic and timely (SMART) rapid nutrition survey carried out in September 2016. A more recent SMART nutritional survey was conducted in October 2017. Once results are available, a review of the situation will be done. The 2016 survey revealed a global acute malnutrition (GAM) prevalence of 13.6 per cent with a 2.4 per cent prevalence of severe malnutrition (SAM), reflecting an alarming nutritional situation. The major cause of malnutrition in the Diffa region is conflict related, exacerbated by frequent population movements, chronic food insecurity linked to the loss of production assets, dwindling sources of income, limited



access to health care due to the closure of health centers, a lack of sanitation and an inadequate amount of safe drinking water.

In order to fight malnutrition, partners will also continue to invest in capacity building for health staff in CSIs and mobile clinics, for which coordination has to be strengthened. Emergency school feeding which already takes place in the largest schools in Diffa will be extended to additional sites to improve child nutrition and boost school attendance.

In 2018, an estimated 96,000 people in the Diffa region, including children and pregnant women, will be in need

of nutritional support. This total includes 15,635 children aged 0 to 59 months with SAM, out of which 1,838 children suffer from medical complications. Furthermore, over 45,000 children aged 6 to 59 months are estimated to suffer from moderate acute malnutrition (MAM) and will need nutritional supplementation. In addition, over 13,000 malnourished pregnant and breastfeeding women, as well as over 19,000 children aged 6 to 23 months will also require nutritional support.

Last but not least, over 2,000 careproviders will also need food to be provided to them in the severe malnutrition treatment centres (CRENI), where their dependents will be receiving treatment.



UNHCR / Hélène Caux

## Shelter & NFIs

Since the first groups of refugees arrived in Niger, RRP partners have been providing emergency shelters. A recent evaluation revealed that at least 46 per cent of the displaced population in Diffa need their shelter to be replaced<sup>7</sup>. This population, which includes refugees, lives in dwellings that were damaged by the prevailing harsh climatic conditions, such as frequent sandstorms and floods.

The need for NFIs also remains particularly high. It is estimated that at least 46 per cent of the displaced households, including refugees, in the region urgently need new items, including blankets, sleeping mats, mosquito nets etc. Most of the NFIs distributed in previous years are worn out or have been sold off by families in need of cash. In addition to affecting their wellbeing, the lack of proper equipment also constitutes a health hazard for the refugee population.

Taking into account these urgent needs as well as the relative stabilization of the situation in 2017, partners aim to strengthen the durability of the shelter and NFI intervention in 2018 by promoting self-reliance.

Similarly to the WASH strategy, efforts will be made to ensure a transition from emergency to more durable shelters, in the stabilized areas. Since 2015, over 200 refugee families have been provided with semi-durable shelters. In 2018, some 25 per cent of refugee households and their hosts, those in displacement sites and in Sayam Forage camp, will have their shelter replaced with transitional shelters made of locally-sourced materials. Communities will be fully involved and trained in the installation and upgrading of these structures to strengthen their self-reliance.

### OBJECTIVE 1:

#### Ensure refugees have access to non-food items (NFIs)

7,000 refugee households affected by conflict benefited from NFI assistance

### OBJECTIVE 2:

#### Ensure all refugee households live in adequate dwellings

7,000 refugee households affected by conflict benefited from emergency shelter assistance

3,000 refugee households provided with transitional/permanent shelters

In the largest municipalities selected by the authorities, the Urbanization programme launched in 2014 to support legal access to land for refugees and returning Niger nationals will be extended. By the end of 2018, the number of refugee households benefiting from the project will increase from 925 currently, to 1,675. The second phase of the project which has been launched in late 2017 also envisages the construction of 4,000 durable shelters over a 3-years period.

In 2018, agencies aim to gradually introduce cash and vouchers to replace NFI distributions in the most stable areas. These new interventions already piloted in 2017 are foreseen to boost refugees' autonomy, avoid the trade of NFIs and support the local economy.

In parallel, emergency shelters and NFIs will continue to be provided to newly arriving refugees. To ensure the humanitarian community is able to respond quickly, shelter and NFI contingency stocks will be maintained in areas with a high displacement potential.

7. Evaluation Initiale Abris et Biens Non Alimentaires à Diffa, REACH June 2017



Access to water and sanitation ranges among the main needs of refugees in Diffa<sup>8</sup>. Although the provision of water and sanitation in Sayam Forage camp is in line with international standards, providing access to latrines, showers and potable water in out-of-camp sites remains a challenge. Relevant indicators revealed an average water access rate of 57 per cent and a latrine access rate of 40 per cent.

The lack of water particularly affects households located in remote areas, away from the available water networks as well as those affected by frequent security incidents. However, investment in the construction and extension of water infrastructure in Diffa has over the past year greatly improved the overall water coverage rate.

Despite this progress, infrastructure construction and security challenges remain. The various displacement movements within Diffa have resulted in the abandonment of several sites where water and sanitation infrastructure had recently been built. In 2018, partners will continue to support the Government in the rehabilitation and construction of infrastructure, while maintaining emergency capacity to respond to new arrivals in remote areas, including through water trucking for the first three months.

Access to proper sanitation facilities and equipment is another challenge, as an estimated 40 per cent of the population in Diffa do not have access to appropriate latrines and showers (emergency standards require 20 people per drop-hole latrine and 50 persons per communal shower head).

**OBJECTIVE 1:**

**Ensure all refugees have access to adequate levels of potable water**

20 litres of potable water available per refugee per day in the refugee camp

38,770 of out-of-camp refugees with access to a minimum of 15 L per day of potable water

**OBJECTIVE 2:**

**Ensure access to adequate sanitation and hygiene facilities for refugees**

200 communal sanitary facilities/latrines constructed/rehabilitated in the camp

38,770 out of camp refugees had access to temporary sanitation facilities

In 2018, one of the main priorities will be the construction of durable family latrines to replace deteriorated emergency latrines, particularly in the more stable areas. This will be conducted in line with the Community-Led Total Sanitation (CLTS) approach, to improve the community’s involvement in needs assessments and planning of the response. Areas targeted by the Urbanization programme will also benefit from this infrastructure. In parallel, emergency sanitation support (through the provision of emergency latrines) will be provided to populations living in unstable areas as well as to populations affected by flooding. In 2018, the School-Led Total Sanitation (SLTS) approach will be extended to schools through the replacement of latrines and increased efforts to sensitize children on sanitation and hygiene.

With the Hepatitis E epidemic in Diffa and the continuous risk of a cholera outbreak sensitization sessions on the safe water chain (safe collection, transport and storage of water), household water treatment and hand-washing sensitization will continue to be conducted by hygiene committees established within the community.

<sup>8</sup> Protection Baseline Survey, Protection Working Group, May 2017

# Financial Requirements

## By Organization & Sector

ORGANIZATION	PROTECTION	EDUCATION	FOOD SECURITY & LIVELIHOODS	HEALTH & NUTRITION	SHELTER & NFIS	WASH	TOTAL
ACF			390,000				390,000
ADESA	112,852						112,852
AEJTN	65,551						65,551
CISP	84,423						84,423
COOPI				60,000			60,000
DIKO	95,295						95,295
DRC	209,998				766,118		976,116
FAO			2,360,290				2,360,290
Handicap International	376,804						376,804
IOM					696,381		696,381
Kaidiya	104,676						104,676
Luxembourg RC					2,004,000		2,004,000
ONAT	35,205						35,205
OXFAM	275,000						275,000
Plan International	255,038	1,833,836					2,088,874
Samaritan's Purse			2,485,703				2,485,703
Save the Children			176,262	741,582			917,844
SDO	144,654						144,654
SFCG	174,373						174,373
UNFPA	1,190,000			1,850,000			3,040,000
UNHCR	8,818,520	419,413	9,009,599	3,159,577	6,711,628	4,128,169	32,246,906
UNICEF	294,950	910,060		563,602	557,550	515,240	2,841,402
WFP			16,675,038	743,373			17,418,411
WHO				482,471			482,471
<b>TOTAL</b>	<b>12,237,339</b>	<b>3,163,309</b>	<b>31,096,892</b>	<b>7,600,605</b>	<b>10,735,677</b>	<b>4,643,409</b>	<b>69,477,231</b>





ANNEX

# Regional Protection Dialogue on the Lake Chad Basin Abuja Action Statement

We, the Governments of Nigeria, Cameroon, Chad and Niger, with the support of technical and financial partners gathered in Abuja, Nigeria, on 6 to 8 June 2016 within the framework of the Regional Protection Dialogue on the Lake Chad Basin, hosted by the Federal Government of Nigeria, with the technical facilitation of the United Nations High Commissioner for Refugees (UNHCR) to discuss the most urgent protection risks in the Lake Chad Basin resulting from the conflict-induced crisis;

**Agree** on comprehensive actions to enhance protection and respond to the most urgent needs of refugees, internally displaced persons (IDPs) and other affected populations;

**Note** that the Boko Haram insurgency and its spill over into neighbouring Cameroon, Chad and Niger have caused the displacement of over 2.7 million people in the region, of whom 2.1 million are internally displaced in Nigeria, while some 155,000 Nigerian refugees have sought asylum in Cameroon, Chad and Niger. The refugee-hosting countries also have sizeable IDP populations (Cameroon: 200,000; Chad: 110,000; and Niger: 127,208);

**Reaffirm** the validity of the principles and standards of the 1951 Convention relating to the Status of Refugees and its 1967 Protocol as well as the 1969 Convention Governing the Specific Aspects of Refugee Problems in Africa (“OAU Refugee Convention”), in particular the principle of non-refoulement; the 2009 African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (“Kampala Convention”), especially the prohibition of forced displacement and the 1954 Convention relating to the Status of Stateless Persons and the 1961 Convention on the Reduction of Statelessness (“1954 and 1961 Conventions on Statelessness”);

**Recognize** that while military operations have led to significant advances in the fight against Boko Haram and have brought back a number of areas in north-eastern Nigeria under Government control, conditions in much of the north-east are not yet conducive for the return of Nigerian refugees and IDPs, due to continuing insecurity and the absence of basic services which pose acute humanitarian and protection risks for the affected populations, particularly in Borno state;

**Further note** that alongside persistent threats from Boko Haram, the presence of mines and unexploded improvised devices, climatic change as well as the drying up of Lake Chad, which exacerbate pre-existing vulnerabilities, further poses protection risks for the affected populations in the border regions of Cameroon, Chad and Niger, where Boko Haram attacks on civilians also continue or have intensified in some instances;

**Recognize** the legitimate national security concerns of the States and the need to ensure an appropriate balance between security and human rights, the obligation to protect IDPs and refugees, and the right to seek and enjoy asylum;

**Stress** the importance of maintaining the civilian and humanitarian character of refugee and IDP-hosting areas as an important protection standard with broad implications on other protection issues such as physical security, the prevention of sexual and gender-based violence (SGBV), prevention of child recruitment as well as access to assistance;

**Note** that the crisis has seriously impacted the most vulnerable civilians, including refugees, IDPs and host communities, particularly women and children at risk, older persons and persons with disabilities or serious medical conditions; that violence against women and children, including SGBV, is widespread, that many persons have suffered the trauma of violent experiences and that there is a significant rise in the number of child and female-headed households;

**Welcome** the progress made in the region in identifying, preventing and reducing statelessness, including the signing of the 2015 Abidjan Declaration of Ministers of ECOWAS Member States on Eradication of Statelessness by Nigeria and Niger, while recognizing that there are still important challenges, in particular the high number of persons in the region who lack documentation and have difficulties proving their nationality and therefore remain at risk of statelessness.

#### **In view of the foregoing:**

##### **In the area of forced displacement and freedom of movement in conflict, we agree to:**

1. Take concrete steps, including continuous monitoring, to ensure that security measures such as restrictions on freedom of movement in the context of state of emergency and evacuations comply with international standards, and are temporary and exceptional in nature.
2. Strengthen collaboration between government actors, humanitarian organisations, and other relevant stakeholders to ensure the voluntariness of return and the freedom of movement of displaced persons as well as their physical security.
3. Develop and implement practical measures to ensure an appropriate balance between security and respect for the right to seek and enjoy asylum, including respect for the principle of non-refoulement, protection of IDPs and related human rights.
4. Promote knowledge and training among all stakeholders, including government actors, such as security forces, international organizations and civil society, of the limits and safeguards of refugee and IDP protection, as outlined in international and regional legal instruments such as the 1951 Refugee Convention, the 1969 OAU Convention, and the Kampala Convention.
5. Enhance regional coordination and exchange of best practices through greater engagement by States and humanitarian actors with regional institutions such as the Multinational Joint Task Force (MNJTF), the Lake Chad Basin Commission, the Economic Community of West African States (ECOWAS), and Economic Community of Central African States (ECCAS).



6. Commit to prioritize the ratification, domestication and implementation of international conventions, including the Kampala Convention.

**In the area of civil-military coordination and the civilian character of refugee and IDP hosting areas, we agree to:**

7. Develop a capacity building program (training) for security forces and the MNJTF on key international humanitarian standards, international protection and human rights, civilian and humanitarian character of refugee and IDP sites, and sensitize humanitarian and military actors on civil-military coordination to protect and promote humanitarian principles.
8. Enhance civil-military coordination to ensure an appropriate distinction between the roles of humanitarian actors and security forces as well as to enable humanitarian actors to reach people in need of assistance in difficult to reach areas.
9. Enhance screening and other security measures to maintain the civilian and humanitarian character of refugee and IDP sites, ensuring that these are conducted in a dignified manner and are gender and age-sensitive. Encourage at the same time greater information-sharing, while ensuring the protection of informants, IDPs, refugees, humanitarian actors, etc.
10. Strengthen access to justice, support the development of legal frameworks, provide legal assistance and encourage communities to use traditional conflict resolution mechanisms, where applicable and provided these are not in violation of national law.

**In the area of persons with specific protection risks, we agree to:**

11. Strengthen the identification of persons with specific needs, such as women and children at risk, through multi-sectoral needs assessments, improved registration and profiling, while ensuring data protection.
12. Improve multi-sectoral referral and response mechanisms in order to ensure better access to basic services.
13. Pay particular attention to the needs of children at risk, including unaccompanied and separated children and children at risk of exposure to SGBV, child recruitment, forced marriage, exploitation and abuse; and ensure referral to appropriate services, such as psychosocial support and post-traumatic services.
14. Ensure an increased involvement of local communities and community-based organizations in the provision of support and services to most vulnerable groups, including older persons, the chronically ill, persons with disabilities and youth, through improved protection coordination and a greater involvement of the affected populations.
15. Commit to promulgate national legislation aimed at protecting and increasing the involvement and engagement of affected populations through advocacy and awareness campaigns.

**In the area of comprehensive solutions approach, we agree to:**

16. Support the processes aimed at achieving all durable solutions [local integration, voluntary return, and relocation for IDPs and resettlement to a third country for refugees], including by enhancing access to basic services, livelihood opportunities, and financial services; promoting peaceful co-existence among refugee, IDP and host communities; and encouraging environmentally friendly measures.

17. Ensure that refugee and IDP returns are voluntary, in safety and dignity, and based on well-informed decisions, once conditions are conducive, and that facilitated returns of refugees are within the framework of a tripartite agreement, and respect the principle of non-refoulement.
18. Establish the nexus between humanitarian response and development to support durable solutions such as local integration and reintegration, through joint and coordinated planning between humanitarian and development actors to ensure the inclusion of refugees, IDPs and returnees in development planning.
19. Guarantee the centrality of protection by ensuring the participation of affected persons in the planning and implementation of solutions, taking into account age, gender and diversity, and paying particular attention to persons with specific needs.

**In the area of right to nationality and documentation, we agree to:**

20. Conduct awareness campaigns on the importance of civil registration and relevant procedures, through the use of local media and the involvement of traditional and religious leaders.
21. Simplify birth registration and civil documentation procedures; organize and equip mobile registration centers and create more registration centers especially in remote areas; integrate birth registration in other sectors, such as education and health; and reduce the cost of birth registration and documentation.
22. Ensure national laws and policies comply with existing relevant international and regional standards, for example as defined in the 1954 and 1961 Conventions on Statelessness, the African Charter on the Rights and Welfare of the Child, and to support the adoption of a Protocol to the African Charter on Human and Peoples' Rights on the right to nationality and eradication of statelessness.
23. Create a forum for consultation and sharing of best practices between States on issues of civil documentation and the risk of statelessness in the Lake Chad Basin.

**Follow-up mechanism**

To ensure follow-up of the above outlined actions, we further agree to:

24. Establish a plan of action at national level within 6 months of the adoption of the Action Statement, and review progress in implementation at national level at regular periods of no more than 6 months, and at regional level after 12 months.

Done in Abuja, Nigeria, on 8 June 2016

## List of acronyms

<b>ABIOGET</b>	Actions pour la Biodiversité et Gestion des Terroirs	<b>IMC</b>	International Medical Corps
<b>ACF</b>	Action Contre la Faim	<b>INTEROS</b>	INTEROS Organizzazione Umanitaria
<b>ADES</b>	Association pour le Développement Economique et Social	<b>IOM</b>	International Organization for Migration
<b>ADESA</b>	Action pour le Développement du Sahel	<b>IRC</b>	International Rescue Committee
<b>ADRA</b>	Adventist Development and Relief Agency	<b>ITFC</b>	Inpatient Therapeutic Feeding Centre
<b>AJEJTN</b>	Association des Enfants et Jeunes Travailleurs du Niger	<b>IUCN</b>	International Union for Conservation of Nature
<b>AGDM</b>	Age, Gender and Diversity Mainstreaming	<b>IYCF</b>	Infant and Young Child Feeding
<b>AHA</b>	African Humanitarian Action	<b>Luxembourg RC</b>	Luxembourg Red Cross
<b>ALDEPA</b>	Action Locale pour un Développement Participatif et Autogéré	<b>LWF</b>	Lutheran World Federation
<b>ALVF</b>	Association de Lutte contre les Violences faites aux Femmes	<b>MAM</b>	Moderate Acute Malnutrition
<b>ART</b>	Anti-Retroviral Therapy	<b>MHPSS</b>	Mental Health and Psychosocial Support
<b>ASOL</b>	Afrique Solidarité Suisse	<b>MNJTF</b>	Multi-National Joint Task Force
<b>BID</b>	Best Interest Determination	<b>MUAC</b>	Mid-upper arm circumference
<b>BSFP</b>	Blanket Supplementary Feeding Programme	<b>NFI</b>	Non-food item
<b>CAPROD</b>	Centre d'Appui à l'Auto Promotion pour le Développement Durable	<b>NRC</b>	Norwegian Refugee Council
<b>CBI</b>	Cash-Based Intervention	<b>ONAT</b>	Organisation pour la Nature
<b>CFS</b>	Child Friendly Space	<b>OTP</b>	Outpatient Therapeutic Feeding Programme
<b>CISP</b>	Comitato Internazionale per lo Sviluppo dei Popoli	<b>PDM</b>	Post Distribution Monitoring
<b>CLIRA</b>	Children's Life in Rural Area	<b>PWSN</b>	Persons with specific needs
<b>CNARR</b>	Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés	<b>RCM</b>	Refugee Coordination Model
<b>COOPI</b>	Cooperazione Internazionale	<b>RRC</b>	Regional Refugee Coordinator
<b>COPRESSA</b>	Centre Optionnel pour la Promotion et la Régénération Economique et Sociale Secteur Afrique	<b>SAM</b>	Severe acute malnutrition
<b>CRENI</b>	Centre de récupération nutritionnelle intensive	<b>SDO</b>	Secours Des Oubliés
<b>CSI</b>	Centre de santé intégré	<b>SENS</b>	Standardised Expanded Nutrition Survey
<b>DIKO</b>	ONG DIKO: Association pour le Secours aux Populations Vulnérables	<b>SFCG</b>	Search for Common Ground
<b>DRC</b>	Danish Refugee Council	<b>SGBV</b>	Sexual and gender-based violence
<b>EFSA</b>	Emergency Food Security Assessment	<b>SMART</b>	Standardized Monitoring and Assessment of Relief and Transitions
<b>FADEC</b>	Femme Action et Développement en zone Cemac	<b>UAM</b>	Unaccompanied Minor
<b>FAO</b>	Food and Agriculture Organisation	<b>UASC</b>	Unaccompanied and Separated Child
<b>FBM</b>	Food Basket Monitoring	<b>UNDAF</b>	United Nations Development Assistance Framework
<b>GAM</b>	Global Acute Malnutrition	<b>UNDP</b>	United Nations Development Programme
<b>HCT</b>	Humanitarian Country Team	<b>UNFPA</b>	United Nations Population Fund
<b>IDP</b>	Internally Displaced Person	<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>IEDA</b>	International Emergency and Development Aid	<b>UNICEF</b>	United Nations Children's Fund
<b>IGA</b>	Income Generating Activity	<b>WASH</b>	Water, Sanitation and Hygiene
		<b>WESDE</b>	Water Energy and Sanitation for Development
		<b>WFP</b>	World Food Programme
		<b>WHO</b>	World Health Organisation

# Working Together



**Thank you to donors who contributed to the 2017 Nigeria Refugee Response Plan, including:**

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