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COVID-19 SITUATION ANALYSIS

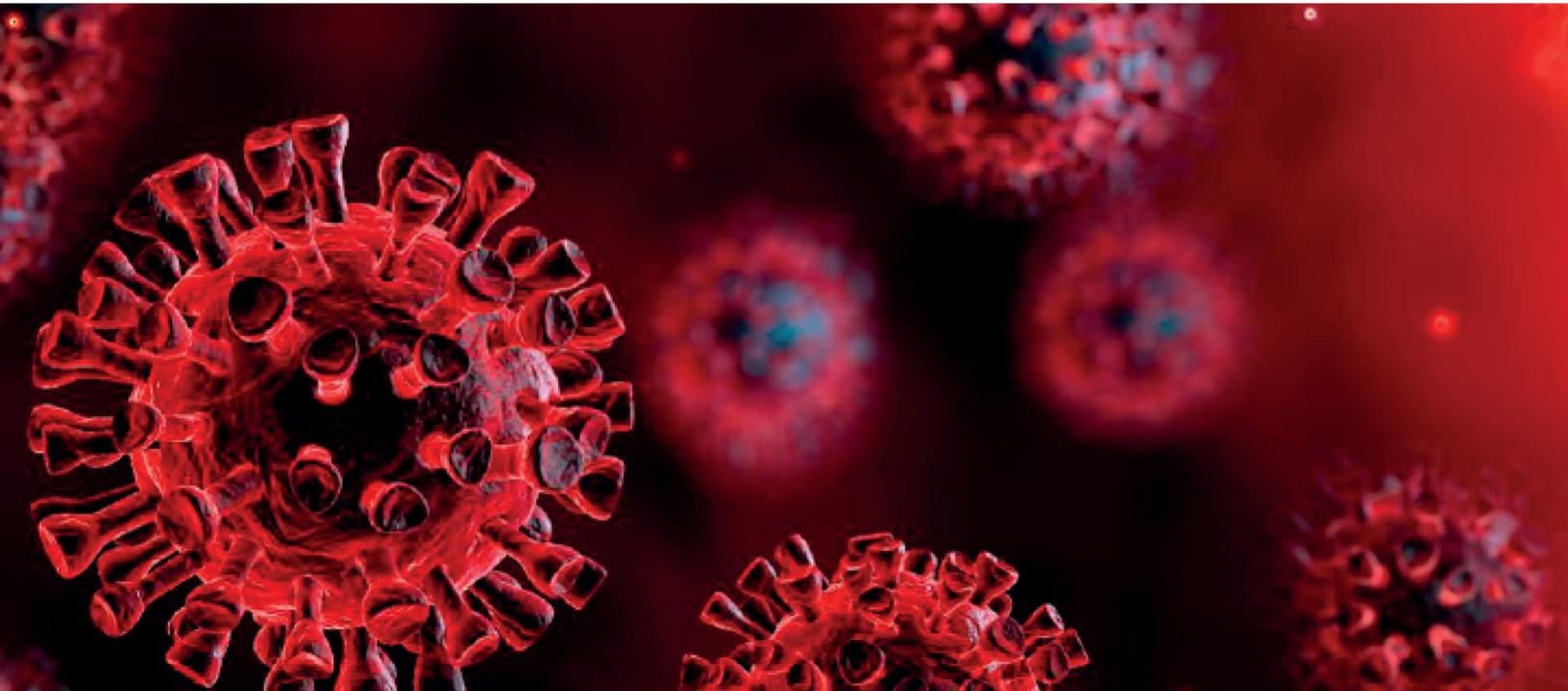
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FEB 2020 - JULY 2021

SECTORIAL ANALYSIS ANNUAL REVIEW

PROTECTION AND EDUCATION



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The outbreak of disease caused by the virus known as Severe Acute Respiratory Syndrome (SARS-CoV-2) or COVID-19 started in China in December 2019. The virus quickly spread across the world, with the WHO Director-General declaring it as a pandemic on March 11th, 2020.

The virus's impact has been felt most acutely by countries facing humanitarian crises due to conflict and natural disasters. As humanitarian access to vulnerable communities has been restricted to basic movements only, monitoring and assessments have been interrupted.

To overcome these constraints and provide the wider humanitarian community with timely and comprehensive information on the spread of the COVID-19 pandemic, IMMAP initiated the [COVID-19 Situational Analysis project](#) with the support of the USAID Bureau of Humanitarian Assistance (USAID BHA), aiming to provide timely solutions to the growing global needs for assessment and analysis among humanitarian stakeholders.

Disclaimer

"This report is the result of a secondary data review exercise that cross-analyzes a number of cited information sources, including the media. The views expressed herein do not necessarily reflect the views of USAID, the United States Government, the humanitarian clusters for Nigeria or any one of their individual sources."

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1. Executive Summary

Figure 1. COVID-19 Overview in Nigeria July 2021

Confirmed Cases	COVID Related Deaths	Tests Conducted
		
171K Total confirmed cases	2.1K Total death recorded	2.4M Test samples collected
3.6K New confirmed cases in July 2021	13 New COVID related deaths in July 2021	145K New test samples collected in July 2021
260% Increase compared to June 2021	-72.9% Increase compared to June 2021	-18% Increase compared to June 2021

LONG-TERM PROTRACTED CONFLICT IN NORTHEAST NIGERIA PRIMARILY A PROTECTION CRISIS

The conflict in Borno, Adamawa and Yobe (BAY) states is first and foremost a protection crisis. Even before the outbreak of the COVID-19, the situation was severe; characterized by forced displacement, sexual and gender-based violence (SGBV), particularly against women and girls, and including rape, deliberate attacks on civilians, abductions, destruction of property and the use of Improvised Explosive Devices (IEDs).

A high percentage of displaced women and girls were survivors of SGBV and face stigmatization when they return to their communities. Many IDPs have suffered exploitation and abuse at the hands of the security forces mandated to protect them. As the government pursues a policy of relocation to improve the situation in overcrowded IDP camps there are widespread concerns within the humanitarian community that many returns fall short of international standards on voluntariness, safety, and dignity.

At the start of 2020 children faced multiple of protection risks including the risk of sexual exploitation and abuse (SGBV), increased violence in the home, homelessness, and dependence on negative coping mechanisms (such as early marriage, child labor and begging) due to poverty. UNICEF estimated that more than 1,000 children have been abducted by Non-State Armed Groups (NSAGs)

in the northeast between 2013 and 2018, and even for those that are subsequently freed the stigma remains and reintegration into society is challenging ([UNICEF 13/04/2018](#), [UNOCHA 01/04/2020](#), [UNOCHA 31/03/2020](#)).

EDUCATION SERVICES IN NORTHEAST NIGERIA IN A POOR STATE WITH LOW ENROLMENT AND CRUMBLING INFRASTRUCTURE PRE-COVID-19

Before the pandemic, school enrolment levels in the BAY states were amongst the worst in Nigeria with 52% of children out of school and 935 schools already closed due to the conflict. Children faced many barriers to accessing education with many unable to enroll as schools were overcrowded or refusing to enroll children unable to pay for school levies or uniforms. Economic issues were cited as the main reason for families not enrolling children and included lack of money to pay fees and levies, being unable to afford uniforms or learning materials or the need for children to support the family through earning income. Cultural attitudes were also an issue, especially for girls. In addition, with large class sizes, many untrained teachers, old and dilapidated buildings and a lack of WASH facilities, the state of the education system deterred participation ([UNOCHA 01/04/2020](#), [EiEWG 06/12/2019](#)).

INITIAL LOCKDOWN MEASURES CONTRIBUTED TO A RISE IN PROTECTION RISKS

COVID-19 containment measures, and in particular lockdown and movement restrictions limited access to affected populations and limited the access of populations to essential protection services. This also led to an increase in the number of unreported incidents. Psychosocial support services and reintegration efforts for children formerly associated with armed groups counted amongst the interventions heavily curtailed by restrictions. In addition, protection actors had to rely more heavily on community-based structures and remote systems to monitor the protection situation and to adjust modalities of interventions in line with COVID-19 prevention protocols.

UNHCR recorded an increase in incidents of Gender Based Violence (GBV) between January and April 2020, linking it to limited economic opportunities and lack of access to basic needs caused by the COVID-19. Additionally, the virus containment measures, such as the lockdown, are said to have worsened the pre-existing tensions in households,

resulting in an increased rate of physical violence ([UNHCR 26/05/2020](#)).

COVID-19 CONTAINMENT MEASURES REQUIRED SCHOOL CLOSURES FOR OVER SIX MONTHS WITH LIMITED ALTERNATIVE EDUCATION IN THE BAY STATES

Although initially expected to be a short-term measure, the closure of schools affected 4.2 million students in BAY States, including around 400,000 IDP children attending some form of learning in the camps and host communities. Schools remain closed for much of 2020, and only limited reopening occurred when the measure was officially lifted in October. Efforts were made to provide learning materials designed for learning outside of school/at home, to develop radio teaching programs, provide solar radios, and develop alternative education options through applications using smartphones, tablets, or laptops, and other activities. However, issues such as poor signal reception, lack of electricity or availability of lessons in the children's own language prevented access for some. For others they were required to take part in domestic chores or income generating activities as the economic impact of the COVID-19 containment measures pushed poorer families into poverty. Studies indicated that many children did not regularly access alternative education options during the school closures ([Plan International 07/01/2021](#), [Save the Children 31/12/2020](#), UNICEF 07/04/2020).

COVID-19 RESTRICTIONS HEIGHTENED PROTECTION RISKS FOR CHILDREN AND MADE IT HARDER FOR THEM TO ACCESS PROTECTION SERVICES

With schools closed, children were more likely to get involved in child labor, including begging and hawking; taking on more domestic chores including collecting firewood and also (for girls) at risk of being forced into early marriage. Despite children facing multiple protection risks, access to already scarce child protection services became even harder. Added to the limited availability of such services was the implementation of COVID-19 movement restrictions and an increased lack of resources. Many children, including those experiencing psychological distress and not living with their households, were left without access to core child protection services.

Many child protection issues were both underreported and untreated as parents struggled to provide appropriate care

and protection to their children, made worse by the socio-economic effects of the COVID-19 pandemic. The 2021 HNO estimates that at least 1.4 million (27% in Adamawa, 55% in Borno and 18% in Yobe) of the children in need have very limited or no access to core child-protection services ([OCHA 01/03/2021](#)).

RETURNS PROCESS HAMPERED BY COVID-19 RESTRICTIONS LEAVING RETURNEES AT RISK

The Borno State Government's efforts to return IDPs to some LGAs during the pandemic led to concerns about the safety, dignity, and voluntariness of the process. While the desire by some IDPs and refugees to return to their places of origin remains a priority, concerns persist that conditions in those areas are not yet conducive for such returns, particularly in Borno State. Many of the LGAs where people are expected to return continue to be largely inaccessible to aid agencies due to the insecurity resulting from the escalating clashes. COVID-19 containment measures have also constrained the capacity of the humanitarian response, increasing prices and reducing the movement of personnel, reducing the ability of agencies to monitor the situation effectively in areas of return ([OCHA 04/02/2021](#), [OCHA 21/01/2021](#), [The Guardian 04/08/2020](#)).

MIXED AWARENESS AND COMPLIANCE WITH COVID-19 PROTOCOLS IN SCHOOLS ACROSS THE BAY STATES

After schools reopened in October, they were soon closed again for an extended Christmas break as Nigeria experienced a second wave of COVID-19 infections. However, as the case rate dropped, schools were formally directed to reopen from January 21, 2021. Schools were required to follow the [NCDC Guidelines for Safe School Reopening](#), and to support this, the government conducted training programs across all school levels in both the formal and non-formal education system. A [nationwide survey](#) was conducted in March 2021 interviewing over 10,000 respondents across the country in an attempt to understand how different education stakeholders (including parents, students and teachers) viewed whether schools were compliant with the protocols, whether there was sufficient awareness and direction provided and how best to address some of the impacts of the pandemic (such as the loss of learning time).

The study indicated that return to school was reasonably successful with the majority of schools able to implement the relevant protocols to a certain degree. In addition, school enrolment appeared to be close to pre-pandemic levels across most geographic areas and school levels although

generally private education establishments performed better than public ones. Of the BAY states, Yobe reported some of the worst statistics in terms of awareness of the protocols and with compliance. Borno and Adamawa were roughly in line with the national average in terms of awareness, but Borno performed badly in implementation of protocols such as social distancing ([NCDC 04/05/2021](#)).

LAND MINES, IEDS, AND UXOS REMAINED A MAJOR ISSUE THROUGHOUT THE PANDEMIC

The Mine Advisory Group in its 2020 report, put Nigeria as one of the top five countries in the world for landmine casualty rates with the crisis hitting a peak of one casualty every day for the first 15 weeks of 2020, despite the lockdown in place at the end of that period. The absence of a national mine action authority and the limited explosive ordnance disposal team constrained the ability to undertake mines disposal. The pandemic has also limited the capacity of the organization to deliver mine risk education as such sessions are now held in much smaller groups. Movement restrictions meant Explosive Ordnance Risk Education (EORE) operations outside the capital had to be suspended ([UNHCR 04/05/2021](#), [UN OCHA 08/03/2021](#), [Mine Advisory Group 14/12/2020](#)).

THE LONGER TERM IMPACT OF COVID-19 CONTAINMENT MEASURES ALSO CONTRIBUTED TO AN INCREASE IN PROTECTION RISKS

The longer-term impacts of COVID-19 containment measures have been economic, with an estimated 7 million people across the country now living in poverty compared to before the pandemic. As well as increasing tensions within the household, loss of income is leading many families to rely on negative coping mechanisms to survive including missing meals, selling of assets and transactional sex. The stigma of COVID-19 has brought yet another way in which individuals and households can be marginalized with communities.

For children the effects of the pandemic have been severe. Most of those affected by school closures were unable to access distance learning opportunities and have lost close to a year of schooling with its associated impact on their development. The psychosocial impact has also been significant, with children unable to access the support normally associated with attending school and many forced into begging, hawking, other forms of child labor including domestic servitude for an extended period. Girls are especially impacted and more at risk of child marriage and SGBV.

The crisis in the BAY states continues to be predominantly a protection crisis characterized by grave violations of human rights and dignity with the COVID-19 pandemic contributing to a worsening of this situation, primarily through driving a deterioration in ability in poorer family's ability to cope and impacting negatively on the ability of protection actors to provide key services ([UN OCHA 16/03/2021](#), [UN OCHA 08/03/2021](#), [UN OCHA 01/04/2020](#)).

IDP CHILDREN'S PARTICIPATION IN EDUCATION LOWER THAN PRE-PANDEMIC

Data from DTM round 37 (May 2021) shows a marked decrease in the number of IDP children estimated to be in school compared to DTM round 31 (February 2020), conducted before the onset of the pandemic. The data shows that for both camp/camp-like settings and for IDPs in host communities the number of sites where 50% or less of the children are attending school has risen across the board.

DTM results as well as data from focus group discussions (FGD) point to economic barriers being the main reason children do not enroll in school. FGD data also indicates that many children do not go to school due to hunger. From the DTM COVID-19 is cited as a reason for not attending school by 19% of camp/camp-like sites, 14% of HC sites, indicating that fear of COVID is still a major issue in the northeast. Other major reasons include lack of teachers and lack of school supplies (long standing issues for an under-resourced education system and (primarily for HC sites), the need for children to work in the fields, again indicating economic hardship ([Plan International 24/08/2021](#), [DTM 10/08/2021](#)).

In Hard-to-Reach (H2R) areas the availability of education services was low throughout the pandemic. There are almost no formal education services and few children attend the non-formal or Islamic education on offer. However, it would appear that the situation has deteriorated even further with reports from April 2021 indicating that no children were attending formal education in any of the settlements surveyed ([REACH 11/06/2021](#)).

Poverty therefore continues to be the main driver of school dropout, with the impact of COVID-19 containment measures added to the ongoing conflict having inflicted further economic hardship on families, especially IDP families in the northeast. Conflict is also impacting the ability of local authorities to deploy teachers, especially in the more remote locations and there is a lack of school supplies and materials to support education provision. Fear of catching COVID-19 remains as a concern keeping families from sending children to school ([Plan International 24/08/2021](#), [DTM 10/08/2021](#)).

2. About this Report

The BHA-funded COVID-19 support project, implemented by IMMAP and DFS in six countries (DRC, Burkina Faso, Nigeria, Bangladesh, Syria, and Colombia), has been analyzing the main concerns and unmet needs that have emerged across humanitarian sectors due to the COVID-19 pandemic since the summer of 2020.

After almost a decade of conflict, economic challenges over the past years, and high levels of vulnerabilities, untangling the specific effects of the COVID-19 pandemic on humanitarian needs from other factors at play in Nigeria has been challenging.

This report reviews the data collected between July 2020 and August 2021 and works chronologically through the main issues and evolution of humanitarian needs in the Education and Protection sectors in Northeast Nigeria as the COVID-19 pandemic progressed. This review

is accompanied by an [overview of the epidemiological situation](#), including the imposition of containment measures by authorities in response to the COVID-19 outbreak and the knowledge, attitudes, and practices of the wider population regarding the prevention of COVID-19. In addition, there is an analysis of the wider macro and microeconomic developments that have emerged since the beginning of the pandemic and the impact of these developments on the humanitarian situation in Northeast Nigeria. There are two further reports, one examining the added impact of COVID-19 on the food security, livelihoods, and nutrition sectors in the northeast, the second analyses the effects of the pandemic on the WASH and Shelter sectors.

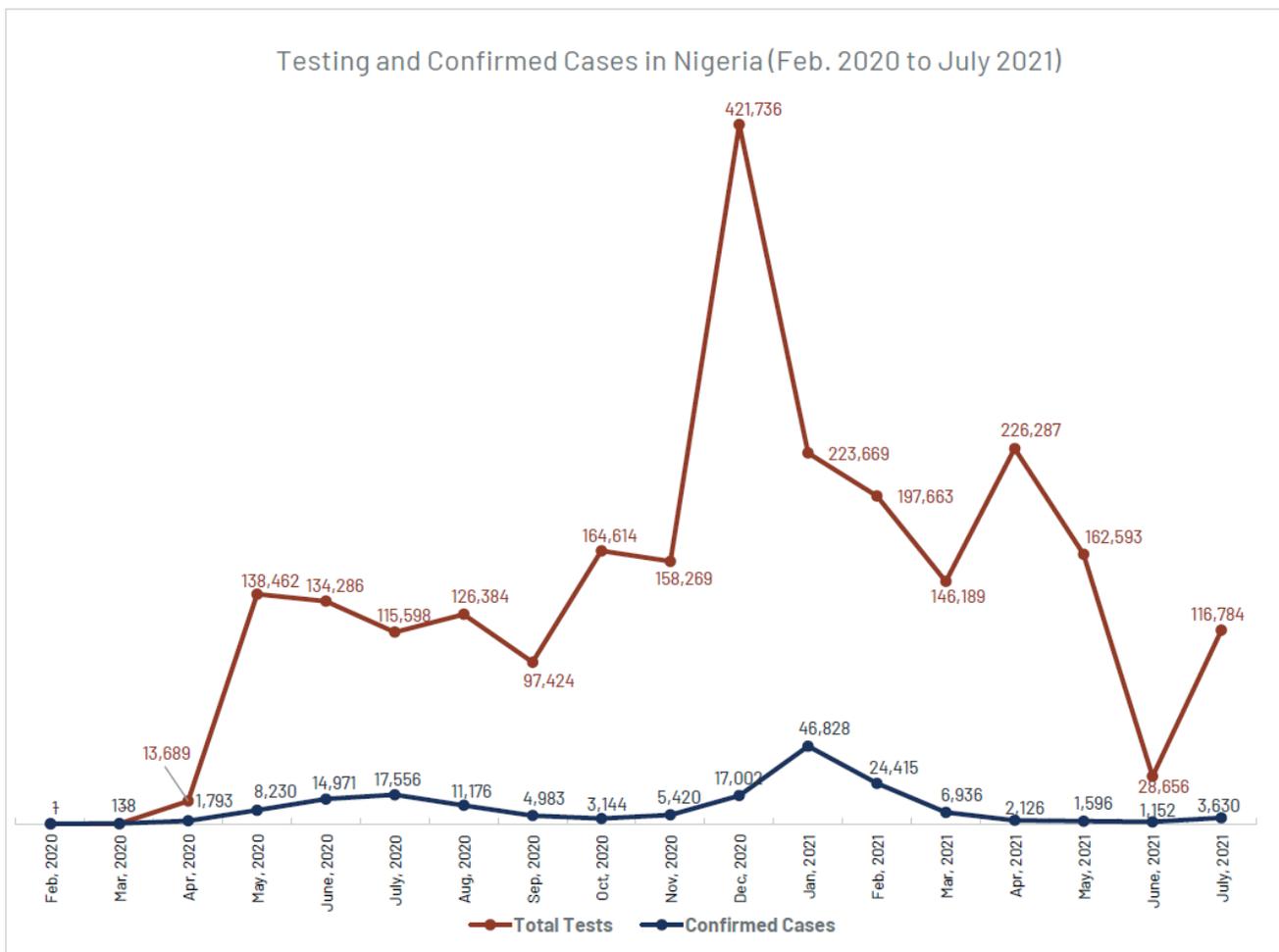
3. COVID-19 Overview

THE EVOLUTION OF THE COVID-19 CASELOAD IN NIGERIA

On February 27, 2020, the Federal Ministry of Health confirmed the first COVID-19 case in Lagos State, Nigeria, making the country the third country in Africa to recognize an imported COVID-19 case after Egypt and Algeria. The epidemiology of COVID-19 in Nigeria has since evolved,

between February 27, 2020, and July 18, 2021, a total of 2,420,863 persons have been tested for COVID-19 in Nigeria, of which 169,518 (7.0%) were confirmed as being infected with SARS-CoV-2 by RT-PCR. A total of 2,127 deaths have been recorded among the confirmed COVID-19 cases, resulting in an observed case fatality ratio (CFR) of approximately 1.3% ([NCDC 19/07/2021](#)).

Figure 2. Monthly testing and caseload data for Nigeria Feb 2020 - July 2021



Source: [NCDC](#)

Nigeria experienced 2 waves of COVID-19 peaking in July 2020 and January 2021, before the advent of a vaccination program. From the first case in February, Nigeria saw the number of positive cases rise to 1,793 in April 2020, further increasing to a peak of 17,556 by July. At the same time, Nigeria was building testing capacity which hovered

just above or around 100,000 tests per month from May through to September. The number of new cases per month dropped steadily from the peak in July, to a monthly low of 3,144 in October, with testing rising to over 160,000 that month. A second wave hit Nigeria with a much sharper increase in cases through November and December

to peak at 48,828 in January 2021. However, testing capacity had also risen so it is possible that fewer cases went undetected compared to the first wave. As quickly as the second wave came, it dropped off, back down to 6,936 cases by March 2021 and under 2,000 cases by May 2021. At the same time as the second wave was waning Nigeria started to roll out its vaccination program ([NCDC 19/07/2021](#)).

CASE NUMBERS UNDERREPORTED

As well as having enough testing capacity there were some challenges associated with testing for COVID-19 in Nigeria, especially in the first few months. These included the availability of public information on where to get tested, the reluctance of the people to get tested (as a positive test resulted in being placed in isolation), and the proximity to locations of the test. COVID-19 can also be spread by people who do not show any symptoms of the virus and so would have no reason to get tested. Other challenges include the criteria for testing, the number of tests available and used, as well as their accessibility, availability, and awareness of testing for the population in different parts of Nigeria. Therefore it is likely that the number of positive cases was significantly underreported, but by how much is hard to estimate ([NCBI 22/06/2020](#), [Punch 19/07/2020](#)).

COVID-19 CASELOAD WAS RELATIVELY LOW THROUGHOUT THE BAY STATES

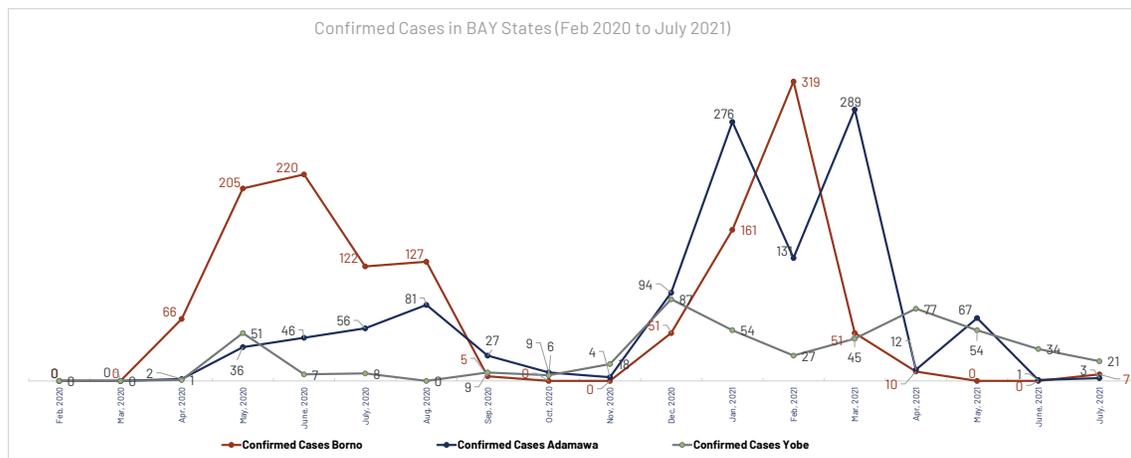
The first COVID-19 case recorded in the BAY states was on the 18th of April 2020 in Borno state. With over 7.5 million people in need of humanitarian assistance due to the ongoing humanitarian crisis in the region, the COVID-19 pandemic presented a more difficult challenge to an already complex humanitarian situation. Of particular concern was the situation in extremely congested IDP camps - less than one square meter per person in some locations - making it impossible to practice social distancing measures ([UN Briefing Note 03/04/2020](#), [HealthSectorNigeria 18/07/2020](#)).

However, the feared outbreak in IDP camps never materialized. The trajectory of the pandemic in the BAY states roughly followed that of the country as a whole (see Figure 3), with the first wave in from May to August 2020 followed by a second wave (slightly later than the national picture) from mid December 2020 to March 2021.

As can be seen in Figure 4 testing capacity was never high in the BAY states, with Yobe in particular struggling to build testing capacity. As in other areas of the country, there was a reluctance to get tested as the repercussions of testing positive (isolation) were prohibitive. From the start of April 2021 the number of positive cases has remained low overall, although Yobe peaked later than the other states and Adamawa had a spike in cases in May 2021.

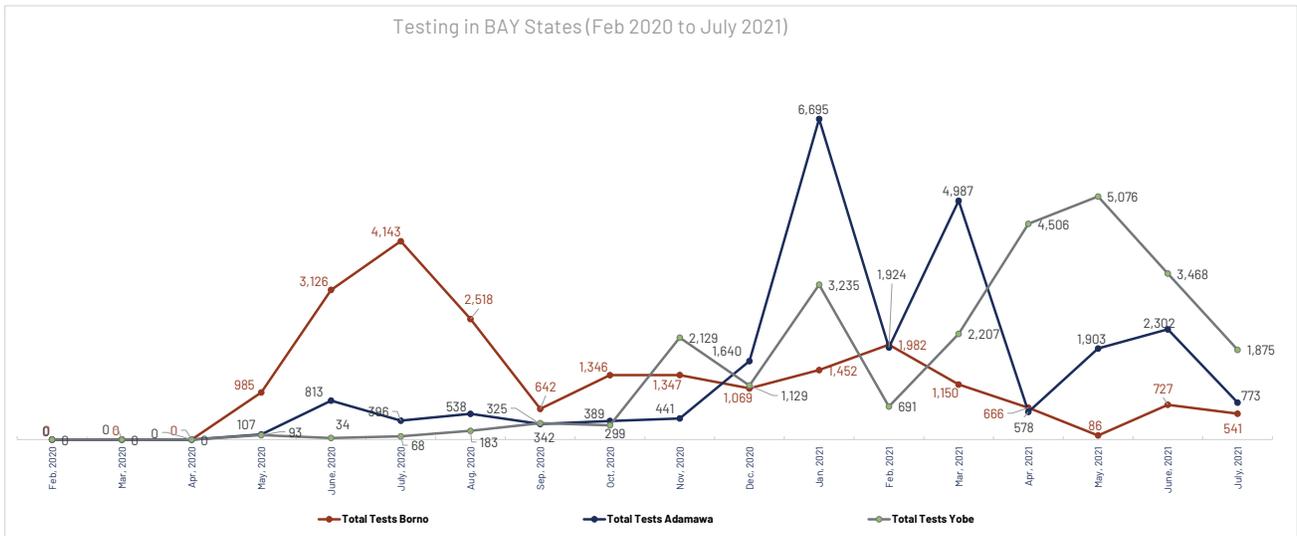
The vast majority of deaths from COVID-19 occurred in the first wave (see Figure 5) with no recorded deaths due to COVID-19 since April 2021 in the BAY states. However this could be due to a reluctance of people getting tested.

Figure 3. COVID-19 confirmed cases by month in the BAY states (Feb 2020 to July 2021)



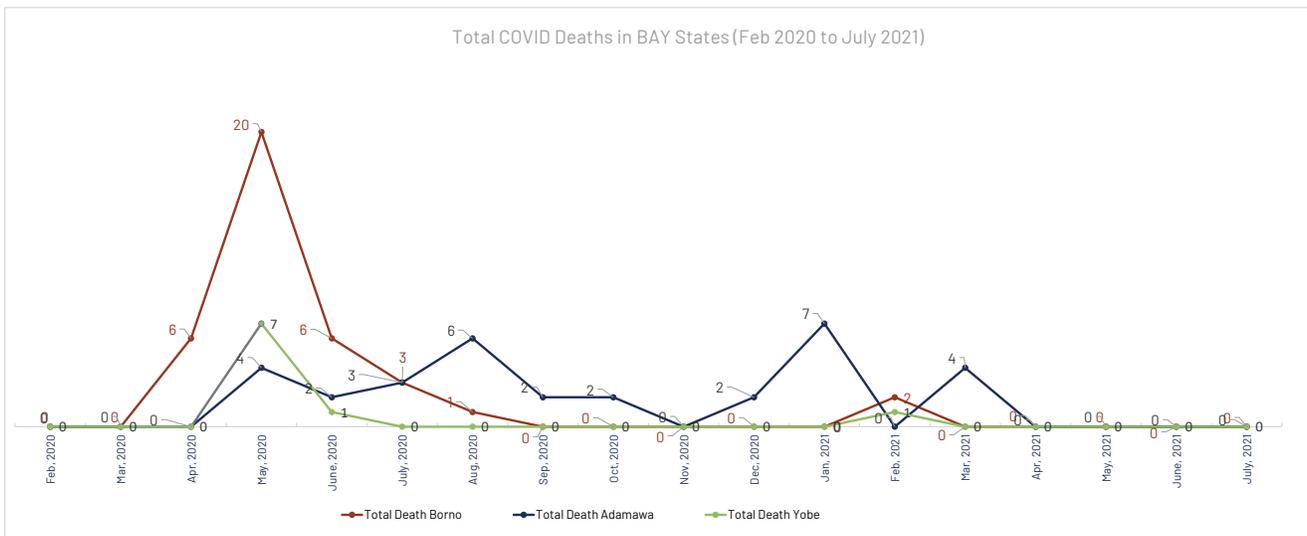
Source: ([NCDC Weekly Epidemiological Report, 31/08/2021](#))

Figure 4. COVID-19 testing by month in the BAY states (Feb 2020 to July 2021)



Source: (NCDC Weekly Epidemiological Report, 31/08/2021)

Figure 5. COVID-19 deaths by month in the BAY states (Feb 2020 to July 2021)



Source: (NCDC Weekly Epidemiological Report, 31/08/2021)

4. COVID-19 Containment Measures, Communication and Information

INITIAL LOCKDOWN AND PHASED REOPENING

While the first official COVID-19 case in Nigeria was reported and announced by the health minister on 27th of February 2020 the Government did not announce a lockdown in the country until the 30th of March 2020 when it announced a lockdown in Abuja, Lagos, and the Ogun States and included a 24-hour curfew (except for essential service providers). The lockdown would summarily be imposed by other states in April. During the lockdown, a ban was placed on interstate travel and public gatherings with no more than 20 people allowed per gathering. Schools, clubs, worship centers, markets, and other public places were also closed.

COVID-19 prevention-related movement restrictions in the BAY states led to a slower and more limited humanitarian response to IDP needs with supply chain issues hampering the replacement or repair of damaged or destroyed shelters and NFIs ([NCDC 28/02/2020](#), [UNHCR 25/05/2020](#), [CCCM 08/07/2020](#)).

The initial lockdown was eased in May 2020 with government policy being a phased approach to the lifting of restrictions. Phase I commenced on 04/05/2020 and saw the re-opening of public and private workplaces but with limited working hours. Remaining restrictions included a continued ban on non-essential interstate travel and the required wearing of face masks and maintaining social distancing in public places. Schools, sports events, public gatherings, and religious services were still prohibited ([Govt Nigeria 28/04/2020](#)).

Phase II commenced on 02/06/2020 and saw the lifting of the inter-state travel ban's outside of curfew hours, extended working hours, and efforts to resume domestic flights. It also included a relaxation of the ban on religious gatherings. Observation of existing precautionary measures continued, including wearing face masks, practicing social distancing, and providing handwashing facilities/sanitizers in all public places. Further easing of restrictions was gradually brought in throughout July through to October, with schools directed to open from October 12th once precautionary measures had been put in place. Airports also opened, but international travelers were required to take a COVID-19 test and observe seven days of quarantine upon arrival ([Govt Nigeria 03/07/2020](#)).

RESTRICTIONS EXTENDED DUE TO SECOND WAVE AND AGAIN DUE TO FEAR OF NEW VARIANTS

Due to the increased number of COVID-19 cases in Nigeria, the Nigerian government ordered the reopening of Isolation and treatment centers in the country on Thursday, 10th December 2020. With the increasing trend of new cases continuing, the federal government extended restriction from the phase 3 eased lockdown guidelines by one-month on 26th January 2021 ([Naira Metrics 28/01/2021](#)).

Restrictions were gradually relaxed as the number of new cases dropped sharply through February and March 2021. However, measures introduced on May 11, 2021, stipulated that bars, nightclubs, event centers, and recreation venues were to remain closed with a nationwide 00:00-04:00 curfew in place. Outdoor sporting activities were allowed but public gatherings remained restricted. Gatherings in enclosed spaces were limited to 50 people, provided they observe adequate social distancing measures and wear facemasks. Civil servants were able to return to working on-site at public offices, but public transport systems were required to limit their capacity to 50 %. This mix of new measures and an extension on the closure of some establishments was in response to the appearance of new variants of the COVID-19 virus. Travel from Brazil, India and Turkey was restricted as these countries had a high incidence of cases, high fatality rate and there was widespread prevalence of the variants of concern ([Govt of Nigeria 26/4/2021](#)).

ENFORCEMENT AND COMPLIANCE WITH CONTAINMENT MEASURES IN THE BAY STATES

Media and protection monitoring reports of misconduct suggested the use violence and harassment by security forces while enforcing movement restrictions in the BAY States ([UNHCR 25/05/2020](#)). A more extensive assessment was provided by a detailed case study provided by Mercy Corps. Although inter-state travel bans to curb the spread of COVID-19 were lifted on June 29, communities reported that the movement restrictions resulted in a surge in military profiteering, including extortion of commercial traders permitted to continue supplying essential goods across state lines, as well as residents seeking to evade official lockdown measures ([Mercy Corps 10/09/2020](#)).

Lack of compliance was consistently noted in the WHO sitreps. "Poor compliance in the use of face masks, social distancing, and good hygiene practices by the general public" was pointed out as the first challenge in the eleven COVID-19 sitreps published between [07/06/2020](#) and [13/10/2020](#). The lack of belief in the existence of COVID-19 was a challenge for providing prioritized child protection services activities while adhering to physical distancing and other control measures ([OCHA](#) 09/07/2020).

Physical distancing was especially problematic in many camps due to overcrowding. Four out of five people in these camps lived in overcrowded conditions, with makeshift and temporary shelters built close to each other, making physical distancing impossible ([OCHA](#) 13/08/2020).

WIDESPREAD EFFORTS TO PROVIDE INFORMATION ON COVID-19 UNDERMINED BY RUMOURS AND MISINFORMATION

Efforts were made to sensitize the population about COVID-19 risks and mitigation measures through various channels. As well as providing information through radio and television messages, posters and information handbooks were distributed. Humanitarian programs integrated awareness into normal programming sectors such as the Child Protection Sub-Sector provided age-sensitive materials. Social media was also being used to provide information.

However, surveys indicate that friends, neighbors, and local community leaders were regarded as the most trusted sources of information. This was true for both host communities and IDPs in camp settings. Of concern, especially in the first months of the pandemic was the spreading of rumors and misinformation. In particular, Non-State Armed Groups (NSAGs) tried to use the COVID-19 situation to their advantage by linking the virus to western values or as a deliberate campaign by non-Muslims to prevent Muslims from practicing their faith ([UNICEF](#) 10/06/2020, [Modern Diplomacy](#) 09/08/2020, [IOM](#) 25/05/2020 – 01/06/2021).

5. Economic Impact of COVID-19

LOCKDOWN AND COVID-19 RELATED MACROECONOMIC FACTORS NEGATIVELY IMPACTED THE ECONOMY

As with most other economies worldwide, the sharp drop in Nigeria's GDP is mostly the result of the slowdown of economic activity after the country implemented a lockdown in April to curb the spread of the virus. In the wake of the pandemic, the World Bank forecast a decline of 3.2% for 2020 - a five percentage point drop from its previous projections ([WEF 23/08/2020](#)).

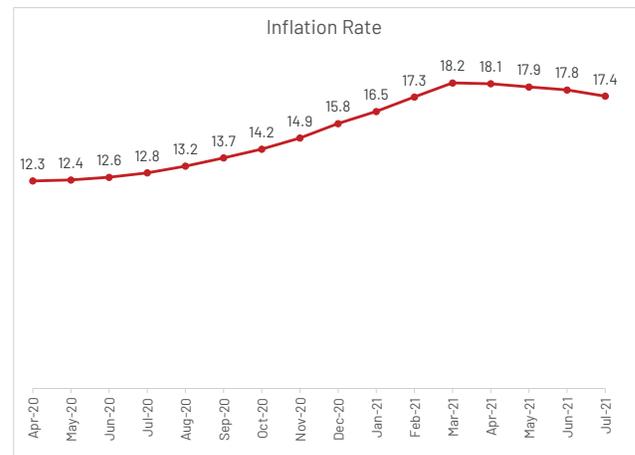
The accompanying steep drop in oil prices amid a decline in global demand left Nigeria drastically short of earnings given its dependence on the commodity. The price of Brent crude, which Nigeria's oil is benchmarked against, slumped by over 50% since opening on January 1, 2020, at \$66 per barrel. This posed a severe problem as the country's government based its initial \$34 billion budget for 2020 on an assumed oil price of \$57 per barrel. The price per barrel hovered around \$40 per barrel for much of 2020, only climbing to \$50 per barrel in December 2020 ([Quartz 15/05/2020](#), [BBC News](#) accessed 26/09/2021).

HIGH INFLATION DRIVEN BY INCREASING FOOD PRICES AND DEPRECIATION OF THE NAIRA

Nigeria's annual inflation rate rose steadily throughout the pandemic, pushing up prices of commodities and food (as evidenced in the consumer price index) thereby having a heavy negative impact on household purchasing power. Inflation peaked at 18.17% in March 2021, making it the highest inflation rate since April 2017 and the rate still remained high at the end of July 2021, although decreasing marginally each month. The exchange rate for the Naira was also negatively affected, rising from 306 Naira per USD in February 2020 (the month before the pandemic), to 408.75 Naira per USD a year later. By June the exchange rate had stabilized to 411.50 Naira per USD, and remained the same in July ([Trading Economics](#) accessed 31/08/2021).

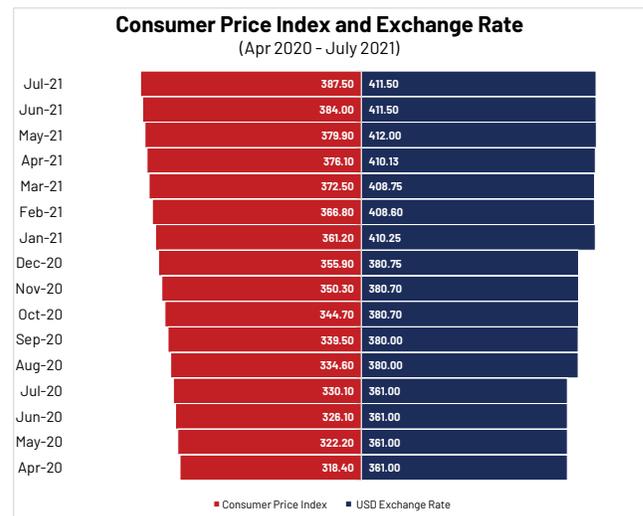
The inflation rate and subsequent rise in basic commodities including food has negatively hit household purchasing power, resulting in the increased use of negative coping mechanisms especially during lean season. Even into 2021, market supply for most goods remained limited and income-earning opportunities remained constrained for most households in the northeast areas of the country. Households in conflict-affected areas continued to engage in petty trading, labor work, firewood sale, and other menial jobs to earn limited incomes ([WFP 18/02/2021](#), [FEWS Net 28/04/2021](#)).

Figure 6. Inflation Trend from April 2020 - July 2021



(Source: [Trading Economics](#))

Figure 7. Consumer price index (CPI) against USD Exchange rate April 2020 - July 2021



(Source: [Trading Economics](#))

6. COVID-19 Epidemic Overview

COVID-19 NIGERIA TIMELINE

Feb 2020 - July 2021

- February 28 2020  First case of COVID-19 confirmed in Nigeria
- March 18 2020  Nigerian government bans hotspot countries
- March 19 2020  Nigerian government shuts down schools
- March 31 2020  Adamawa and Yobe states impose lockdown
Nigerian government imposes lockdown on hotspot states
- April 16 2020  Isolation center opens in Borno state
- April 22 2020  First case in Adamawa state recorded
First COVID-19 related death reported
Borno state imposes lockdown
- April 27 2020  Nigerian government imposes nationwide travel ban, curfew and mandatory use of facemasks in public
- June 02 2020  Reopening of worship centers
- July 01 2020  Lifting of nationwide travel ban. Schools resumes for graduating students
- July 08 2020  Resumption of domestic flights
- September 05 2020  School resumption nationwide with COVID-19 guidelines in place
Resumption of international flights
- December 17 2020  Second wave began with record high 1,145 daily cases
- December 24 2020  New strain of COVID-19 separate from UK and South African variant discovered
- December 28 2021  Nigerian Government introduces new containment measures.
- January 10 2021  100,000 COVID-19 cases milestone
- January 18 2021  School resumption nationwide with COVID-19 guidelines
- January 25 2021  UK Variant discovered in Nigeria
- February 15 2021  150,000 COVID-19 cases milestone
- February 27 2021  One year since first case
- March 02 2021  3.94m doses of AstraZeneca vaccine arrive in Nigeria from the COVAX initiative
COVID-19 related deaths reached 2000
- March 05 2021  First Vaccine dose administered. Frontline health workers and adults with pre-existing conditions among first target groups.
- March 06 2021  Nigerian president receives first dose of COVID-19 vaccine.

COVID-19 NIGERIA TIMELINE

Feb 2020 – July 2021

- March 12 2021  Vaccination rollout began across the country
- March 23 2021  122,000 vaccines administered
- April 26 2021  Nigerian government introduces extra measures for passengers arriving from Brazil, India and Turkey.
- April 26 2021  1.19m vaccines administered nationwide. 65,986 vaccines administered in BAY states
- May 02 2021  Nigerians ban travelers from India, Brazil and Turkey
- May 03 2021  Lagos state government brings out more protocols to prevent 3rd wave of COVID-19
- May 03 2021  Nigerian Government re-imposes curfew and Coronavirus restrictions.
- May 13 2021  WHO reports Indian variant of COVID-19 in Nigeria and The Nigeria Government moves to begin phase 2 of vaccination.
- May 18 2021  Nigerian government and partners creates free helpline to support those with COVID-19 mental health struggles.
- May 24 2021  Nigeria imposes sanctions on 90 travelers who evaded mandatory quarantine and the Presidential Steering Committee (PSC) declared 108 arriving passengers from Brazil, Turkey, UAE and India, Persons Of Interest (POI) for violating COVID-19 quarantine protocol.
- June 02 2021  President taskforce releases revised quarantine protocol.
- June 15 2021  National Agency for Food and Drug Administration and Control (NAFDAC) and partners began monitoring the safety of novel ChAdOx1 nCoV-19 Corona Virus Vaccine (Recombinant) Covishield vaccine in Nigeria through enhanced passive AEFI surveillance at vaccination centers around the country.
- June 18 2021  Nigeria excluded from U.S.' \$91 Million COVID-19 response fund to Africa
- June 25 2021  Nigerian Government reopens first dose of Covid-19 vaccination
- June 29 2021  Nigeria on high alert of COVID-19 Delta variant

 -  Travel ban extended to South Africa, Zambia, Rwanda, Namibia and Uganda amidst 3rd wave of infection
- July 9 2021  UK removes travel warning against Nigeria
- July 11 2021  358 passengers from red-listed countries-India, South Africa, Brazil and Turkey that are required to observe mandatory isolation on arriving Nigeria have absconded in Lagos. Lagos orders religious, event centres to cut capacity amidst COVID-19 Third wave fears
- July 12 2021  Nigeria Hit With Third Wave Of Covid-19 As NCDC Records First Delta Variant Case in Oyo state
- July 13 2021  NPHCDA has vaccinated 3.9 Nigerians

 -  UAE suspends passenger flights from South Africa and Nigeria

- July 14 2021  ■ Osun alerts residents of Delta variant
- July 15 2021  ■ UNILAG Shuts Hostels Over COVID-19 Delta Variant On Campus
NAFDAC approves Moderna, Sputnik V vaccines for use in Nigeria
FG earmarks N20bn for COVID-19 vaccine distribution
- July 16 2021  ■ World Bank mobilises \$100bn support fund for Nigeria other members of the International Development Association to quicken their recovery from the COVID-19 pandemic.
The University of Lagos (UNILAG) has extended the deadline issued to students to vacate halls of residence to prevent COVID-19 spread.
- July 18 2021  ■ Presidential Sterling committee issues red alert over 3rd wave of COVID-19
Put Lagos, Oyo, Rivers, Kaduna, Kano, Plateau, and the Federal Capital Territory on red alert
The Jigawa State Government has suspended all Durbar activities for the upcoming Eid-El Kabir celebration across the state as part of preventive measures against the third wave of COVID-19.
Director-General, Nigerian Institute of Medical Research (NIMR), has said that the recent increase in COVID-19 cases could be a signal of a third wave of the pandemic

The Federal Capital Territory Administration has issued new directives for the Eid-El-Kabir celebrations following the upsurge in coronavirus infections in the country.
- July 19 2021  ■ Testing, Isolation Centres Shut in States Despite Imminent Covid-19 Third Wave
NAFDAC Warns against Use of Unverified COVID-19 Herbal Medicine
- July 22 2021  ■ COVID-19 third wave: FG shuts down Abuja parks
- July 23 2021  ■ 4,000 children orphaned in Nigeria by COVID-19, highest in West Africa – World Bank
COVID-19 testing stops in 13 states
156 cases recorded in Akwa Ibom in 2 weeks
- July 24 2021  ■ China donates 470,000 vaccines to Nigeria
- July 25 2021  ■ Enugu Governor Inaugurates 11-Man Covid 19 Steering Committee
THIRD WAVE Hotspots: Lagos, Oyo, Rivers, Kaduna, Kano, Abuja residents shun red alert
The University of Ibadan, in Oyo State has banned all unauthorised visitors and travellers coming to the institution.
- July 26 2021  ■ Nigeria faces deadly COVID-19 Delta wave as infections jump 150%
FG reads riot act as abscondment of quarantine passengers at points of entry surges
- July 27 2021  ■ Nigeria records 10 cases of Delta variant – NCDC
FG Orders Activation of COVID-19 Isolation Centres Nationwide
- July 28 2021  ■ Nigeria expects 29 million doses of J&J COVID-19 vaccine in August
- July 29 2021  ■ United States gifts Nigeria 4 million doses of COVID-19 vaccine
- July 30 2021  ■ Nigerian govt advises against mass political assemblies
Minister of Health unveils plan for COVID-19 vaccine production in Nigeria
UAE Extends Travel Ban Against Nigeria
- July 31 2021  ■ Nigerian Doctors Begin Nationwide Strike Amid COVID-19 Surge
UMTH opens upgraded isolation centre

Nigeria Records Highest Daily COVID-19 Cases In Almost Five Months

7. Protection¹

PROTECTION ISSUES INTRINSIC TO THE CRISIS IN NORTHEAST NIGERIA BEFORE COVID-19 PANDEMIC

The conflict in the BAY states is first and foremost a Protection crisis. Even before the outbreak of the COVID-19, the situation was severe; characterized by forced displacement, sexual and gender-based violence, particularly against women and girls, and including rape, deliberate attacks on civilians, abductions; destruction of property and the use of Improvised Explosive Devices (IEDs).

The patriarchal set up of the Northeast put women who make up more than half of the displaced population at a distinct disadvantage. Pre-COVID-19, it was reported by the 2018 HNO that a high percentage of displaced women and girls were survivors of sexual and gender-based violence (SGBV) and face stigmatization when they return to their communities. Females heading households, widows and adolescent girls were critically vulnerable to violence by armed actors as well as members of their own households and the community at large. It was thus not uncommon for such women to resort to survival sex – trading sex in exchange for resources, including food and shelter. That same year, it was estimated that at least 6 out of 10 women in the northeast had experienced one or more forms of gender-based violence (GBV). Nigeria's poor ranking (118 out of 144 countries) on the Global Gender Gap Index of 2016 painted a grim picture of how disadvantaged women and girls are in Northeast Nigeria.

The forced displacement of civilians before the COVID-19 and the Government's efforts to have them returned to their places of origin, sparked widespread concerns, especially within the humanitarian community. The outrage was because many returns fell short of international standards on voluntariness, safety, and dignity. To compound the issue, returnees are at risk of being killed or injured by explosive ordinances and landmines used during the conflict.

As of 2019, the conflict had forced more than 3.5 million civilians to flee for safety and had over 820,000 others stuck in inaccessible areas, without access to humanitarian assistance. Additionally, most who return remain in a state of secondary displacement and such returns were found to be unsustainable.

The Humanitarian Response Plan (HRP) for 2020 targeted 5.5 million beneficiaries for protection interventions (including the Child Protection, SGBV and Mine Action subsectors) ([UN OCHA](#) 01/04/2020, [UN OCHA](#) 31/03/2020, [UN OCHA](#) 01/02/2019, [UN OCHA](#) 13/02/2018, [WEF](#) 26/20/2016).

CHILDREN HIGHLY VULNERABLE IN THE NORTHEAST BEFORE THE COVID-19 PANDEMIC

Before the outbreak of the COVID-19, it was estimated that one in four IDPs was a child under the age of five and children made up the majority of the IDPs in need. Those most at risk were child-headed households and unaccompanied/separated children – many of whom were unable to enrol in or attend schools ([OCHA](#) 01/02/2019).

Children faced multiple protection risks including the risk of sexual exploitation and abuse, increased violence in the home, homelessness, and dependence on negative coping mechanism (such as early marriage and child labor) due to poverty. The conflict also brought with it the risk of kidnapping or being forced to join an armed group.

UNICEF estimated that more than 1,000 children have been abducted by NSAGs in the northeast since 2013. These include the almost 300 girls taken from their school hostel in Chibok in 2014. There was also the kidnapping of over 300 boys from a school in Buni Yadi, Yobe State – 59 others were killed in that incident ([UNICEF](#) 13/04/2018, [Reuters](#) 26/02/2014).

A vulnerability survey of 98,215 households conducted in 2017 showed that many households, particularly female headed households (63% of the vulnerable households profiled were headed by women), have been compelled to send their children out to beg and induced them to marry off young girls, increasing their risks of exploitation and abuse. The survey also found that 22% of GBV incidents reported by minors have occurred in the context of early marriage. Further, cases of sexual exploitation of IDP women and girls in exchange for food and their freedom of movement outside of IDP camps were also reported ([OCHA](#), 01/02/2019).

1.) Includes Child Protection, Housing, Land and Property, Sexual and Gender Based Violence (SGBV) and Mine Actions Sub-Sectors

COVID-19 CONTAINMENT MEASURES REDUCE FIELD PRESENCE OF PROTECTION ACTORS

The outbreak of the COVID-19 pandemic complicated the humanitarian response and the ability for humanitarians to support people in need of protection assistance. The subsequent lockdown also limited access to affected populations and information thus increasing the number of unreported incidents ([UNHCR](#), 26/05/2020).

The other measures taken to ensure that camp communities remained protected (e.g. movement restrictions, and the introduction of new health and hygiene standards such as social distancing) saw most protection partners withdraw from field locations. They thus began to rely heavily on community-based structures and remote systems to monitor the protection situation. For protection actors, field level activities including sensitizations, focus group discussions etc. continued but with reduced participation. Some activities such as those around advocacy switched to door-to-door delivery ([UNHCR](#) 04/05/2021).

A perception survey on the impact of COVID-19 on children which sought to understand the impact on the delivery of child protection services in Borno State found that the most impacted services were in Jere and Maiduguri Metropolitan City (MMC) provision of psychosocial support for caregivers and children as organizations indicated that they were unable to continue with most of these activities. Outside Jere and MMC, the most impacted services were community reintegration for children formerly associated with armed groups (CAAG) and provision of psychosocial support services for caregivers. At least 76% of the organizations implementing community-based reintegration services for former CAAG indicated that these activities had to be suspended completely or partially during the lock-down ([CPSS](#) 01/07/2020).

SGBV INCREASED DURING THE COVID-19 LOCKDOWN WITH MANY VICTIMS UNABLE TO REPORT INCIDENTS OR SEEK ASSISTANCE

Women and girls have been particularly vulnerable to abductions by NSAGs. They also experienced severe violations including rape, forced marriage, forced labor, or other forms of violence during their abduction. This was worsened by the outbreak of the pandemic which also affected the delivery of humanitarian services, including management of SGBV cases.

About 2.9 million people are estimated to be at risk of GBV threats. The most vulnerable groups are women, girls, and boys. Female-headed households, widows, women with disabilities and adolescent girls remain the most at-risk groups. Of particular concern is physical assault, perpetrated in the majority of cases, by intimate partners. UNHCR recorded an increase in such incidents between January and April 2020 (with 42% of incidents in this period occurring in April, compared to 17% of recorded incidents occurring in January). Contributing factors included the strain on households caused by limited economic opportunities and the lack of access to basic needs both resulting from the pandemic. Additionally, the virus containment measures such as the lockdown is said to have worsened the already existing tension in the households resulting in an increased rate of physical violence ([UNHCR](#) 26/05/2020).

The COVID-19 outbreak mitigation measures negatively impacted economic opportunities and increased levels of poverty. Women and girls are at particular risk of adopting negative coping mechanisms, with many reporting trading sex for food, money, and freedom of movement (into and out of IDP sites) because of the hardship brought about by the lockdown. According to UNHCR, Incidents of survival sex/sexual exploitation represented 7% of SGBV cases reported between the period of March and April 2020. The widespread increase in the use of negative coping mechanisms was also detailed by WFPs Essential Needs Assessment (ENA) with 34% of households resorting to crisis or emergency livelihood coping strategies. Amongst the most vulnerable households were those households where women headed households or where women are the sole earners ([WFP](#) 19/02/2021, [REACH](#), 02/02/2021, [UNHCR](#), 26/05/2020).

Safe access to fuel and energy remained another major concern for particularly for female IDPs as women and girls reported incidents of rape and risk of abduction while collecting firewood. Rape has also been reported within IDP camps with survivors unable to get justice, thus emboldening perpetrators to act with impunity. SGBV prevention, risk mitigation and multisectoral response are still challenged by the absence of specialized gender-based service providers in some LGAs including the absence of the judiciary that hinders access to justice for SGBV survivors. Women made up 98% of the victims of the 547 incidents of SGBV cases reported during protection monitoring done by UNHCR and its partners conducted between March to April 2020. Ninety-nine other non-SGBV incidents were reported in the same period ([UNHCR](#) 25/05/2020).

Between July and August of the same year, a total of 614 SGBV incidents have been identified and reported,

indicating a slight increase. A general underreporting of incidents observed, mainly due to the lockdown that impacted activities, lack of justice for survivors even after reporting, the fear of stigma and blaming by health workers and the police ([UNHCR](#) 04/05/2021, [UNHCR](#), 09/10/2020).

The inability for victims and survivors to get help from health and protection partners exposes the population to increasing incidence of sexually transmitted infections including HIV, unwanted pregnancies, and obstetric fistula, leading to overall poor sexual and reproductive health outcomes ([REACH](#) 02/02/2021).

The COVID-19 crisis is only worsening the situation, with women reporting increased cases of domestic violence, sexual assault, and unwanted pregnancy. With some male partners stopping their wives accessing medical and NGO services, these incidents are likely to be underreported ([Mine Advisory Group](#) 14/12/2020 [UNHCR](#) 06/07/2021).

COVID-19 RESTRICTIONS EXACERBATED RISKS FOR CHILDREN AND HINDERED ACCESS TO PROTECTION SERVICES

Although initially expected to be a short-term measure, schools closed for 7 months putting millions of children at increased risk. Children were more likely to be involved in child labor, including begging and hawking; taking on more domestic chores including collecting firewood and also (for girls) at risk of being forced into early marriage.

Despite children facing multiple protection risks—child marriage, family separation, physical and sexual violence, psycho-social distress and recruitment by non-state armed groups - access to already scarce child protection services has become even harder. Added to the limited availability of such services was the implementation of COVID-19 movement restrictions and an increased lack of resources. Many children, including those experiencing psychological distress and not living with their households, were left without access to core child protection services ([UN OCHA](#) 01/03/2021).

This resulted in many child protection issues being both underreported and untreated as parents struggled to provide appropriate care and protection to their children, made worse by the socio-economic effects of the COVID-19 pandemic. The 2021 HNO estimates that at least 1.4 million of the children in need (27% in Adamawa, 55% in Borno and 18% in Yobe) have very limited or no access to core child-protection services ([UN OCHA](#) 01/03/2021).

The unavailability and inaccessibility of child protection services, including limited access to remote learning,

significantly affected their physical, mental, emotional, and social well-being. It also affected their ability to cope with the conflict and the COVID-19 pandemic.

POOR ACCESS TO DIGNIFIED LATRINE AND HYGIENE FACILITIES INCREASED PROTECTION RISKS

Many IDPs live in overcrowded camps thus lack access to adequate Water Sanitation and Hygiene (WASH) facilities, including latrines and bathing shelters, with COVID-19 increasing the complexity of WASH provision in the region. At the start of the crisis 40% of IDP camps in Borno State were estimated to be congested, further exacerbating the humanitarian situation in the camps, increasing protection risks ([UN OCHA](#) 08/03/2021, [UN OCHA](#) 01/04/2020).

Almost half of the latrines in 17 LGAs across the BAY states assessed by the CCCM sector last year were found to be without gender markers. With no distinction between bathrooms meant to be used by females and those for males, a lot of privacy is lost, especially for women who thus face additional exposure and risk of sexual abuse. Indeed, focus group discussions have revealed that cases of rape and sexual assault occurred mostly at night and mention poorly lit latrine areas in camps as points where women and girls have been attacked ([CCCM](#), 14/12/2020, [UNHCR](#) 09/10/2020).

RETURNS PROCESS FOR IDPS INCREASED VULNERABILITIES AS SECURITY AND COVID-19 RESTRICTIONS IMPACTED SUPPORT AND SERVICES

The Borno State Government's efforts to return IDPs to some LGAs even during the pandemic led to concerns about the safety, dignity, and voluntariness of the process ([The Guardian](#) 04/08/2020, [Premium Times](#) 06/10/2020). The Government began the return process in August 2020, amidst protests from the humanitarian community who cited that many of the selected locations were insecure and prone to attacks from NSAGs. In several locations, NSAGs attacked almost immediately after the returns took place, causing many of the newly returned IDPs to flee. A recent example from May of 2021 year is the closure of Mohammed Goni Islamic and Legal Studies (MOGOLIS) Camp, with 500 households having been returned to their LGAs of origin. Further analysis of the impact of insecurity on the humanitarian operational environment can be found in the [iMMAP report](#) covering the period February 2020 to July 2021 ([iMMAP](#) 24/09/2021, [UNHCR](#) 04/05/2021, [The Guardian](#) 29/05/2021).

While the desire by some IDPs and refugees to return to their places of origin remains a priority, concerns persist that conditions in those areas are not yet conducive for such returns, particularly in Borno State. The belief is that returning IDPs may not be sufficiently informed regarding remaining threats, including improvised explosive devices (IEDs) and unexploded devices [[see later section for further analysis on these risks](#)], and may be incentivized by assistance, political agendas, and push or pull factors. However, the Borno State Government defended its decision, saying IDPs must return to their communities so they can farm and help tackle rising food insecurity in the state ([OCHA](#) 21/01/2021, [Premium Times](#) 23/06/2021).

Many of the LGAs where people are expected to return continue to be largely inaccessible to aid agencies due to the insecurity resulting from the escalating clashes particularly in Mobbar, Ngala and Monguno LGAs. In Damasak, Mobbar LGA, deadly armed clashes near the border with Niger Republic, forced a 10-day suspension of UNHAS helicopter flights while several aid trucks were delayed, resulting in weeks of shortages of food and other commodities for over 78,000 people in the area in the eight months before December 2020. The inaccessibility was compounded by the pandemic which made it necessary for agencies to obtain security clearance and a movement passes during the lockdown. According to UNOCHA, many aid agencies reported having challenges obtaining the necessary passes and had to suspend operations. The affected IDPs would have thus not only remained in a state of secondary displacement but would also have had difficulties accessing critical assistance and services including food, water, shelter, and health. This meant that many of the returnees had to settle in already crowded camps to enable them gain access to assistance and critical services. The state government and humanitarian agencies have however commenced rehabilitation of damaged homes and facilities in return areas ([OCHA](#) 21/01/2021, [OCHA](#) 04/02/2021).

In areas like Bama, Pulka and Banki in Borno State, new arrivees had to sleep in the open or in crowded reception centers due to camp congestion and the inability to secure more space for the construction of new shelters. This exposes them to protection risks and the elements and COVID-19 ([UNHCR](#) 20/09/2020).

THE ELDERLY PARTICULARLY VULNERABLE TO THE IMPACTS OF COVID-19 AND ONGOING CONFLICT

Several vulnerability screenings conducted by UNHCR reveal that elderly people continued to have specific vulnerabilities throughout the pandemic. The Protection

Monitoring Report covering July and August 2020 reported that the elderly made up 36% of the 40,316 individuals screened for specific needs. Of the 2,914 elderly people with specific needs, 54% were elderly-headed households, and 23% vulnerable elderly unable to care for themselves ([UNHCR](#) 9/10/2020).

Although UNHCR did not mention what these specific needs are, Amnesty International, in 2020 reported that older people's perspectives and human rights have been largely ignored. They also reported on the specific violations and abuses that older people suffer both from the Nigerian military and the NSAG ([Amnesty International](#) 08/12/2020).

Amnesty International lists these violations to include having to remain in contested areas due to their reduced mobility and deep ties to their homes, reduced access to food and livelihood opportunities and getting maimed, humiliated, or killed by the NSAG. Old people trying to flee also risk injury and death. Those who succeed in fleeing face an additional risk of being detained and mistreated by the Nigerian army and made to endure inhuman conditions such as severe overcrowding, extreme heat, inadequate food and water, lack of access to health services, and appalling sanitation conditions—with several hundred people generally held in cells with one toilet.

In detention, those with chronic illnesses reported being denied access to their medication and food that fit their dietary needs, thus increasing their vulnerability and susceptibility to COVID-19 – a virus that disproportionately affects older people. Older unvaccinated adults are more likely to be hospitalized or die from COVID-19 ([CDC](#) 02/09/2021)

LAND MINES, IEDS, AND UXOS HAVE REMAINED A MAJOR ISSUE THROUGHOUT THE PANDEMIC

The Mines Advisory Group reports that over 1,000 people have been killed or injured by a recorded 697 mines and UXOs accidents in the Northeast since 2016. They believe the casualty figures are underreported and the actual number could be higher. For example, between October and November 2020, at least 75 incidents with explosive hazards, predominantly by landmines, were recorded with 43 people killed or injured. At least 14 of those incidents, such as the ones involving civilians picking up UXOs, could have been avoided ([OCHA](#) 04/02/2021, [Mine Advisory Group](#) 14/12/2020).

As it was before the pandemic, the NSAGs continue to use women and children to transport and detonate explosives,

deliberately targeting civilians. In this time, person-borne IEDs were reported to have struck 42 civilians and 10 members of security forces and vigilante groups. In addition, the use of conventional explosive weapons in populated areas continues to put civilians at risk. The Mine Advisory Group in its 2020 report, put Nigeria as one of the top five countries in the world for landmine casualty rates with the crisis hit a peak of one casualty every day for the first 15 weeks of 2020, even with a lockdown in place at the end of that period ([OCHA](#), 08/03/2021, [Mine Advisory Group](#), 14/12/2020).

Displaced people and migrating refugees often move through unfamiliar terrain which puts them at significant risk of entering areas contaminated by landmines and other explosive ordnances. They are also likely to be returning to villages that are contaminated by explosive ordnance which puts them at increased risk and limits the extent to which they can begin rebuilding lives ([Mine Advisory Group](#), 14/12/2020).

The COVID-19 lockdown presented a good opportunity to conduct mine disposal. According to the Mine Advisory Group, the absence of a national mine action authority and the limited explosive ordnance disposal team constrained the ability to undertake mines disposal. The pandemic has also limited the capacity of the organization to deliver mine risk education as such sessions are now held in much smaller groups. Movement restrictions meant Explosive Ordnance Risk Education (EORE) operations outside the capital had to be suspended ([UNHCR](#) 04/05/2021).

LONG-TERM IMPACT ON CHILDREN'S DEVELOPMENT, WITH SCHOOL DROPOUT LIKELY AND AN INCREASED RISK OF FORCED ENROLMENT INTO NSAGS

The COVID-19 pandemic has further weakened coping capacities for families to provide and care for children; poor households in northeast Nigeria have reduced purchasing power and face greater difficulty in meeting their basic needs. Limited access to food, quality education, healthcare and lack of adequate parental care, particularly for children with disabilities, continues to significantly affect the physical, mental, emotional and social well-being of children.

The long-term closure of schools will have had a permanent impact on the lives and futures of many children, especially girls. Girls especially face a heightened risk of never returning to school as they are forced to transition into household responsibilities more quickly than if schools had

not been closed. For others the difficulty in catching up with lost learning, along with the poor educational services in the BAY states (characterized by unqualified teachers and overcrowded classrooms) will lead to their dropping out. This will leave many children and youth without any access to opportunities to develop foundational literacy and numeracy skills or access to meaningful employment opportunities ([UN OCHA](#) 08/03/2021, [UN OCHA](#) 16/03/2021).

Children have always faced a high risk of forced recruitment by NSAGs during the conflict. They have been conscripted into a broad spectrum of roles by the various armed groups, including serving as spies and suicide bombers. It is believed that the closure of schools put children, especially boys between the ages of 13-17, at particular risk. In 2019, before the outbreak of the pandemic, it was estimated that at least 10,000 children had been recruited, abducted, held by the various armed groups or been victims of violent attacks. Those who manage to escape conscription are at risk of being arbitrarily arrested or detained by the government forces on suspicion of being affiliated with NSAGs ([UN OCHA](#) 01/12/2020, [UN OCHA](#) 01/02/2019).

PROTECTION RISKS REMAIN WIDESPREAD AND INTRINSIC TO THE CRISIS IN NORTHEAST NIGERIA WITH THE LONGER TERM IMPACT OF THE COVID-19 PANDEMIC BEING AN ADDITIONAL CONTRIBUTING FACTOR

Nigeria experienced a rise in domestic and intimate partner violence during the lockdown when it was imposed to prevent the spread of COVID-19 (a situation mirrored in many other countries). However, the longer term impact has been economic, with an estimated 7 million people across the country now living in poverty compared to before the pandemic. As well as increasing tensions within the household, loss of income is leading many families to rely on negative coping mechanisms to survive including missing meals, selling of assets and transactional sex ([UN OCHA](#) 16/03/2021).

In addition the stigma of COVID has brought yet another way in which individuals and households can be marginalized with communities. It can also lead to the separation of parents and children due to hospitalization and isolation protocols.

For children the effects of the pandemic have been severe. Most of those affected by school closures were unable to access distance learning opportunities and have lost close to a year of schooling with its associated impact

on their development. The psychosocial impact has also been significant, with children unable to access the support normally associated with attending school and many forced into begging, hawking, other forms of child labor including domestic servitude. Girls are especially impacted and more at risk of child marriage and SGBV. The impact of the pandemic is on top of the continued effects of the conflict, which includes separation brought on by displacement. Five percent of households interviewed in the MSNA indicated that their children are missing or were not living in the household at the time of the assessment ([UN OCHA 16/03/2021](#), [UN OCHA 08/03/2021](#)).

The crisis in the BAY states continues to be predominantly a protection crisis characterized by grave violations of

8. Education

EDUCATION SECTOR ALREADY UNDER RESOURCED AND POORLY PERFORMING BEFORE COVID-19 PANDEMIC

Before the pandemic, it was estimated that about 20% of the world's out-of-school children lived in Nigeria. According to UNICEF, "about 10.5 million of the country's children aged 5-14 years were not in school. Only 61% of 6-11-year-olds regularly attended primary school; only 35% of children aged 36-59 months received early childhood education" ([UNICEF accessed 05/11/2020](#)). In the northeast, education has been severely affected by the insurgency with schools, teachers and students targets for attack. UNICEF reported that at least 1,000 children have been abducted by the Boko Haram insurgent group since 2013, and at least 2,295 teachers have been killed and more than 1,400 schools have been destroyed ([UNICEF 13/04/2018](#)).

2020 began with around 935 schools closed and over 1.4 million girls and nearly 1.3 million boys out of school and facing an uncertain future without education (well over 50% of the approximately 4.2 million school aged children in the BAY states). Children faced many barriers to accessing schools. Approximately 25% of schools surveyed in the 2019 [JENA](#) report were unable to enroll children in the 2018-2019 school year, typically due either to overcrowding or refusing to enroll children unable to pay for school levies or uniforms. Economic issues were the main reason for families not enrolling children and included lack of money to pay fees and levies, being unable to afford uniforms or learning materials or the need for children to support the family through earning income. Cultural attitudes (including early marriage) also had an impact on girls' enrolment, particularly at secondary school level. Distance to school and insecurity were also mentioned as barriers to attendance alongside

human rights and dignity. Protection concerns including killings and maiming, sexual violence and abuse, arbitrary arrests and detention without access to justice and legal services, physical safety and security, forced recruitment, abductions forced marriages and forced displacement remain a major concern for the physical and mental wellbeing of IDPs, returnees and host communities in the northeast. The COVID-19 pandemic has contributed to a worsening of this situation though driving a deterioration in ability in poorer family's ability to cope and impacting negatively on the ability of protection actors to provide key services ([UN OCHA 16/03/2021](#), [UN OCHA 08/03/2021](#), [UN OCHA 01/04/2020](#)).

poor facilities in schools such as a lack of WASH facilities and poor school structures ([UN OCHA 01/04/2020](#), [EiEWG 06/12/2019](#)).

Even where displaced children have enrolled in school, issues remain. Class sizes can be far larger than the recommended standard student-teacher ratio of 1:35. Teachers are habitually absent, often due to insecurity, low or delayed pay. Even when teaching occurs, children often described the lessons as rarely going beyond the ABCs and basic numbers. The overall poor quality of the education reinforces some parents' decision to instead have children help with work or attend Quranic schools, despite these institutions also not providing an adequate level of education as required under international law ([Amnesty International 27/05/2020](#), [EiEWG 27/09/2018](#), [Gov Nigeria 2010](#)).

Schools typically lack qualified personnel and equipment. Less than a quarter of children have sufficient learning materials and less than a third of schools reported having adequate furniture (chairs, desks, mats). Less than half of schools (39%) reported having all or almost all of their teachers with the minimum level of teaching qualification. Whereas a quarter of schools (24%) reported having half or less of their teacher workforce as having the minimum required teaching qualification. Overall over a quarter of the teaching workforce are volunteers ([EiEWG 06/12/2019](#)).

Of particular concern is the provision of education in IDP camps. In all IDPs camps, Education in Emergency (EiE) response is inadequate with huge gaps due to lack of funds and the limited capacity of host schools. Also of concern is education provision in H2R areas. These areas are not accessible to the humanitarian community and government schools in such areas are closed. Finally for children who have missed out on education, bridging programs for out-

of-school children (OOSC) to transit to a formal system are few and inadequate ([UN OCHA 01/04/2020](#)).

SCHOOLS CLOSED FOR SIX MONTHS AS PART OF COVID-19 CONTAINMENT MEASURES

One of the clearest impacts of COVID-19 containment measures was the country wide closure of education establishments. On March 19th, 2020, a circular from the Federal Ministry of Education granted an approval for the closure of all schools for a period of one (1) month commencing from Monday 23rd March 2020 to prevent the spread of the COVID-19. Each state contextualized this circular and in Borno State, on 20th March 2020 schools in IDP camps were also directed to close in one week. Although initially intended as a short term measure, schools would not officially reopen again until October ([UNICEF 07/04/2020](#), [Nairametrics 20/03/2021](#)).

The closure of schools affected 4.2 million students in BAY States, including around 400,000 IDP children attending some form of learning in the camps and host communities. Other activities including the distribution of learning materials and provision of temporary learning spaces were also put on hold ([UNICEF 07/04/2020](#)).

ALTERNATIVE LEARNING OPPORTUNITIES NOT ACCESSIBLE TO ALL

In early April, following the decision to close schools the Education in Emergencies working group published a COVID-19 Response Strategy outlining key actions for the sector. Included was the key strategic objective to “mitigate/minimize the impact of school closure due to COVID-19 on learning and wellbeing of learners, teachers, parents and SBMC through alternative solutions”. The strategy outlined the need for the provision of learning materials designed for learning outside of school/at home, the development of radio teaching programs, provision of solar radios, development of alternative education options through applications using smart phones, tablets, or laptops and other activities. All to try and keep education continuity for all those students no longer in school due to COVID-19 ([UNICEF 07/04/2020](#)).

Despite these efforts there remained many barriers that prevented children from continuing their education. Access and take-up of alternative education required both the materials and equipment (Radio, TV or internet device, sufficient signal, batteries or electricity etc. along with learning materials). In addition, the household needs to know when the programs are available and ensure the student

has access to those programs; the programs must also be in a language the student can understand.

A series of assessments conducted with IDPs residing in host communities examined the awareness of, and access to, alternative education opportunities. In Maiduguri, out of 72 settlements assessed, radio lessons were cited as an alternative education option 17 times, followed by Tutoring (6), Home schooling (5), Islamiya (4) and TV lessons (3). In neighbouring Jere, of 60 settlements assessed the use of radio lessons was even more prevalent, cited in 23 settlements, followed by homeschooling (4), Tutoring (3), and TV lessons (2). However outside of the state capital and its environs, alternative education was hardly mentioned. Only one settlement in Damboa (out of 17) flagged any alternative education options - home schooling. Alternative education options were mentioned in any of the other settlements surveyed in Damboa LGA, nor in any of the 14 settlements assessed across Monguno or Gwoza LGAs.

Several reasons probably contributed to the poor uptake in Monguno and Gwoza including a lack of awareness, lack of equipment or poor signal (radio/tv/internet), and the need for children to undertake other activities such as hawking, begging or household chores. In every assessment in Maiduguri and for 3 out of the 4 in Jere, education was one of the top 3 priority interventions chosen by households. This was also the case in Damboa. This would indicate that parents and caregivers felt further support was required. However, education did not make the top 3 priorities in Gwoza or even the top 6 in Monguno. This lack of prioritisation in Monguno and Gwoza indicates that families had other more urgent needs such as food and shelter. Also in Monguno a [2017 assessment](#) found the standard of education provision was particularly poor with schools being staffed only by volunteers and open for a few hours each day ([REACH 02/11/2020](#), [REACH 08/10/2020](#), [REACH 08/10/2020](#), [REACH 08/10/2020](#), [REACH 20/10/2020](#), [REACH 20/10/2020](#), [REACH 21/10/2020](#), [REACH 21/10/2020](#), [REACH 22/10/2020](#), [REACH 26/10/2020](#), [REACH 28/10/2020](#), [EiEWG 27/09/2018](#)).

Lack of access to distance learning during school closure was further corroborated by a Plan International assessment covering 14 LGAs in Borno, Adamawa and Yobe. Only 4 LGAs (Askira-Uba, Bama, Dikwa and Gwoza) cited students accessing radio learning with KI's from 2 LGAs (Dikwa and Madagali) attesting students accessed online learning. In the other 9 LGAs KI's reported that alternative learning was either unavailable or not accessed. Focus group discussions conducted by Save the Children in Borno state indicated that children were not provided with any learning support during school closure. Additionally, school-aged children who were out of school supported their parents to earn income; boys typically assisting their fathers in agricultural activities or in casual labour while girls supported their mothers with

household chores. ([Plan International](#) 07/01/2021, [Save the Children](#) 31/12/2020).

Over the 6 months that schools were closed it is therefore likely that many of the children forced out of school by COVID-19 closures (particularly the poorest and most vulnerable ones) were unable to meaningfully engage in alternative learning. A global study found that nearly 8 in 10 (77%) parents or caregivers believed that their children learned little or nothing since schools closed. It is often the most vulnerable pupils for whom the conditions for ensuring continuity of learning at home are limited. Their presence at home can also complicate the economic situation of parents, who must find solutions to provide care or compensate for the loss of school meals ([Save the Children](#) 10/09/2021, [UN](#) 09/2020).

With children out of school for many months, the risks of exploitation and abuse are increased. They face a higher risk of being involved in child labor, suffering neglect, sexual abuse and teenage pregnancies. Further analysis of how protection issues for children have increased during the pandemic are found in the [protection section](#) of this report ([OCHA](#) 13/08/2020).

EVEN WHERE SCHOOLS OPENED CHILDREN FACED MANY BARRIERS TO ACCESSING EDUCATION

Prior to the pandemic, the 2019 [JENA](#) report identified economic issues as the main barrier to children enrolling in school, with overcrowding also cited as a significant barrier. With the heavy impact of COVID-19 containment measures on household incomes in the BAY states, this has only exacerbated the difficulties faced by households in finding funds for school fees/levies, uniforms and learning materials. In addition, girls face a cultural barrier with families more likely to prioritize boys as opposed to girls who will leave to another family when married ([EiEWG](#) 06/12/2019).

According to data from the [2020 ENA](#), the median monthly household expenditure on education was zero Naira, in other words half or more of all households surveyed spent nothing on education in the month prior to data collection. Reducing expenditure on health and education was a crisis coping strategy reported by 15% of households. However, low expenditure or low attendance/enrolment figures do not necessarily imply that education is not a priority. When asked to identify their top 3 priority needs for the household, more than 10% of households identified education (sometimes ahead of shelter or food assistance) in 7 out of 17 assessed LGAs in Yobe, 7 LGAs out of 21 in Adamawa and over a quarter of LGAs (6 from 23) in Borno. In Mobbar and Tarmuwa LGAs, households prioritized education more than water, shelter

or livelihoods ([WFP](#) 19/02/2021, [EiEWG](#) 06/12/2019).

An assessment by Save the Children conducted in November 2020 covered 6 LGAs in Borno state and found major barriers to education. These included households not being able to pay school fees or afford the school uniform or appropriate clothing, other economic factors such as the children were hawking/begging or needed to help with harvest/planting. In some areas the distance to the nearest school was cited as a major barrier, with the poor quality of education and lack of teachers also mentioned. For girls specifically, insecurity on the way to school, early marriage, and inability to pay school fees, resistance to formal education, non-functional schools, and displacement were the major barriers identified. It was highlighted that many girls had been out of school for too long to return, and the prolonged absence due to COVID-19 may have led to further dropouts. Lastly some schools were non-functional or occupied by IDPs rendering them unusable ([Save the Children](#) 31/12/2020).

Data from an assessment carried by [Plan International](#) in December 2021 covered 14 LGAs in the BAY states. Results indicated large numbers of children were not attending school, with 60% of the 201 households consulted stating that “there are many children and/or adolescents not in school”, compared with 33% who disagreed with the statement (the other 7% did not know). The answers varied greatly between LGAs with all 20 households in Hong, 21 out of 27 households in Damboa, 17/19 in Ngala and 10/11 citing many children/adolescents were out of school. However, in Bama and Madagali none of the assessed households thought that many children were not in school, and less than a quarter of households identified the issue in Dikwa and Gwoza .

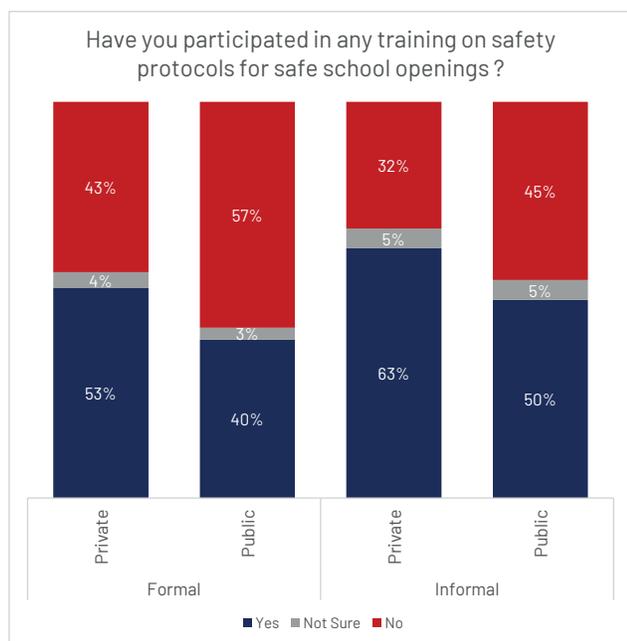
Interestingly, when discussing their own children, most of the education KI informants indicated their own children were enrolled in school. KI's included representatives from IDPs, returnees and members of the host community. In 5 LGAs assessed all KIs indicated their children were in school. This included Hong LGA even though all household KIs had indicated large numbers of children were not in school. However, in Dikwa and Mubi-south, 50% of parents indicated their children were not enrolled, and out of school numbers were also high in Monguno (37%), Ngala (25%) and Bade (22%).

As to why children did not enroll in school, the main reasons for both boys and girls included: helping at home, overcrowded classrooms, fear of violence, security concerns and a lack of proper WASH facilities/lack of sex segregated toilet facilities. Other reasons cited included the distance to school, harassment/bullying, the language of curriculum and the quality of teaching. The report also highlighted the dire state of repair of much of the infrastructure characterized by old dilapidated structures with some schools lacking any

functional WASH facilities and students forced to practice open defecation ([Plan International](#) 07/01/2021).

ACROSS NIGERIA MOST SCHOOLS WERE PREPARED IN LINE WITH COVID-19 REGULATIONS FOR REOPENING IN JANUARY

Figure 8. School preparedness on safety training for safe school reopenings.



Source: ([NCDC](#) 04/05/2021).

With the Federal Government’s directive that all schools in the country be opened on 21 January 2021, following the second wave of the virus, many schools were quick to reopen. Others, particularly in the northeast, stalled as they struggled to meet the guidelines stipulated by the government. A [nationwide survey](#) was conducted in March 2021 to ascertain how well schools were able to implement COVID-19 precautions, whether schools were recording cases of COVID-19 and to what extent the pandemic had impacted school enrolment ([NCDC](#) 04/05/2021).

To ensure schools are well informed about the safety protocols, the government conducted training programs on safe school reopening across all school levels in both the formal and non-formal education system. However, only around 50% of those who responded reported that they participated with public schools lagging behind private schools in terms of participation (see Fig 8). Many schools conducted awareness and sensitization programs on

COVID-19, with 70% of respondents in formal and 67% in non-formal reporting that they were aware of the programs conducted in their schools.

Non-formal (57%) schools appeared to have done more to encourage their students back to school and increase their enrolment numbers through back-to-school campaigns conducted within communities, as opposed to only 42% of formal schools ([NCDC](#) 04/05/2021).

On the evidence provided it appears that schools were, to a very large extent, adequately prepared to reopen. Private schools in both formal and non-formal systems performed better than their public counterparts on various indicators including increase in enrolment, familiarity and compliance with the stipulated protocols, and having a functional health team on ground. Perhaps unsurprisingly, more private schools (both formal and non-formal) reported having the resources to provide psychosocial support (PSS) for students and teachers (55% private formal schools and just over 60% of private non-formal schools). Availability was lower in public schools running at around 40% for public formal schooling and 50% for public non-formal schools. This is a significant gap as research shows a broad range of psychological impacts on people at various levels and the need for interventions to improve social capital, resilience, and coping resources/strategies, and good community and family relationships ([NCDC](#) 04/05/2021, [Aluh and Onu](#) 2020).

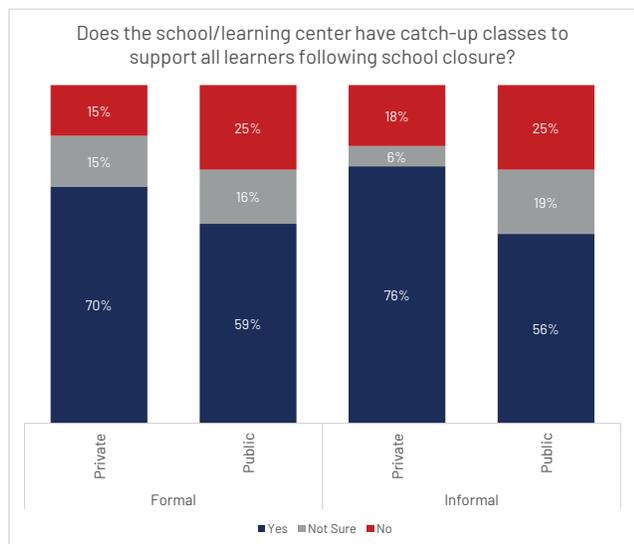
However, there are efforts by both the education sector and child protection sub-sector to provide PSS in the BAY states. Therefore, it may be for once that the northeast had more capacity (in this area) than across much of Nigeria ([UNICEF](#) 20/06/2020).

ATTEMPTS MADE TO MAKE UP LOST TIME BUT SUCCESS QUESTIONABLE

With formal schools that complied with the Federal Government’s directive preparing to round up the third term since resuming in January, schools needed to support students to catch up with classes missed during the lockdown. Many schools organized catch-up classes in the form of online programs and 2-4 weeks crash courses to help learners cover the lost academic year. Seventy per cent of respondents in formal schools and 73% in non-formal schools reported having such arrangements. It is not clear for how long such classes were available and how effective they were for the purpose given that schools were closed over a period of 6 – 9 months. In terms of the northeast both Adamawa and Yobe had catch-up classes roughly in line with the national average, but in Borno state only 47% of respondents were sure that catch-up classes were taking place (see Fig 9) ([NCDC](#) 04/05/2021).

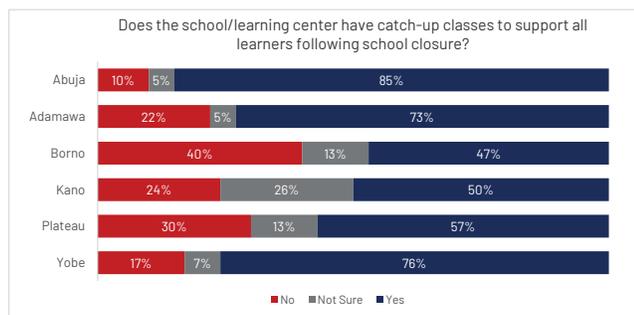
Respondents indicated an interest in continuing education programs amidst the second wave. More than half expressed satisfaction with the timing of the school closure and resumption directives while pointing at the shift learning method as the best format for school continuity. There was no information indicating that the government instituted the shift system, however ([NCDC 04/05/2021](#)).

Figure 9. Percentage of schools that conducted catch-up classes for students



Source: ([NCDC 04/05/2021](#))

Figure 10. Percentage of schools that conducted catch-up classes for students in selected Nigerian states.

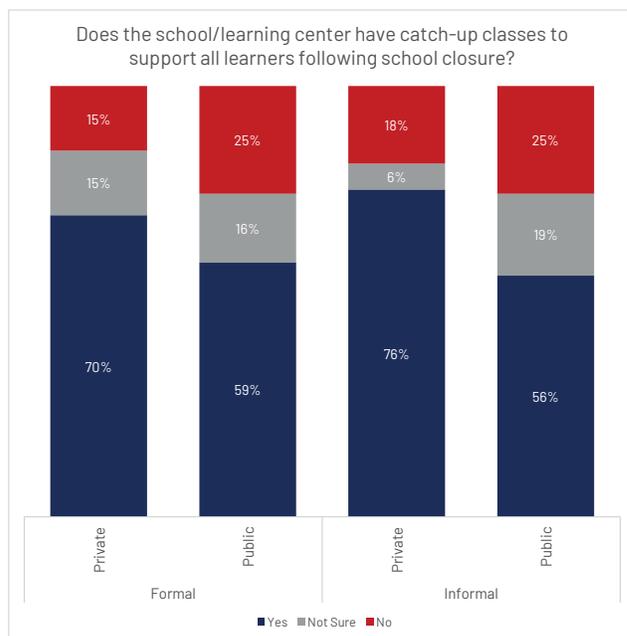


Source: ([NCDC 04/05/2021](#))

INITIAL ADHERENCE TO THE GOVERNMENTS COVID-19 PREVENTION GUIDELINES IS WIDESPREAD BUT WITH SOME GAPS

Despite the low participation in the safe school reopening training program conducted, most respondents agreed that they were familiar with the NCDC protocols for safe school re-opening across various states and cities. Many respondents report that their schools have been able to adhere to the stipulated protocols, with those in the formal system agree that their schools keep a social distance of at least one meter in the school office (76%), classroom (77%), playground (59%), hostel (61%), dining hall (62%) and assembly ground (74%). Also, 64% of formal schools reported that their schools monitor the temperature regularly while 61% reported that there was a holding sickbay. Public schools again performed worse than private schools with, for example, only 53% of public (formal) learning centres reporting the presence of a sick bay compared to 68% of private (formal) learning centres (see Fig 11) ([NCDC 04/05/2021](#)).

Figure 11. Percentage of schools with holding/sick bay for sick persons



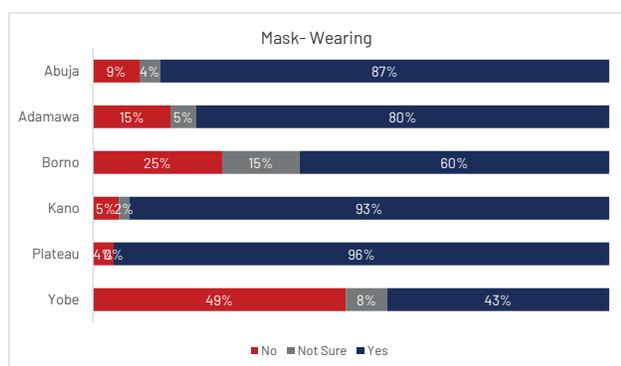
Source: ([NCDC 04/05/2021](#))

Compliance in the non-formal space also appeared high, with stakeholders agreeing that their schools observe social distancing in the school office (79%), classroom (80%), playground (65%), hostel (67%), dining hall (69%)

and assembly ground (74%). More non-formal (69%) than formal schools (64%) reported their schools and learning centers check temperatures and an equal number of non-formal and formal said they have sick bays for sick persons.

Other preventive measures put in place and reportedly followed include education personnel, learners and visitors always wear face masks in the classrooms, learners washing their hands with soap under running water before entering the classroom, and the pasting of safety protocol posters in every classroom and learning centers. Compliance with these measures appears high for both the formal and non-formal systems, although the non-formal schools reportedly did better. In the north east Yobe ranked amongst the lowest states for compliance with protocols such as mask wearing where only 43% of respondents were sure this took place at schools in the state compared with 60% for Borno and 80% for Adamawa (see Fig 12) (NCDC 04/05/2021).

Figure 12. Mask wearing compliance among schools in selected Nigerian states



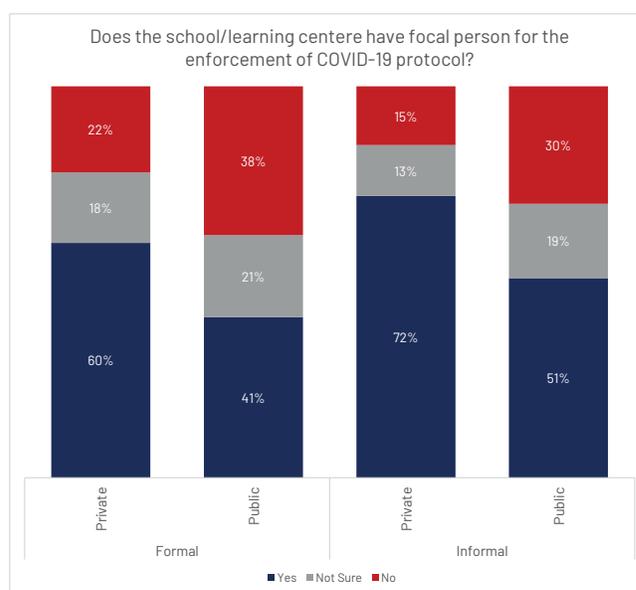
Source: (NCDC 04/05/2021)

Many schools, both in the formal and non-formal systems also reported that they stopped activities that required gathering such as morning assemblies and some playground games. This approach appears to have been effective as only 31% of respondents in formal schools and 38% in informal schools reported that some persons still shake hands and hug in their school.

In both formal and non-formal schools, those, like the majority of schools in Yobe State, who reported being unable to comply with the guidelines mostly attributed it to the lack of facilities, overcrowding, misconception, and ignorance about the virus and space to allow for distancing. With the dwindling number of cases being reported around the country, many schools appeared to have begun to relax their adherence to the guidelines. This is compounded by the absence of functional health teams to enforce and

monitor adherence as only 47% of formal schools and 53% of non-formal schools reported the presence of a functional enforcement team. Of those who said their schools did not have a monitoring team, only 51% of formal schools and 60% of non-formal schools had an alternative monitoring system in the form of a focal person. Schools also reported great difficulties continually enforcing the protocols, especially with younger children as most of their play and learning activities are in groups. Many schools lacked health teams of even a focal person to oversee the enforcement of COVID-19 protocols with formal public learning centres continuing to perform worst (see Fig 13) (NCDC 04/05/2021).

Figure 13. Percentages of schools/learning centre with COVID-19 Compliance officers



Source: (NCDC 04/05/2021)

FEW CASES OF COVID-19 WERE REPORTED IN SCHOOLS WITH NONE IN THE BAY STATES

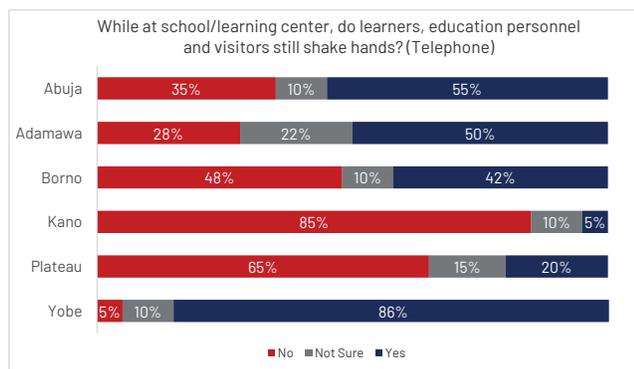
Despite many schools relaxing their adherence to the protocols, the majority (68%) of formal school and nonformal (63%) reported no COVID-19 cases in their school. None of the BAY states had recorded a positive case in their schools at the time of the survey. Despite the stigma associated with the virus and its mode of transmission, a high number of learners and education personnel (76% of formal schools and 73% for non-formal) asserted that persons who have recovered from COVID-19 should be welcomed back to the school. As detailed in the [iMMAP report](#) (covering the humanitarian operational context during the pandemic) testing rates were low in the northeast

and there was a reluctance amongst the population to get tested, both factors which contributed to the lack of cases identified. In addition children with COVID-19 are more likely to be asymptomatic so this could be another reason for fewer cases to be recorded ([iMMAP 24/09/2021](#), ([NCDC 04/05/2021](#)).

BAY STATES PERFORMED POORLY IN COMPARISON TO THE NATIONAL AVERAGE

Yobe was the worst state amongst those surveyed for familiarity with NCDC protocols, with over 50% of respondents answering “no” or “not sure” to questions around knowledge of the NCDC protocols. Borno and Adamawa were roughly in line with the national average where 86% of respondents indicated familiarity with the protocols, despite more respondents in Adamawa reporting not participating in any training on the subject. Yobe State also performed poorly in terms of adherence to the protocols, which is not surprising, due to the low level of knowledge and familiarity (e.g. adherence to the use of face masks, social distancing in classrooms and on playgrounds, physical contact in terms of hugging, the conduct of sensitization campaigns, etc) ([NCDC 04/05/2021](#)).

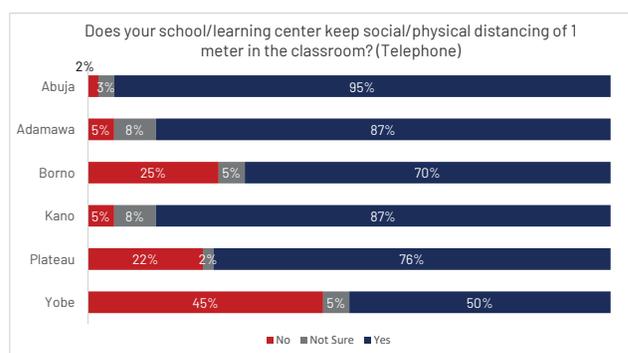
Figure 14. Rate of compliance with COVID-19 guidelines among schools in selected Nigerian states (Handshaking)



Source: ([NCDC 04/05/2021](#))

The majority of the parents/guardians interviewed by telephone in Yobe and Borno states had their children/wards in public schools, as against those in Adamawa State, majority of whom attended private schools. This helps give an important insight into the public/private school management of the virus. With private schools performing better in terms of protocol awareness and implementation it is likely this is a contributing factor to Adamawa performing better in terms of compliance with protocols, although for certain actions (shaking of hands for example) Borno also performed well (see Fig 14). In general Yobe was one of the poorest performing states across the country in most categories of protocol awareness and implementation, although there were a few exceptions.

Figure 15. Rate of compliance with COVID-19 guidelines among schools in selected Nigerian states (Social Distancing)

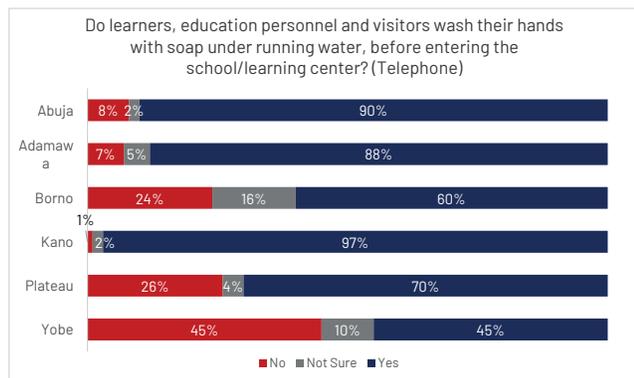


Source: ([NCDC 04/05/2021](#))

Yobe was also the fourth worst state in terms of keeping social-distancing in the classroom (approximately 45% of respondents answered no to this question). Adamawa appears to have outperformed the rest of the country in this regard (<5% reporting a failure to social distance), only surpassed by Abuja and Jigawa. Borno was at the lower end of the scale, with approximately 25% of respondents indicating social distancing was not observed in the classroom (see Fig 15) ([NCDC 04/05/2021](#)).

Hand washing was also a major gap, in part probably due to the [WASH issues prevalent across the crisis](#). Nearly half the respondents reported a lack of hand washing in Yobe, and a quarter reported a similar issue in Borno (see Fig 16) ([NCDC 04/05/2021](#)).

Figure 16. Rate of compliance with COVID-19 guidelines among schools in selected Nigerian states (Hand washing)



Source: (NCDC 04/05/2021)

While a decrease in school enrolment was reported nationwide, the situation appears to have been worse in Adamawa with approximately 70% of respondents indicating a decrease in enrolment. For Yobe and Borno a little over 30% of respondents reported a decrease in enrolment. This may have been made worse by the fact that back to school campaigns were either not conducted or not widespread in the three states, as with 20 other states assessed by the survey. It is possible that the economic impact may have hit private school enrolment harder, but the data is not available to make any conclusive judgement. Beyond the lack of provision for vaccination of teachers and students in schools, there are mixed feelings about the effectiveness of the COVID-19 vaccine, as many respondents in 16 states, including the BAY states, are not convinced that the schools/learning centers will be safer after vaccination (NCDC 04/05/2021).

THROUGHOUT THE PANDEMIC ACCESS TO EDUCATION IN HARD-TO-REACH AREAS REMAINED EXTREMELY LOW

Throughout the pandemic, data from H2R areas (mostly via REACH assessments) has shown very limited availability of education services. Poor availability was expected during the first six months of the pandemic as schools across the country were closed in line with COVID-19 containment measures. This was reflected in data from December 2020 where 42% of assessed settlements across 14 LGAs in Borno and Adamawa reported a lack of access to educational services. Some of the worst affected LGAs were in southern Borno/northern Adamawa. Michika, Askira/Uba and Damboa less than 40% of settlements reported access to education services, the same for Abadam in the far north. The main reason cited was “Never had education facilities nearby”

by 62% of settlements which reported a lack of education services. Other reasons included “No teachers” (12%), “Schools not allowed” (11%) and “Destroyed by conflict” (10%). The type of education available was not included in the assessment, although it was reported that in 18% of settlements who reported having education facilities, less than 1 in 5 (18%) reported that at least one child was attending formal schooling. It is clear therefore that the majority of educational services on offer are informal education or Islamic schools (REACH 09/03/2021).

By April 2021 the situation had deteriorated even further. None of the settlements in the 3 LGAs of Madagali, Michika, and Askira/Uba reported access to education, and overall 56% of assessed settlements across 15 LGAs reported a lack of access to education services (see Table 1). Quite strikingly none of the settlements with access to education reported children attending formal education, meaning the only education services available to children in H2R areas are Islamic education or informal services. The reasons cited remained roughly the same. It is likely the increase in conflict during the drier months, plus the continuing economic struggles are leading to more children either being unable to travel to formal schools or being required to help source food or help with economic activities such as farming or hawking (REACH 11/06/2021).

Table 1: Proportion of assessed settlements where it was reported that people had access to education services

0%	1-20%	21-40%	41-60%	61-80%	81-100%
Askira/Uba		Damboa	Bama	Dikwa	Gwoza
Madagali		Guzamala	Marte	Kala/Balge	Jere
Michika		Kukawa	Ngala	Magumeri	Mafa

(Source : REACH 11/06/2021)

EDUCATION ACCESS FOR IDPS IN THE BAY STATES

The situation in May 2021 (based on DTM round 37 data) shows that for IDPs in most camps/camp-like settings many children in IDP camps are not attending school (Table 1). Economic issues have generally been cited as the biggest barrier to school attendance so the economic impact of COVID-19 is probably a contributing factor (JENA 11/12/2019).

Most camps are situated in Borno state, where 71% of sites reported 50% or less of the children attending school. The picture was similar in Adamawa (66%) but significantly worse in Yobe (100%) (DTM 10/08/2021).

Table 2: Percentage of IDP children attending school in camp/camp-like settings by site May 2021

	None	< 25%	25 - 50%	51 - 75%	>75%
Adamawa	4%	38%	24%	17%	17%
Borno	1%	18%	52%	28%	1%
Yobe	5%	52%	43%	0%	0%

Note covers 295 sites covering Borno (245), Adamawa (29), and Yobe (21)

Source ([DTM 10/08/2021](#))

For host communities (Table 2), roughly 60% of sites reported 50% of children or less attending school, with Yobe best (55%), followed by Adamawa (60%) and then Borno (62%). In all 3 states, therefore, the situation is better than for camp situations ([DTM 10/08/2021](#)).

Table 3: Percentage of IDP children attending school host community settings by site May 2021

	None	< 25%	25 - 50%	51 - 75%	>75%
Adamawa	4%	21%	35%	33%	7%
Borno	0%	11%	51%	36%	2%
Yobe	2%	11%	42%	26%	19%

Note covers 1,308 sites covering Borno (459), Adamawa (460), and Yobe (389)

Source ([DTM 10/08/2021](#))

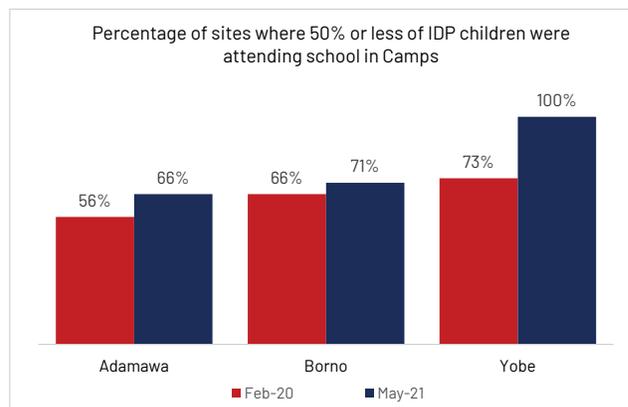
IDPs in host communities are more evenly spread through the three states, although sites in Borno state tend to have larger populations (Borno houses approximately 735,000 IDPs in host communities compared to approximately 190,000 in Adamawa and 140,000 in Yobe) ([DTM 10/08/2021](#)).

COMPARISONS TO PRE-COVID ATTENDANCE

Similar data can be extracted from DTM round 31, where data was collected in February 2020. A comparison of attendance is now relatively lower for IDPs in camps compared to 2020. Borno state (hosting by far the most camp-based IDPs) showed reduced access to education in 5% more sites in May 2021.

Yobe and Adamawa have much smaller camp populations but have shown a much more dramatic increase in the number of sites reporting low education attendance.

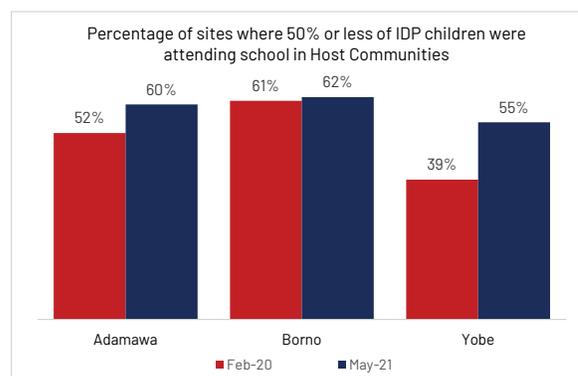
Figure 17. Percentage of sites where 50% or less of IDP children were attending school in camps



Source ([DTM 10/08/2021](#), [DTM 30/04/2020](#))

For IDPs in host communities, the situation also worsened (see Fig 18). This was negligible for Borno (1%), but much worse for Adamawa (8% more sites reporting higher levels of out of school children), and for Yobe 55% of sites now report 50% or less of children in school compared to 39% before the pandemic. These figures show that enrolment has declined compared to pre-covid levels, with Yobe clearly the worst affected state. Large numbers of both camp-based, and host community children are now no longer in schools. For reference data from February 2020 (DTM round 31) is shown in tables 4 and 5 ([DTM 10/08/2021](#), [DTM 30/04/2020](#)).

Figure 18. Percentage of sites where 50% or less of IDP children were attending school in host communities



Source ([DTM 10/08/2021](#), [DTM 30/04/2020](#))

Table 4: Percentage of IDP children attending school in camp/camp-like settings by site February 2020

	None	< 25%	25 - 50%	51 - 75%	>75%
Adamawa	0%	44%	12%	16%	28%
Borno	0%	14%	52%	32%	1%
Yobe	0%	17%	56%	28%	0%

Note covers 271 sites covering Borno (228), Adamawa (25), and Yobe (18)

Source ([DTM 30/04/2020](#))

In 2020, most camps are situated in Borno state, where 66% of sites reported 50% or less of the children attending school. The picture was slightly better in Adamawa(56%) but worse in Yobe(73%)([DTM 30/04/2020](#)).

Table 5: Percentage of IDP children attending school in host community settings by site February 2020

	None	< 25%	25 - 50%	51 - 75%	>75%
Adamawa	1%	20%	31%	37%	10%
Borno	0%	10%	51%	32%	7%
Yobe	0%	5%	34%	50%	10%

Note covers 1,301 sites covering Borno (447), Adamawa (462), and Yobe (392)

Source ([DTM 30/04/2020](#))

IDPs in host communities are more evenly spread through the three states, although sites in Borno State tend to have larger populations (Borno houses approximately 700,000 IDPs in host communities compared to approximately 190,000 in Adamawa and 125,000 in Yobe). Attendance was lowest in Borno where 61% of sites reported 50% or less of the children attending school, in Adamawa the figure was 52%, and for Yobe 39% ([DTM 30/04/2020](#)).

LONG TERM OUTLOOK/SITUATION IN MAY 2021

The overall economic hardship brought on by further conflict and the impact of the COVID-19 pandemic is continuing to drive up the numbers of children out of school. In addition, for those recently displaced, many have difficulty in finding space in nearby schools to enroll their children or may wait until they return home before sending their children back to school as evidenced by reports from displaced families from Geidam and Kanamma ([OCHA 11/06/2021](#)).

DTM data from round 37 (May 2021) cites fees/costs as the main barrier to education in 40% of camp/camp-like settings and 51% of host community sites. COVID-19 is the next largest reason given (by 19% of camps, 14% of HC sites). Other major reasons include lack of teachers, lack of school supplies, and (primarily for HC sites), the need for children to work in the fields. ([DTM 10/08/2021](#)).

According to focus group discussions with (secondary school-aged) girls in Yobe and Borno states, livelihood support to parents would be a key enabling factor to get children into school. Also, they cited hunger as a major barrier, so school feeding could also help with school enrolment. Extra costs such as uniforms or books were also cited as a reason children dropped out of school. Additional free after-school classes were also mentioned as a way of helping children stay in school ([Plan International 24/08/2021](#)).

Conflict and conflict-induced displacement heavily impact the provision of education services in the northeast; for example, two teachers were recently reported killed during attacks in Geidam and Yunusari in May/April. Many teachers in the area were reported as being reluctant to return to school due to security concerns. It is also clear that in H2R areas there is a lack of education service provision with formal education unable to operate in these areas and access to non-formal and Islamic education limited. ([OCHA 15/06/2021](#), [REACH 11/06/2021](#)).

All this underlines the fact that poverty is the main driver of school dropout, with the impact of COVID-19 containment measures added to the ongoing conflict that has inflicted further economic hardship on families, especially IDP families in the northeast. Conflict is also impacting the ability of local authorities to deploy teachers, especially in the more remote locations and there is a lack of school supplies and materials to support education provision. Fear of catching COVID-19 also appears to be a concern keeping families from sending children to school.

9. More about this report

The OFDA COVID-19 support project is currently implemented by IMMAP and DFS (Data Friendly Space) in six countries: DRC, Burkina Faso, Nigeria, Bangladesh, Syria, and Colombia. The project duration is twelve months and aims at strengthening assessment and analysis capacities in countries affected by humanitarian crises and the COVID-19 pandemic. The project's main deliverables are a monthly crisis-level situation analysis, including an analysis of main concerns, unmet needs, and information gaps within and across humanitarian sectors.

The first phase of the project (August–November 2020) is focused on building a comprehensive repository of available secondary data in the DEEP platform, building country networks, and providing a regular analysis of unmet needs and the operational environment within which humanitarian actors operate. As the repository builds up, the analysis provided each month will become more complete and more robust.

Methodology. To guide data collation and analysis, IMMAP and DFS designed a comprehensive Analytical Framework to address specific strategic information needs of UN agencies, INGOs, LNGOs, clusters, and HCTs at the country level. The analytical Framework is essentially a methodological toolbox used by IMMAP/DFS Analysts and Information Management Officers to guide data

collation and analysis during the monthly analysis cycle. The Analytical Framework:

Provides with the entire suite of tools required to develop and derive quality and credible situation analysis;

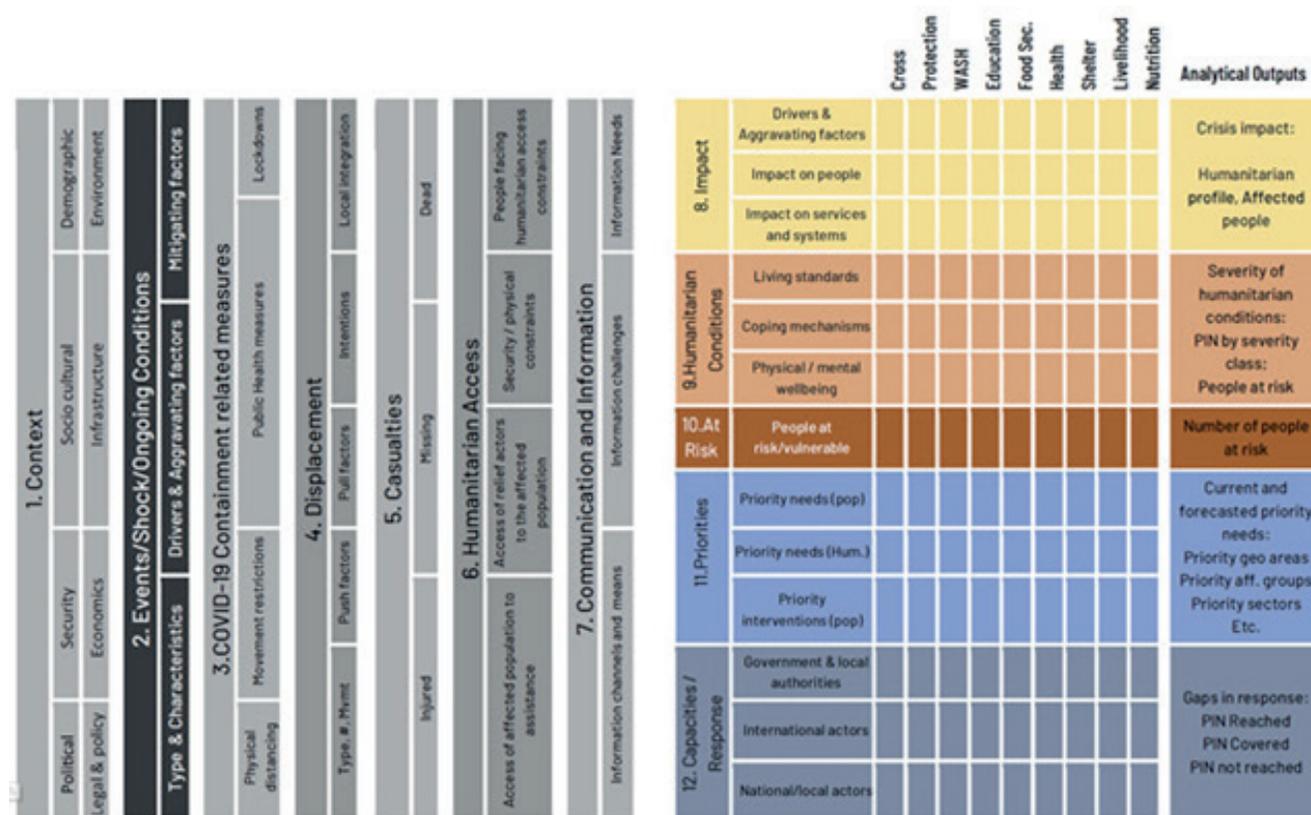
Integrates the best practices and analytical standards developed in recent years for humanitarian analysis;

Offers end-users with an audit trail on the amount of evidence available, how data was processed, and conclusions reached;

The two most important tools used throughout the process are the Secondary Data Analysis Framework (SDAF) and the Analysis Workflow.

The Secondary Data Analysis Framework was designed to be compatible with other needs assessment frameworks currently in use in humanitarian crises (Colombia, Nigeria, Bangladesh, etc.) or developed at the global level (JIAF, GIMAC, MIRA). It focuses on assessing critical dimensions of a humanitarian crisis and facilitates an understanding of both unmet needs, their consequences, and the overall context within which humanitarian needs have developed, and humanitarian actors are intervening. A graphic representation of the SDAF is available in figure 19.

Figure 19. IMMAP/DFS Secondary Data Analysis Framework



On a daily basis, IMMAP/DFS Analysts and Information Management Officers collate and structure available information in the DEEP Platform. Each piece of information is tagged based on the pillars and sub-pillars of the SDAF. In addition, all the captured information receives additional tags, allowing to break down further results based on different categories of interest, as follows:

- Source publisher and author(s) of the information;
- Date of publication/data collection of the information and URL (if available);
- Pillar/sub-pillar of the analysis framework the information belongs to;
- Sector/sub-sectors the information relates to;
- Exact location or geographical area the information refers to;

Affected group the information relates to (based on the country humanitarian profile, e.g. IDPs, returnees, migrants, etc.);

Demographic group the information relates to;

The group with specific needs the information relates to, e.g. female-headed households, people with disabilities, people with chronic diseases, LGBTI, etc;

Reliability rating of the source of information;

Severity rating of humanitarian conditions reported;

Confidentiality level (protected/unprotected)

The DEEP structured and searchable information repository forms the basis of the monthly analysis and for this annual summary report. Details of the information captured for the report are available below (publicly available documents from **01 July 2020 to 31 July 2021** were used).

Figure 20. Documents by Location, Timeline and Primary Categories (Analytical Framework)

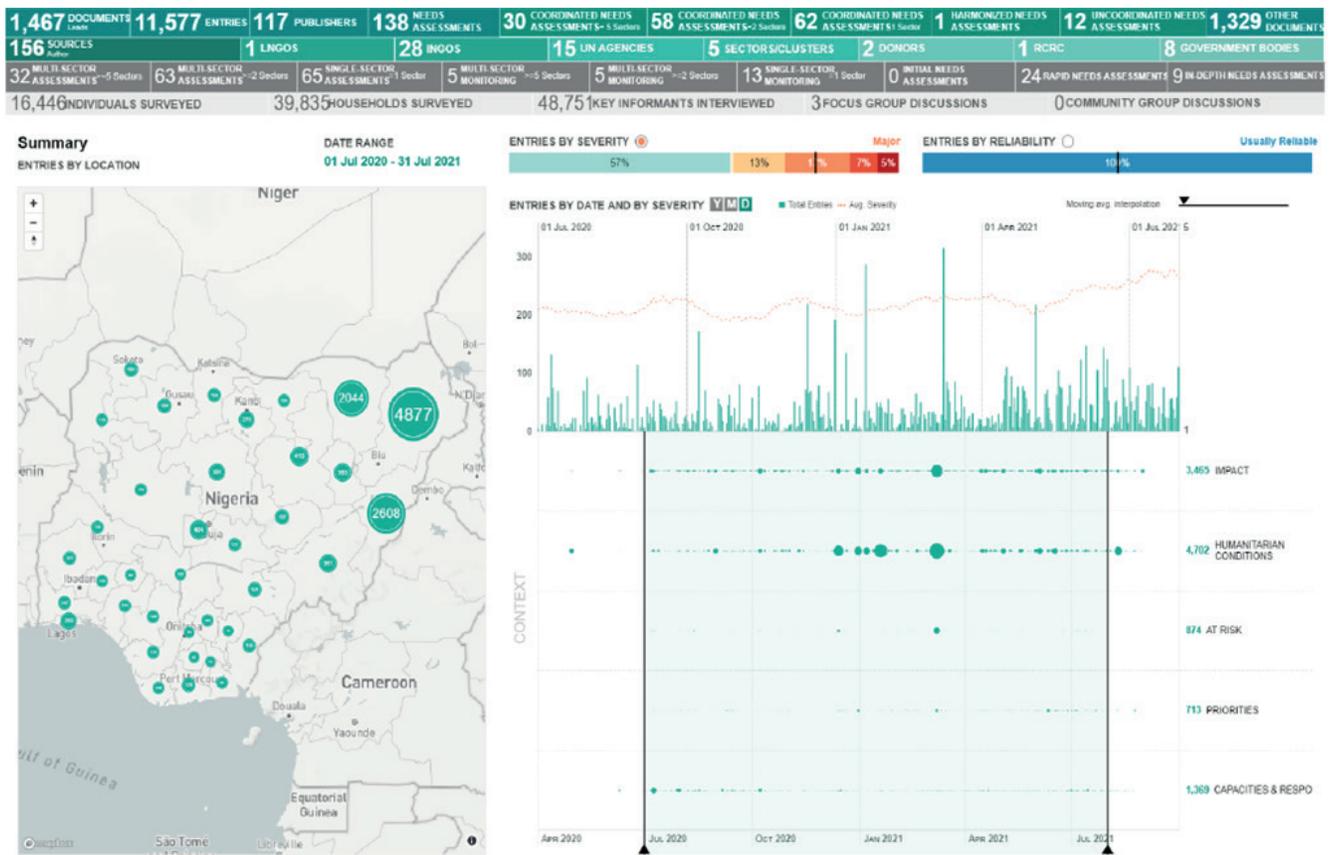


Figure 21. Documents and Entries by Sector and Affected Group

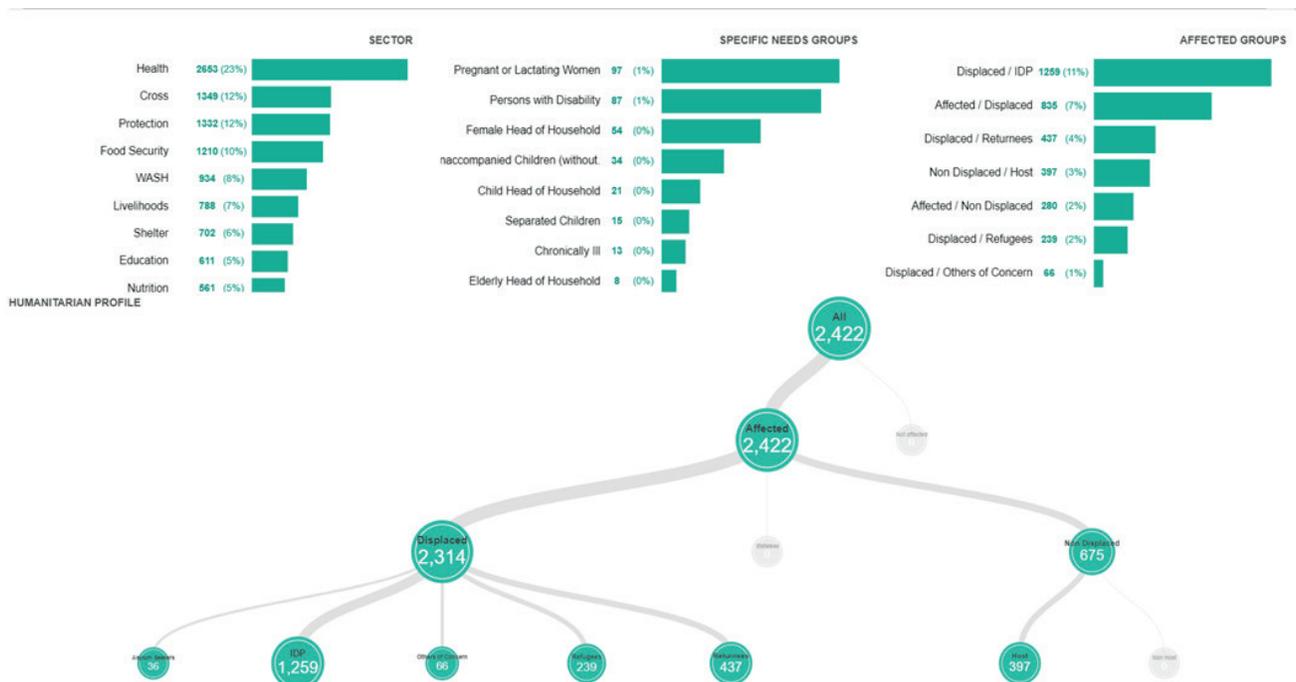


Figure 22. Entries by Sector and sub-Categories of the Analysis Framework

SECTORAL FRAMEWORK	# of Entries	median severity	SECTORAL FRAMEWORK										
			CROSS	FOOD SECURITY LIVELIHOODS	HEALTH	NUTRITION	WASH	SHELTER	EDUCATION	PROTECTION	AGRICULTURE	LOGISTICS	
IMPACTS 3,071	TOTAL 7,745		1,349	1,210	788	2,663	561	934	702	611	1,332	294	237
Drivers/Aggravating Factors	1660												
Impact on People	1129												
Impact on System & Services	1370												
Number of People Affected	143												
HUMANITARIAN CONDITIONS 525													
Living Standards	2209												
Coping Mechanisms	294												
Physical & mental wellbeing	1901												
Number of People in Need	292												
AT RISK 767													
People at risk / Vulnerable	767												
PRIORITIES 5641													
Priority Needs (Pop)	140												
Priority Needs (Staff)	279												
Priority Interventions (Pop)	34												
Priority Interventions (Staff)	192												
CAPACITIES & RESPONSE 811													
Government & Local Authorities	230												
National & Local Actors	156												
International	792												

Analysis Workflow. IMMAP/DFS analysis workflow builds on a series of activities and analytical questions specifically tailored to mitigate the impact and influence of cognitive biases on the quality of the conclusions. The IMMAP/DFS workflow includes 50 steps. As the project is kicking off, it is acknowledged that the implementation of all the steps will be progressive. For this round of analysis, several structured analytical techniques were implemented throughout the process to ensure quality results.

The ACAPS Analysis Canvas was used to design and plan for the September product. The Canvas support Analysts and Information Management Officers in tailoring their analytical approach and products to specific information needs, research questions or information needs.

The Analysis Framework was piloted and definitions and instructions were developed and refined to guide the selection of relevant information as well as the accuracy of the tagging.

An adapted interpretation sheet was designed to process the available information for each SDAF's pillar and sub-pillar in a systematic and transparent way. The Interpretation sheet is a tool designed so IMMAP/DFS analysts can bring all the available evidence on a particular topic together, judge the amount and quality of data available and derive analytical judgments and main findings in a transparent and auditable way.

Information gaps and limitations (either in the data or the analysis) are identified in the process. Strategies are discussed to address those gaps in the next round of analysis.

The analysis workflow is provided overleaf (Table 6).

Table 6: IMMAP/DFS Analysis Workflow

	1. Design & Planning	2. Data collation & collection	3. Exploration & Preparation of Data	4. Analysis & Sense Making	Sharing & Learning
Main activities	Definitions of audience, objectives and scope of the analysis	Identification of 1,467 relevant documents (articles, reports) from 156 sources	Categorization of the available secondary data (11,557 excerpts and 138 needs assessments)	Description (summary of evidence by pillar / sub pillar of the Framework)	Report drafting, charting and mapping
	Key questions to be answered, analysis context, Analysis Framework	Identification of relevant needs assessments	Assessment registry 5 Needs assessment reports)	Explanations (Identification of contributing factors)	Review, editing and graphic design
	Definition of collaboration needs, confidentiality and sharing agreements	Data protection & safety measures, storage	Additional tags	Interpretation (priority setting, uncertainty, analytical writing)	Dissemination and sharing
	Agreement on end product(s), mock up and templates, dissemination of products	Interviews with key stakeholders	Information gaps identification	nformation gaps & limitations	Lessons learnt workshop,
Tools	Analysis Framework Analysis Canvas Data sharing agreements Report template	SDR folder Naming convention	DEEP (SDAF) DEEP (Assessment registry) Coding scheme	Interpretation sheet Black hat	Revised report template Analytical writing guidance Lessons learnt template



THANK YOU.



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