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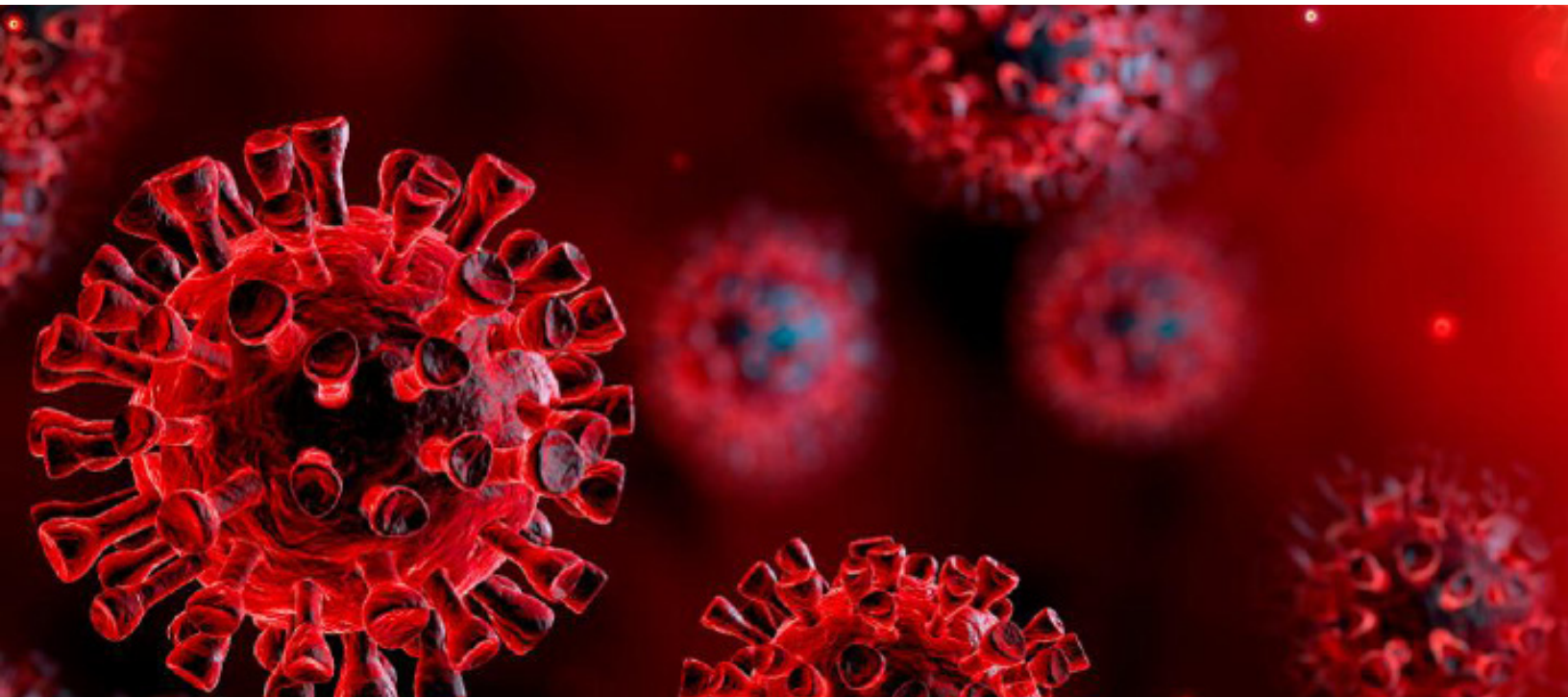


COVID-19 SITUATION ANALYSIS

CRISIS TYPE: EPIDEMIC



FEBRUARY 2021



Better Data | Better Decisions | Better Outcomes

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.

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1. Executive Summary

KEY HIGHLIGHTS

Figure 1. COVID-19 overview in Nigeria

Confirmed Cases	COVID Related Deaths	Tests Conducted
		
155K Total confirmed cases	1.9K Total death recorded	1.6M Test samples collected
24.4K New confirmed cases in February 2021	321 New COVID related deaths in February 2021	224K New Test samples collected in February 2021
+52% Increase compared to January 2020	+96.7% Increase compared to January 2020	+53.2% Increase compared to January 2020

This report utilizes WFP's recently released essential needs analysis (ENA) which provides a comprehensive set of findings across the three BAY states. Although data was collected in October 2020 and the report released in February 2021, the situation must have evolved. However, the increased insecurity after the end of the rainy season allied to poor macroeconomic conditions including high food prices and rising unemployment continue to negatively impact the situation for all population groups in northeast Nigeria.

BAY STATES COVID-19 EPIDEMIC OVERVIEW

The weekly number of new cases in the BAY states has been dropping since the beginning of February whilst at the same time testing has been increased. Therefore, although the monthly total for February is high, the overall trend is now downwards. Borno state accounted for 64 percent of the total new cases in the BAY states during February.

COVID-19 CONTAINMENT MEASURES AND VACCINATIONS

COVID-19 containment measures remain unchanged for the most part and include the mandatory wearing of face masks, encouragement to work from home, temperature checks, ensuring the availability of hand washing facilities and physical distancing at work and avoidance of public

gatherings and non-essential travel. Schools reopened at the end of January, but it is unclear how many are fully functional and to what extent pupils returned. Vaccines have been procured by the Nigerian government with the vaccination program expected to start in March.

SECURITY AND HUMANITARIAN ACCESS

Non-state armed groups continue to be responsible for high levels of insecurity in the northeast. There has been a rise in the mounting of illegal vehicular checkpoints (IVCPs) along the Borno State highways. Several recent attacks have been carried out on farmers and infrastructure such as electricity supply lines. Increased insecurity is also driving up transportation costs and leaving international organizations with difficult choices around whether to utilize armed convoys for the delivery of aid. The context-security section provides an overview of attacks carried out during the last 12 months in which close to four thousand people lost their lives.

HUMANITARIAN NEEDS

It is clear from the ENA that COVID-19 containment measures along with continued insecurity have had a significant impact on livelihoods and income generating activities in northeast Nigeria. Loss of income has increased the number of households relying on the most severe food and livelihood coping mechanisms with households neglecting their other needs in order to put food on the table. 43.7 percent of households fell under poor or borderline food consumption categories, a ten-percentage point increase in severity of food consumption compared to previous years, and the second highest figure since the peak of the crisis.

Increasing numbers of people are now more vulnerable to shocks with 57.4 percent of surveyed households having expenditures below the Minimum Expenditure Basket (MEB), meaning that these households did not have enough economic capacity to adequately meet their needs. Even more concerning is that 42 percent of households have expenditures below the Survival Minimum Expenditure Basket (SMEB), suggesting monthly expenditures that are not enough to meet food needs.

Data from hard-to-reach areas indicates that the food security and livelihood situation for populations unable to access humanitarian assistance is also dire, again with

many resorting to negative coping mechanisms to meet basic needs. IPC estimates that 5.1 million people will be food insecure at crisis levels (IPC level 3) or above with those in hard-to-reach areas particularly at risk.

The humanitarian community is raising concerns as the Borno State Government continues to pursue a policy of

encouraging returns, which by implication will amount to a return of insecurity and restriction to humanitarian access. Many returnees face a lack of access to basic goods and services in their LGAs of origin. Access to adequate and clean sanitation and water continues to be a challenge for many households across all affected groups.

2. Economic Context

NIGERIA EXITS ECONOMIC RECESSION RECORDING ITS FIRST POSITIVE GROWTH SINCE THE EMERGENCE OF THE PANDEMIC

In its latest quarterly report, the Nigerian Bureau of Statistics stated the GDP grew, albeit, slowly by 0.1% year-on-year in Q4 2020. This marks the first positive growth in the last three quarters after two consecutive contractions of 3.6% and 6.1% in Q3 and Q2 2020 respectively. This economic rebound has been attributed to the gradual resumption of most business activities following the easing of COVID-19 restrictions as the number of sectors that expanded increased from 21 in Q3 to 29 in Q4 ([NBS 18/02/2021](#)).

The resurgence in economic activities was also confirmed by findings of the 7th and 8th rounds (November and December 2020) of the National Longitudinal Phone Survey (NLPS) aimed at monitoring the socioeconomic impact of the pandemic. It showed an increase in the working status of respondents to 87% in October, 85% in November, and 88% in December 2020 (averaging 86.6%) roughly closing up to the pre-pandemic levels of 87% in March 2020 ([World Bank 21/12/2020](#)).

ECONOMIC REBOUND IN Q4 LARGELY DRIVEN BY THE NON-OIL SECTOR

As expected, growth has been driven primarily by the non-oil sector which returned to a positive growth of 1.69% from -2.51% in Q3'20. The sector's contribution to GDP increased to 94.13% from 91.27% in Q3 2020. The sector's positive performance was majorly driven by the ICT, agriculture (crop production), real estate and construction sectors ([Proshare 19/2/2021](#)).

The increase in agricultural activity as identified by the December 2020 round of the NLPS, shows an increase in

the share of households doing crop-related farm work. Growing from 70% in the 2018/19 agricultural season (March 2018 to February 2019) to 80% in the 2020/21 agricultural season (March 2020 to February 2021). The increase was particularly stark in urban areas, where the share of households doing crop farming rose from 35% to 56%. Yet even in rural areas, there was a slight increase in the share of households doing crop farming (from 86% to 91%) over the same period ([World Bank 21/12/2020](#)).

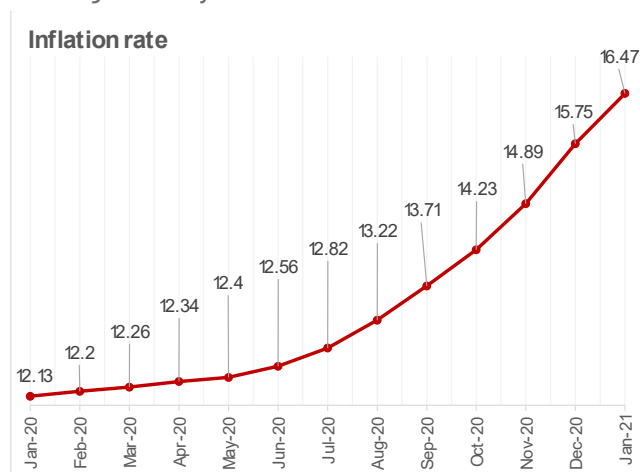
ECONOMIC OUTLOOK FOR 2021 MORE PROMISING

The surprising positive growth of the economy in Q4 2020 is not only an impetus for economic growth in 2021 but also indicates the potential of the non-oil and private sectors to positively impact the economy as a whole. Thus, the ongoing measures by the Central Bank of Nigeria to ease its forex rationing, coupled with the naira convergence to boost dollar supply is expected to have a significant impact by Q1 2021 particularly for trade and manufacturing sectors that are income-elastic and forex dependent. On the other hand, due to the severity of clashes between farmers and herdsmen, agricultural output, which has been able to withstand the pandemic, has been projected to reduce particularly with its spread coupled with the tribal clashes in the South West ([Proshare 19/2/2021](#)).

INFLATION RATE HITS A 4-YEAR HIGH

For the 18th consecutive month, the inflation rate has risen, reaching 17.33% in February, up from 16.47% in January 2021. This is the highest rate since February 2019 ensuing the impact of the pandemic on oil prices and the consequential weaker value of the naira. As a result, food and transportation costs have soared as food inflation is now at its highest (21.79%) since October 2015, while air transportation climbed to 14.1% ([Trading Economics 16/03/2021](#)).

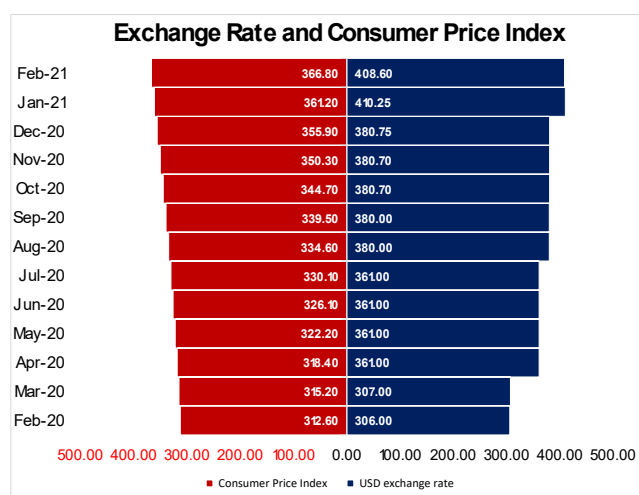
Figure 2. Inflation rate in Nigeria within 12 months, starting February 2020



The Consumer price index (CPI) further climbed to 366.80 points in February from 361.20 points in the previous month of January 2021. The core consumer prices increased to 320.30 points in February from 316.48 points in January 2021 ([Trading Economics](#) 16/03/2021).

Even though the naira gained N1.04 against the dollar closing at N408.6/\$1 at the official investors' and exporters' window on February 23rd, 2021, the exchange rate at the parallel markets remains stable as it closes at N480/\$1 ([Nairametrics](#) 23/02/2021).

Figure 3. Consumer Price Index climbs further as Naira continues to weaken against dollar



ECONOMIC SITUATION IN NORTHEAST NIGERIA

The ongoing protracted crisis which has resulted in recurring displacement and loss of livelihoods has exacerbated the persistent inequalities and poverty levels that were already prevalent in the northeast region. The far-reaching consequences have been a surge in unemployment resulting from the disproportionate attacks in remote areas and farmlands in a region where agriculture and livestock farming accounts for the main source of income for three-quarters of the population. This has led to households adopting precarious means of income and negative coping strategies. A study found approximately 1 in 10 of the households in the BAY area engage in unskilled wage labor, begging, or daily common laborer ([WFP](#) 2020).

A decrease in purchasing power has been reported in a WFP need analysis which found 57.4% of the surveyed households (host communities 80%, IDPS 15% and returnees 6%) are monetary poor as they had expenditures below the MEB (minimum expenditure basket). This has led to an increase in the number of households resorting to debt, and other emergency coping strategies. 80% of these households state that accessing food is the primary reason. 56.5% were also multidimensionally deprived (deprivation in food, health, education, shelter, WASH, and safety) indicating non-monetary poverty is as prevalent as monetary poverty ([WFP](#) 2020).

3. Security Context

The Nigerian government is embroiled in multiple security challenges, notable among them is the Non-State Actors jihadist insurgency, the Fulani militancy and the ongoing campaign of terror by rural bandits. Apart from the intractable Boko-Haram insurgency which has claimed thousands of lives and condemned several others to Internal Displaced Person Camps around the country, the Southern Kaduna conflict; violent clashes between the Fulani Herdsmen and Farmers all over the country, a renewed surge in kidnapping in major cities and villages, agitations in the Niger Delta as well as calls for succession in the former Biafra Republic, among others, all deserve urgent intervention, and a multifaceted approach from stakeholders.

According to Nigeria Security Tracker, the number of deaths over time, caused by different political, economic and social grievances, has been on a rise since 2011. The figure below illustrates deaths and cumulative deaths over time attributed to violence. The red line shows the number

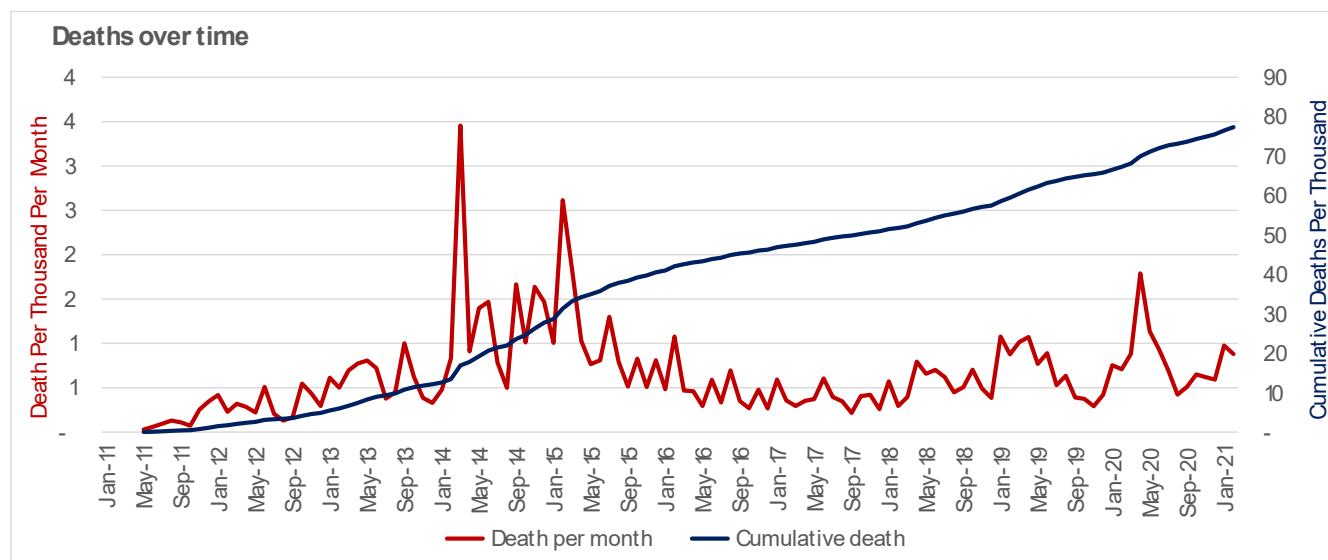
of deaths by month, and the blue shows the cumulative total. The number of deaths is a conservative estimate, based on numbers reported by the press.

SECURITY INCIDENTS SINCE THE OUT-BREAK OF COVID-19 IN NIGERIA

The data used in this report was collected by the Armed Conflict Location & Event Data (ACLED) to show the impact of armed-conflict inflicted on the affected population. According to ACLED, data on conflict events are collected from publicly available secondary reports, and therefore may represent an underestimation of the true number of events (ACLED 2021).

The Maps below indicate that from February 2020 to February 2021, approximately 3,848 people lost their lives in different security incidents in the northeast. Within Borno state, which is the epicenter of the conflict.

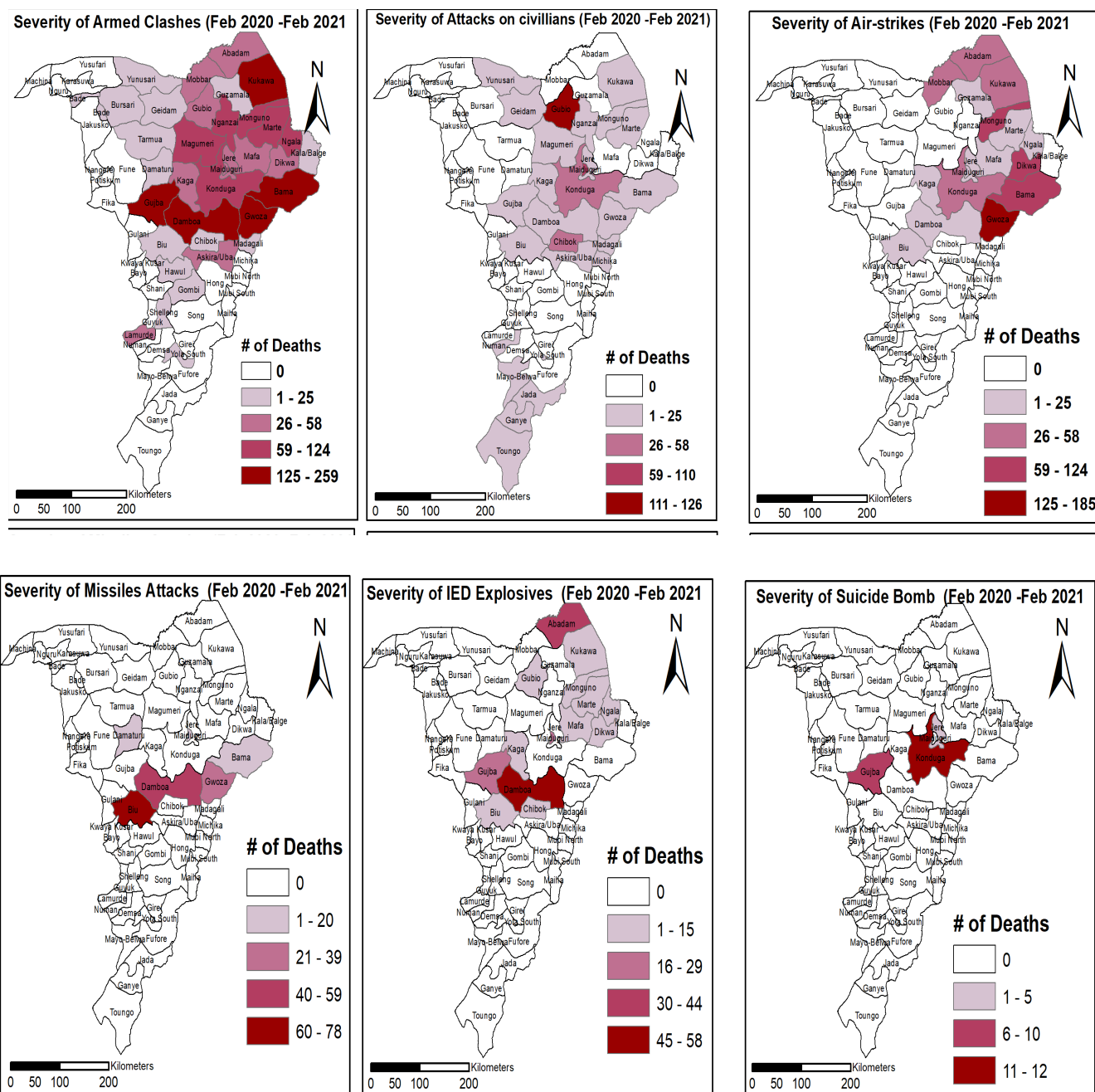
Figure 4. Death from Non-State Armed group actions



The LGAs with the highest number of lives lost in violence include; Gwoza with a total of 431 (where 220 were lost in Armed clashes and 185 were lost in Airstrikes); Damboa with a total of 385 (where 245 were lost in Armed clashes and 59 were lost in missiles attack); Kukawa with a total of 319 (where 259 were lost in Armed clashes and 51 were lost in Airstrikes); Bama with a total of 286 (where 200 were lost in Armed clashes and 75 were lost in Airstrikes);

and Monguno with a total of 204 (where 123 were lost in Armed clashes and 64 were lost in Airstrikes). In Yobe, the LGA with highest number of fatalities is Gujba with a total of 224, where approximately 184 lives were lost in Armed clashes followed by 29 lives lost in landmine/ IED explosives. In Adamawa, it is Larmude LGA where 37 people lost their lives through armed clashes.

Figure 5. Severity of armed clashes Feb 2020 – Feb 2021



Source: ([ACLED](#) Feb 2020 – Feb 2021)

The security situation in the northeast remains very unstable, with a very high level of active hostilities between the Nigerian army forces and the NSAGs. Increased informal checkpoints by NSAGs pose an additional threat to civilians, who are regularly abducted or killed during such incidents in both Borno and Yobe States ([ECHO](#) 11/02/2021). In February, at least seven Nigerian soldiers were killed and several others wounded when Non-State Actors launched an ambush attack on 153rd Task Force battalion in Marte LGA ([Andalou Agency](#) 18/02/2021).

In early August 2020, the Borno State Government (BSG) announced the return of IDPs to their places of origin and committed to emptying IDP camps by May 2021. Humanitarian actors consider most of the locations identified by the authorities unsafe and inaccessible and thus argue that the conditions for returns, as laid out in the 2009 Kampala Convention, are not met. These fears

are confirmed by a number of violent attacks in August and September, during which returning civilians were killed and injured. Moreover, the massacre of farmers on 28 November 2020 on the outskirts of Maiduguri, Borno State, heightened fears among IDP camp inhabitants and camp managers that the conditions for safe returns might not be present ([ECHO](#) 11/02/2021).

Residents of Maiduguri have been struggling with a power blackout for months now after militants blew up supply lines, disrupting businesses and daily life. As motorised boreholes rely on electric power to operate, there have been water shortages as businesses and daily life have been severely disrupted in Maiduguri. The electricity tower was destroyed on January 26 in the Mainok area along the Maiduguri/Damaturu Road by the insurgents and this attack was the third in a month ([Sahara reporters](#) 09/02/2021).

4. Humanitarian Access

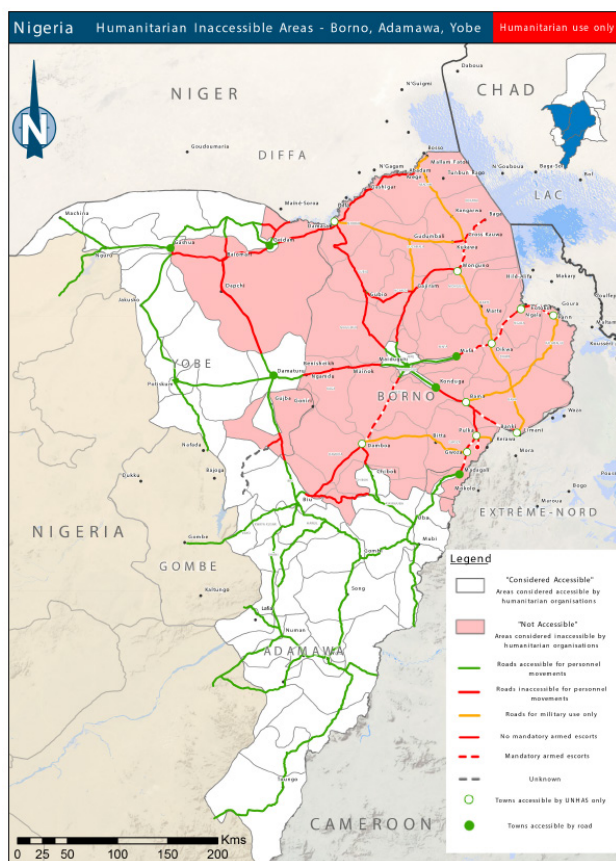
With the shrinking humanitarian space (largely due to deteriorating security but also to restrictions imposed by the government authorities) the crisis in the northeast of Nigeria remains one of the largest and most severe in the world today. An estimated 1.2 million people remain inaccessible to humanitarian actors due to ongoing hostilities, threats of attacks and movement restrictions imposed by the military ([ECHO](#) 11/02/2021). The continuing conflict still severely affects millions of people in 2021, subjecting them to displacement (both new or continued), impoverishment and threat of violence. These hardships are compounded by the COVID-19 pandemic which has caused greater vulnerability, deepening the humanitarian crisis. In 2021, 8.7 million people will need urgent humanitarian assistance, most of them women and children. Protection needs remain formidable for 4.1 million IDPs and host communities. Up to 5.1 million people risk being critically food insecure during the next lean season (June – August 2021), a level similar to 2016–2017 when famine was looming over Borno State. One million people remain unreachable for aid workers due to insecurity ([UNOCHA](#) 01/02/2021).

AREAS OUTSIDE OF GOVERNMENT CONTROL INACCESSIBLE TO HUMANITARIAN WORKERS

Humanitarian organizations in northeast Nigeria are restricted from operating in areas not under the federal government's control – based on a law preventing 'terrorism' – including in areas controlled by Non-State Actors ([ACAPS Humanitarian Access Report](#) 15/12/2020).

The continuation of conflict in the northeast has created a complex humanitarian crisis, rendering sections of Borno State as hard-to-reach (H2R) for humanitarian actors. The protracted conflict is characterised by growing insecurities limiting affected people's access to livelihood sources and food. Due to the inaccessible nature of a majority of LGAs in Borno State, outside of LGA capital towns or "garrison towns", humanitarian actors are unable to access people shown to be in severe need for food assistance, making people living in H2R areas at high risk of food insecurity and adverse health outcomes ([REACH Initiative](#) 02/02/2021).

Figure 6. Map of accessible areas in the BAY region



HUMANITARIAN ACCESS AFFECTED BY INCREASED INSECURITY

There is also a rise in the mounting of illegal vehicular checkpoints (IVCPs) along the Borno State highways, manned by Non-State Actors. In the first week of December 2020 alone, 17 such illegal vehicle checkpoints were mounted in 4 LGAs allowing NSAG actors to rob valuables and vehicles as well as abduct or injure passengers. An estimated nine individuals were abducted including drivers and humanitarians. Furthermore, an INGO vehicle was robbed in Damasak, and the hired driver abducted ([UNHCR 24/02/2021](#)).

In light of increased security incidents on many roads in Borno State, the transportation of humanitarian cargo to field locations is becoming increasingly challenging. This increased risk has resulted in some humanitarian organizations finding it difficult to secure transport from their vendors at the agreed rates. As a result of the increased risk, some humanitarian organizations opted for the option of travelling with armed escorts provided by the Nigerian Armed Forces, which poses several challenges. Similarly, the movement of personnel to field locations for routine supervision and maintenance has been a major challenge due to restrictions in place to prevent the spread of COVID-19 ([UNOCHA 04/02/2021](#)). The main challenges faced by humanitarian actors continue to be access, transportation and delivery of essential services on time. Humanitarian actors have faced challenges where various distributions were disrupted by unknown persons armed with crude weapons, scaring agency staff and looting supplies ([UNOCHA 04/02/2021](#)).

5. COVID-19 Epidemic Overview

A. NIGERIA OVERVIEW

Table 1. COVID-19 Nigeria (NCDC)

	Total samples tested	Total confirmed cases	Total active cases	Total discharged cases	Total deaths
Nigeria	1,580,443	155,657	21,915	133,742	1,907

NUMBERS OF NEW COVID-19 CASES BEGIN TO DECLINE AFTER ALL-TIME HIGH IN JANUARY 2020.

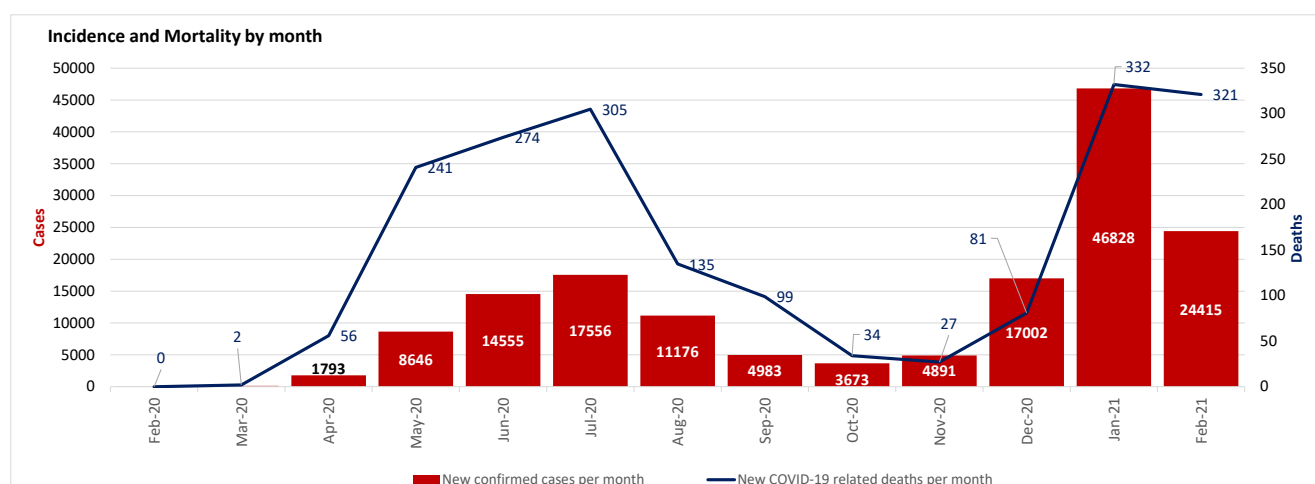
Table 2. Monthly Progression of COVID-19 Outbreak in Nigeria

	31-Mar	30-Apr	31-May	30-Jun	31-Jul	31-Aug	30-Sep	30-Oct	29-Nov	27-Dec	31-Jan	28-Feb
<u>New cases per month</u>	<u>138</u>	<u>1,793</u>	<u>8,646</u>	<u>14,555</u>	<u>17,556</u>	<u>11,176</u>	<u>4,983</u>	<u>3,673</u>	<u>4,891</u>	<u>17,002</u>	<u>46,828</u>	<u>24,415</u>
<u># Total Prevalence (confirmed cases)</u>	<u>139</u>	<u>1,932</u>	<u>10,578</u>	<u>25,133</u>	<u>42,689</u>	<u>53,865</u>	<u>58,848</u>	<u>62,521</u>	<u>67,412</u>	<u>84,414</u>	<u>131,242</u>	<u>155,657</u>
<u># Total cases discharged</u>	<u>9</u>	<u>319</u>	<u>3,122</u>	<u>9,402</u>	<u>19,270</u>	<u>41,513</u>	<u>50,358</u>	<u>58,249</u>	<u>63,055</u>	<u>71,034</u>	<u>104,989</u>	<u>133,742</u>
<u>New Deaths</u>	<u>2</u>	<u>56</u>	<u>243</u>	<u>274</u>	<u>305</u>	<u>135</u>	<u>99</u>	<u>34</u>	<u>27</u>	<u>81</u>	<u>332</u>	<u>321</u>
<u># Total deaths</u>	<u>2</u>	<u>58</u>	<u>299</u>	<u>573</u>	<u>878</u>	<u>1,013</u>	<u>1,112</u>	<u>1,146</u>	<u>1,173</u>	<u>1,254</u>	<u>1,586</u>	<u>1,907</u>

During February 2021, Nigeria recorded 24,415 new confirmed cases, bringing the total number of COVID-19 cases above 150,000. Relative to January, 47.9% fewer new cases were reported in February, this is the second highest drop since August 2020 (33.3%). Whilst fewer cases were recorded in February than January. February death (321)

remains the second deadliest month after January (332). The number of new COVID-19 deaths between January-February decreased by 3.3%, the least in the six months with the highest recorded in October (65.7%).

Figure 7. Monthly Progression of COVID-19 Cases vs Deaths



REDUCTION IN TESTING MAY BE RESPONSIBLE FOR SHARP DECLINE IN THE NUMBER OF REPORTED CASES.

The number of tests conducted in February reduced by 50% compared to January. However, given that there was only a 0.2% drop in positivity rates from January (11.1% - same as December) to February (10.9%). The true number of cases is almost certainly higher than what is being reported. The sharp reduction (50%) in the number of cases may be attributed to a similar reduction (50%) in the number of testing conducted. This validates concerns over inadequate testing in Nigeria leading to underreporting of cases.

Fear of a second wave of the pandemic led to increased testing and testing capacity in December and January. But since then, stigmatization of people testing positive in the community has led to reluctance to participate in testing. Logistic and personnel constraints also remain bottlenecks particularly in rural and insecure areas as the NCDC tasks state government to take ownership of

testing at state level ([NCDC 11/01/2021](#)).

NEW VARIANTS OF CONCERN CIRCULATING IN NIGERIA

As of February, 14 2021, 55 different lineages of SARS-CoV-2 virus have been identified circulating in Nigeria and changing rapidly. This finding suggests that the COVID-19 virus has been introduced from multiple sources and is being transmitted within the community. Between November 2020 and January 2021, 29 samples of the B.1.1.17 variant first described in the UK and linked with increased transmissibility, have been collected in Lagos, FCT, Osun, Oyo, Kwara and Edo states. Another strain, the B.1.525 was identified in a sample collected on the 23rd of November 2020 in Lagos state. The strain has been identified in travelers from Nigeria and in Five states across Nigeria. Nigeria has the 3rd highest number of this strain after the United Kingdom and Denmark. The B.1.525 is a new strain, but not yet a variant of concern and further analysis is ongoing ([NCDC 19/02/2021](#)).

NCDC ADVOCATES FOR GENOMIC SURVEILLANCE FOR PUBLIC HEALTH IN NIGERIA

While the NCDC urges Nigerian citizens to keep observing preventive measures, in a press release on February 19th 2021, the NCDC announced that it would conducting routine analysis of genomic sequence in collaborating the Nigeria Institute for Medical Research (NIMR) and the Africa Centre for Excellence in Genomics (ACEGID) to identify variant viruses for further characterisation and investigate transmission, severity, immune escape and other impacts on the trajectory of the pandemic. NCDC also stated that the University of Ibadan in conjunction with the Northwestern University in Nigeria, has also conducted some sequencing in Nigeria. Overall, about 400 sequences from Nigeria have been deposited in global databases.

NCDC SHORT TERM RESOLUTION

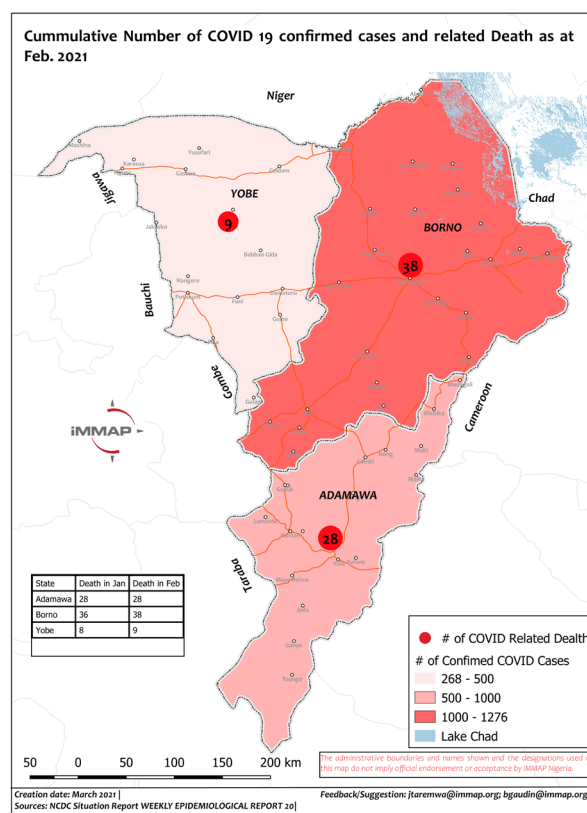
1. A random selection of viruses will be collected and sent to ACEGID for sequencing weekly coordinated by the NCDC National Reference Laboratory.
2. A concerted effort will be made in building up genomic surveillance in Nigeria.
3. An Implementation Group for SARS-CoV-2 Sequencing in Nigeria has been constituted to pull together a coordinated response to drive genomic surveillance for SARS-CoV-2 in Nigeria. the objectives of this group is to:

- Ensure a coordinated response to identify variants of concern in Nigeria.
- Provide a platform for sharing of specimens and access to sequence information.
- Agree and standardise practice for the analysis of genomic data.
- Provide a platform to study the impact of variants of concern on transmission, disease severity, vaccines, therapeutics and diagnostics.
- Ensure strong communications to maintain public confidence.
- Inform national COVID19 response strategies.

- Provide advice on the establishment of genomic surveillance for pathogens of interest in Nigeria ([NCDC 19/02/2021](#))

B. BAY STATES OVERVIEW

Figure 8. Total caseload BAY States (NCDC Weekly Report 28/02/2021)



Newly confirmed cases of COVID-19 increased by 198.1% in Borno, 47.5% in Adamawa and 50% in Yobe compared to the previous month. Borno state accounted for 55% of the total confirmed number of COVID-19 cases in BAY states, followed by Adamawa with 33% and Yobe with 12%. Overall deaths rate from COVID-19 is high in the BAY states compared to other states in the country. There was a percentage increase of 19.8% in February COVID-19 cases while the highest percentage increase was recorded in the month (1713.6%) of December.

Same number of deaths was recorded in January (Adamawa-3) and February (Borno -2, Yobe-1). The cumulative numbers of deaths may seem comparatively low in the BAY area, Adamawa state with a death rate of 3.7% is the 4th deadliest state followed by Yobe (9th) at 3.4% and Borno (10th) at 2.97%.

TESTING & CONTACT TRACING

In the month under review, 3,366 samples were collected, and 857 contacts traced in the BAY state. The number of testing increased towards the end of February; however the number of confirmed cases continue to decline in the state.

Figure 9. COVID-19 testing and contact tracing across the BAY states

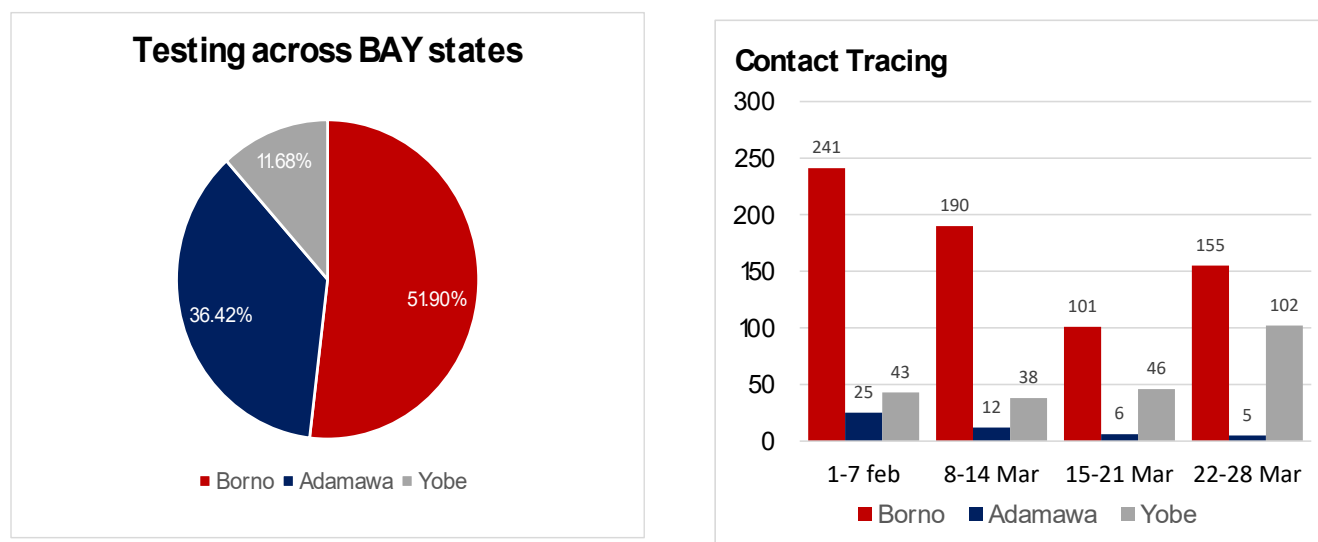
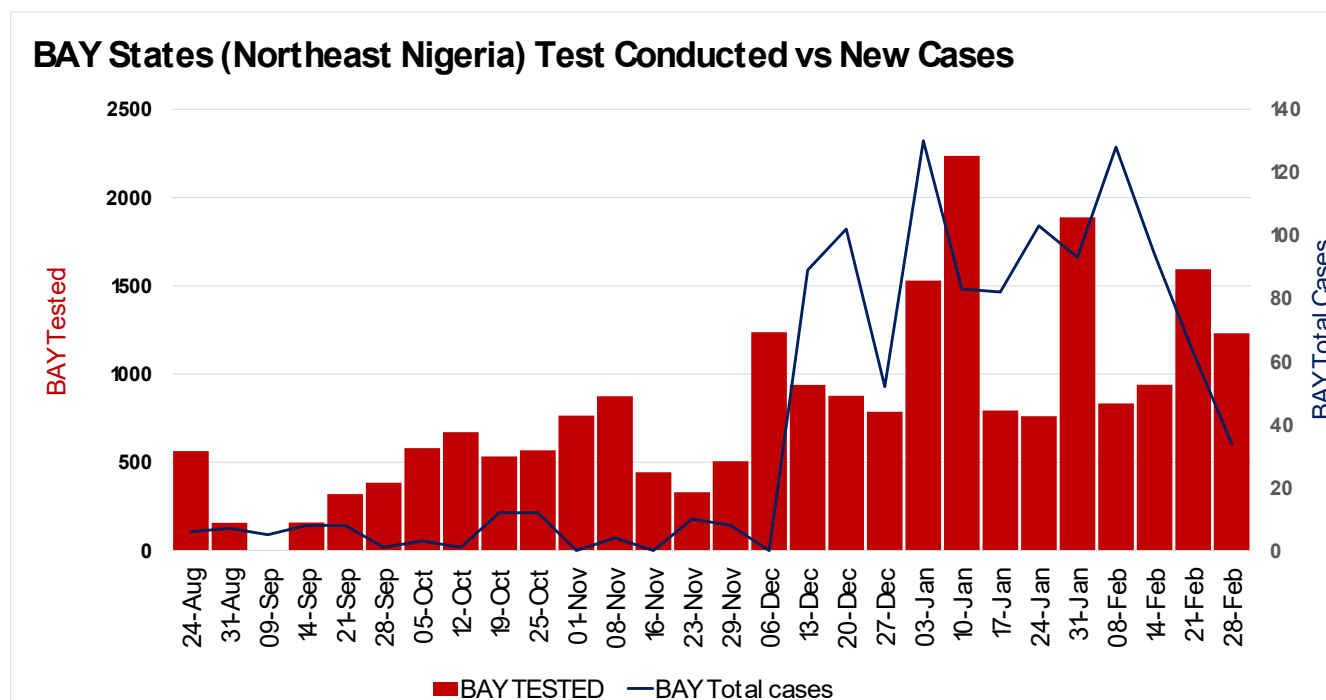


Figure 10. Weekly testing and caseload data for the BAY States (NCDC Weekly Epidemiological Report, 31/01/2021)



6. COVID-19 Containment Measures

JANUARY COVID-19 HEALTH PROTECTION GUIDELINES STILL IN EFFECT

As Nigerians continue to await COVID-19 vaccines, officials have warned against violations of safety guidelines issued to curtail the spread of the virus. While NCDC has increased the number of testing laboratories across several states, it urges state governments to become more proactive in response to the pandemic and maintain COVID-19 facilities. NCDC stresses active testing as an important means to measuring the severity of impact and vulnerability among the citizens.

Business owners, employees and religious leaders are urged to enforce strict adherence to the COVID-19 guidelines, which include the wearing of face masks and provision of handwashing facilities. Members of the public are advised to continue to follow previous guidelines including the mandatory use of facemask, physical distancing, avoidance of public gathering and non-essential travels are in place (NCDC 11/01/2021).

Other guidelines observed during the reporting period include:

- Public servants below grade level 12 are expected to stay home unless they are essential workers.
- Offices must encourage staff to work from home.
- Businesses and offices must ensure availability of hand washing facilities with soap and running water and/or sanitizers.
- Mandatory use of face mask/ covering for all staff at all times.
- Implement physical distancing measures including seating arrangements for staff and visitors.
- Ensure temperature checks at the offices on arrival.
- All Business must develop an infectious disease preparedness action plan to reduce risk of exposure

re for the workplace and inform staff members.

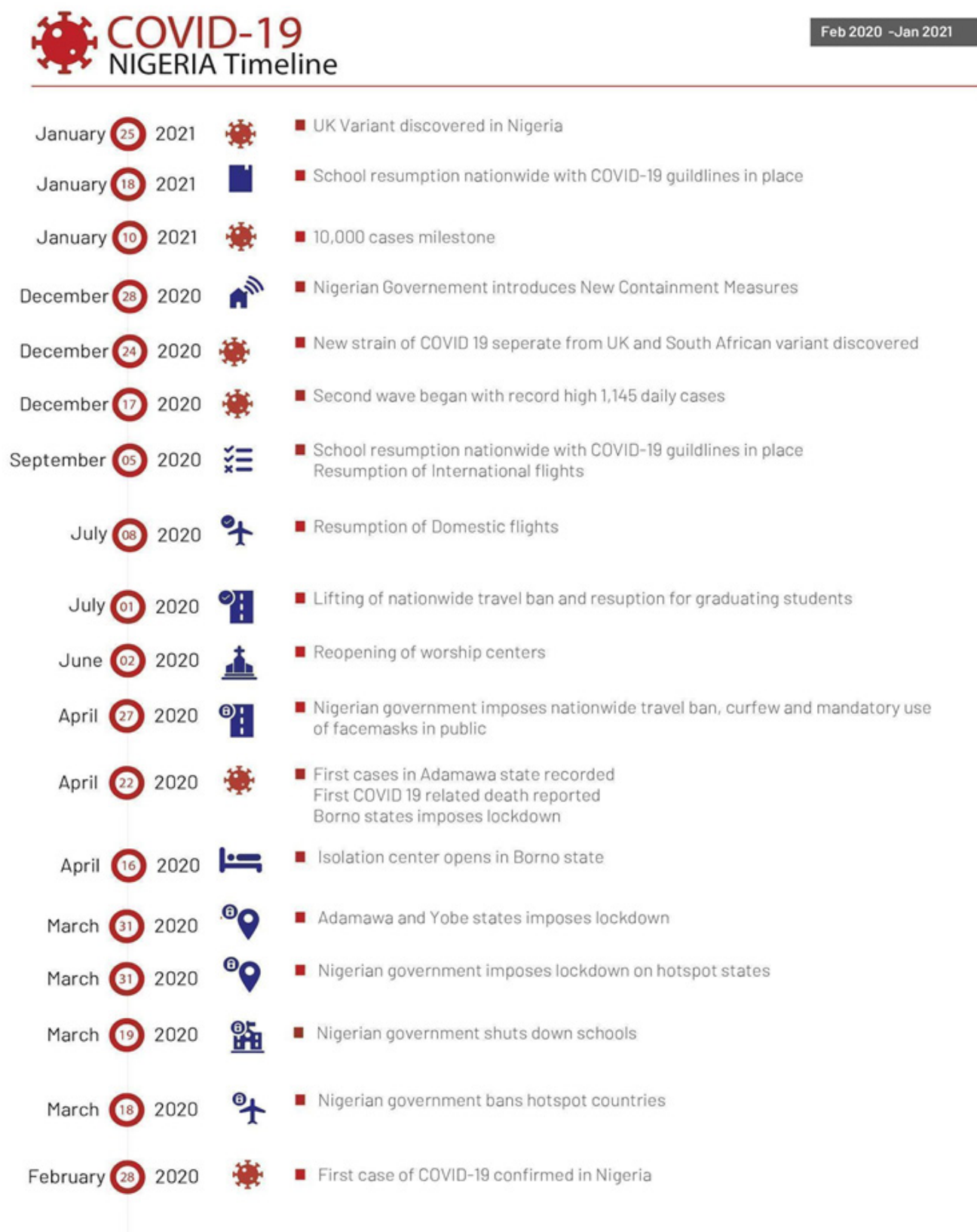
- Train staff members to spot the symptoms of coronavirus and have a clear understanding of what to do if they are sick.
- Display signs for offices or business premises to remind staff and visitors to maintain good and respiratory hygiene.
- Discourage the sharing of work equipment and tools like computers, phones and desks among staffs.
- Offices and business to limit the number of visitors to their office.
- Take advantage of delivery companies to limit staff movement outside the office (BBC 4/01/2021)

POINT OF ENTRY PASSENGER HEALTH SCREENING IN BAY STATE.

Across the BAY states, Enumerators stationed at Points of Entry conduct interviews with travellers and collect information about travellers' points of departure, intended destination, vulnerabilities, temperatures, reasons for moving and mode of transport. Additional questions concerning the COVID-19 pandemic were asked to determine if travelers exhibit any symptoms of COVID-19; if they were recently in contact with individuals exhibiting symptoms of COVID-19 or might have died from it.

Furthermore, the assessments serve to evaluate whether travellers sought medical care or took medication in the 24 hours preceding the interviews and to verify whether they are aware of whom to call in case of emergency (IOM 19/02/2021).

Figure 11. COVID -19 Timeline in Nigeria



7. Information and Communication for COVID-19

NIGERIAN GOVERNMENT REITERATES THE NEED TO FOLLOW PREVENTION MEASURES EVEN THOUGH THE VACCINATION PROGRAM IS DUE TO BEGIN SOON

As a result of increasing demand, the NCDC has recently introduced a toll-free number '6232' for public inquiries through its 24-7 connect center. The "campaign 6232", an innovation implemented with support from the national communication commission (NCC), aims to use different means of communication to raise awareness among the population on how to reach NCDC, with questions relating to all infectious disease prevention, detection, and control ([NCDC](#) 15/02/2021).

Although Nigeria is expecting the arrival 3.92 million doses of COVID-19 vaccines in March, the NCDC director has emphasized the need for continued adherence and support to public health and social measures in the country as even with the best of government efforts and preparedness, it will take time to vaccinate everyone against COVID-19 ([NCDC](#) 27/02/2021).

COVID-19 AWARENESS AND SENSITIZATION CONTINUES.

NGOs and UN Agencies continue mainstreaming COVID-19 awareness and sensitization messaging into regular health programming throughout the BAY states ([WHO](#) 11/02/2021).

WHO is supporting the government to leverage on the existing Auto-Visual Acute Flaccid Paralysis Detection and Reporting (AVADAR) system to strengthen community-based surveillance and reporting of suspected COVID-19 cases, and to sensitize and support contact tracing in the community. Coverage is across northern Nigeria and includes Borno and Yobe states. AVADAR informants are trained on the use of mobile-based data collection to ensure real time reporting of suspected cases. They are also able to use local languages and follow appropriate cultural norms enabling them to play a key role in increasing the sensitivity of surveillance, tracing of contacts and reporting at the community levels (WHO 25/02/2021).

RUMORS AND MISINFORMATION COULD COMPROMISE VACCINATION CAMPAIGN.

In a recent poll commissioned by UNICEF's U-Report in the BAY states, 75% * of those who agreed to participate agreed they would have a COVID-19 vaccine if it was recommended to them, 18% said they would not and 7% were unsure. In terms of reasons for answering no, 32% cited they thought the vaccine was not safe, 27% said they did not know enough and 13% cited rumors they had heard.

The main sources of information about the vaccine cited by the respondents were: Social media (47%), word of mouth (37%), Media (8%), Community gatherings (5%) ([UNICEF](#) 02/03/2021).

* 16,802 respondents

8. Overview of impact and humanitarian conditions

Despite the unexpected positive growth of the economy in Q4, the impact of other economic factors including a 4-year high inflation rate, have been reflected in the findings of the WFP essential needs assessment. It is clear that vulnerability has increased for all affected groups in the BAY states in northeast Nigeria with IDPs disproportionately affected. Almost half of households are struggling to find the income to meet their basic needs whilst many are turning to negative coping mechanisms that see increased debt; the sale of assets; and expenditure cut on areas such as education and health to put food on the table. The findings align with the latest (October) Cadre Harmonise forecast that estimates 5.1 million people will face crisis level food insecurity (IPC 3 or above) during the coming lean season (June – August 2021). This figure includes large populations in hard-to-reach (H2R) areas where the true extent of the impact of COVID-19 is yet to be determined.

- COVID-19 and other shocks have had a major impact on livelihoods and income generation. Although employment figures are reaching pre-pandemic levels, insecurity and price increases are still undermining households' ability to afford their basic needs.
- Overall vulnerability has increased in all population groups since the onset of the COVID-19 pandemic, with household debt rising and an increase in negative coping mechanisms, including crisis and emergency coping mechanisms, the impact of which is harder to reverse.
- Constraints on livelihood activities (including farming) due to insecurity and COVID-19 restrictions alongside the continuing increase in food prices is leaving more and more families food insecure as food consumption rates decrease. The use of negative food coping mechanisms is becoming more prevalent and H2R areas are of particular concern.
- Health service delivery continues to be challenging with supplies impacted by insecurity and rising prices. Even though households have reduced expenditure on health as a coping mechanism, access to health services is seen as both a major concern and

as a priority by many households.

- In line with widespread food insecurity, Global and Severe Acute Malnutrition (GAM/SAM) rates remain high, with an average of around 1,500 SAM cases being reported each week through EWARS. Stunting is widespread across the BAY states but particularly prevalent in Yobe.
- Although most households report access to improved water sources, many households also report not having access to enough water. Access to adequate sanitation facilities is also a major issue for both IDPs and host communities. It is likely that access to WASH facilities is even worse in H2R areas.
- Significant shelter needs remain as the impact of COVID-19 on prices, transport costs and difficulties in accessing certain areas make the shelter response in the northeast particularly challenging. Overcrowding in camps and the use of makeshift shelters is increasing the risk of fire.
- Persistent NSAG attacks and the threat of attack is taking its toll on the civilian population. Both IDP and refugee returnees are facing hardships and report abuse and mistreatment. Gender still defines many of the protection issues that permeate all communities in the BAY states.
- Many schools in the northeast face difficulties in implementing strict COVID-19 prevention measures and it is as yet unclear how many schools are open. Neither is it known to what extent the fear of catching COVID-19 or financial barriers exacerbated by the pandemic are keeping children away.

9. Information Challenges and Gaps

Information Sources: Robust data, in particular with regards to livelihoods and food security was provided by WFPs essential needs analysis and this was complemented by a REACH report on food security and livelihoods in hard-to-reach areas. The regular biweekly CCCM monitoring reports for Early February and Late January provided a snapshot of changes for camp based IDPs. EWARS data was available to track main health issues outside of COVID, however there were no major new data sources for Nutrition, Education, Shelter or Protection.

Protection data limited: There was limited information on protection issues with the large quantitative reports including only one or two protection related questions. This is normal for such assessments as collection of protection data carries risks and non-disclosure clauses as well as barriers in terms of how comfortable respondents are in talking about such issues. In addition, it's difficult to capture the voice of those affected by protection issues from key informants or head of household interviews.

School attendance data not yet available: With the resumption of schools across the BAY states, and certain degree of compliance to government directives on COVID19 guideline, there is little or no information on number out of school children as well as teacher absence due to career change, or indeed how many schools have actually opened.

Livelihoods: While it is clear from WFPs Essential Needs Analysis report (as well as macroeconomic data) that COVID-19 disrupted the livelihood sector, there is limited information quantifying businesses and job opportunities

(formal and informal) that have resumed following the easing of restrictions in the northeast. Since the data was collected in late 2020 the impact of sustained Non-State Actors attacks and military operations on the current situation is not known.

Aggregating COVID-19 effects from other Humanitarian drivers: Quantifying the unique effects and related consequences of COVID-19 on humanitarian needs becomes a challenge especially in a region that is faced with multiple security and pandemic challenges. After almost a decade of conflict, economic challenges over the past years, and with high levels of vulnerabilities, it is difficult to unravel the specific effect of the COVID-19 pandemic on the humanitarian needs from other factors at play in the region.

Data on WASH and Shelter is mainly from CCRM regular updates, so although a fairly clear picture exists for IDPs in supported camps, the current situation for IDPs in host communities, host communities themselves and returnees is not available.

Information on hard-to-reach (H2R) areas has been mainly provided from targeted assessments by REACH, but this analysis has intrinsic methodological constraints (as direct assessment is not possible). With populations in H2R areas cited as particularly at risk, more data could provide a clearer and more accurate situational analysis, however with humanitarian actors currently unable to intervene there is a limit to its utility.

10. Sectors

Livelihoods

Evidence from a [world bank survey](#) across Nigeria alongside a more detailed [WFP assessment of essential needs](#) in the northeast of the country indicates that the livelihood situation for many households is precarious. Despite figures indicating that across Nigeria employment is returning to somewhere near pre-pandemic levels, income generation remains constrained and the last 12 months have pushed more families into poverty, debt, and therefore vulnerability. The majority of households

in northeast Nigeria had their livelihoods were negatively impacted by COVID-19, the majority of households have expenditures below the Minimum Expenditure Basket (MEB), and livelihood coping strategies are becoming both more severe and more widespread, further reducing the ability of the population to withstand shocks. Income, money, or resources is the major area of concern for households in the northeast, and (after food) it is the second-highest priority for support.

THE OVERALL ECONOMIC SITUATION IN NIGERIA IS STABILIZING WITH EMPLOYMENT CLOSE TO PRE-CRISIS LEVELS.

Overall employment levels in Nigeria are back to approximately pre-crisis levels. This is in line with the small increase in GDP observed in Q4 (see economic overview section). However, the difference between rural and urban employment is more marked, with 91% of rural households reporting employment compared to 80% of urban households (compared to 87% and 85% respectively pre-crisis). Data also showed that 11% of all households with non-farm businesses had been closed for at least one month between June and November 2020 ([World Bank](#) 21/02/2021). However, despite the proportion of those employed returning to pre-crisis levels, evidence suggests that household incomes have not recovered to pre-crisis levels as many households are still reporting the impact of various shocks as well as the adoption of negative coping mechanisms. Many of those working may not be earning the same income or employed in the same jobs as they were before the COVID-19 pandemic.

HOUSEHOLDS CONTINUE TO BE AFFECTED BY MAJOR SHOCKS.

Across Nigeria, households continue to experience shocks that drive the adoption of negative coping mechanisms.

Compared to pre-crisis levels, increases in food prices (cited by over 80% of households, up from approximately 20% in 2017-19) and increasing costs of farming and business inputs (cited by over 60% of households compared to less than 10% in 2017-19) are the major shocks. Other major shocks cited by approximately 15% - 20% of households are illness, injury, or death of income-earning household members, disruption of farming, livestock, or fishing activities, non-farm business closure, and a fall in the price of business/farming outputs. In some cases, the prevalence of shocks is higher during the last 6 months (July - December) than during the peak lockdown period (Apr/May 2020) ([World Bank](#) 21/02/2021).

Data from the northeast echoes these findings with over 30% of households citing high food prices as the most significant shock or difficulty faced. This was followed by insecurity/conflict (approximately 20% of households), sickness of a household member (~11%) and low employment/ reduced income (~8%). All these issues were also cited by households as the second most significant shock/difficulty along with high fuel/transportation

costs, COVID-19 lost/ reduced/ changed income source and COVID-19 lockdown measures (WFP 19/02/2021). It is clear that a lack of livelihood opportunities, food insecurity, and inflated prices continue to be critical challenges that affected people face and that these factors are forcing affected and vulnerable populations to adopt negative coping mechanisms (as well as contributing to increased tension across IDP camps and host communities) ([UN OCHA](#) 04/02/2021).

MAJOR SHOCKS AFFECTING HOUSEHOLDS VARY ACROSS GEOGRAPHICAL LOCATIONS.

Perhaps unsurprisingly the major shocks cited by households differ somewhat depending on geographic location. Insecurity/conflict featured highly in northern and eastern Borno LGAs which consists of mainly garrison towns with much of the LGAs inaccessible to humanitarian workers. Dikwa, Gubio, Gwoza, Magumeri and Ngala and all had more than 50% of households citing insecurity/conflict as the most significant major shock. This was also true in Kaga however, which is on the western border of Borno (with Yobe state), but this area has been affected by roadblocks and attacks on the main Maiduguri to Damaturu highway. High food prices is the primary major shock cited in 7 of Yobe's LGAs in the north and west of the state, as well as 6 northern LGAs in Adamawa. In only 3 LGAs in Borno state are high food prices cited by 50% or more of households as the primary major shock ([WFP](#) 19/02/2021).

COVID-19 HAD A WIDESPREAD NEGATIVE IMPACT ON HOUSEHOLD INCOMES.

Data from WFP also assessed the impact of COVID-19 on livelihoods and income. COVID-related restrictions as well as wider economic impact negatively affected 63.5% of all households, with the deterioration of income (30% of households) being the most common impact mentioned. The other main impacts included 17.6% percent of all households citing a complete loss of income source whilst 15.9% pointed to a disproportionate increase in the cost of living.

MAJORITY OF HOUSEHOLDS USING LIVELIHOOD COPING MECHANISMS.

Adoption of livelihood coping strategies (which in northeast Nigeria is primarily driven by the need to access food) is concerning due to its medium- and long-term impact on

a household's productivity.

i.e., it can make households more vulnerable and less able to cope with future shocks. The more severe* the coping strategy, the more difficult the impact is to reverse. Assessment data from late 2020 indicates that 27.2% of households adopted the most severe emergency coping strategies, 6.6% adopted crisis coping strategies and 37.1% adopted stress coping strategies. Only 29% of households reported not adopting any form of livelihood coping strategy (down from 34% in 2019). The deterioration compared to 2019 is stark with the use of emergency coping strategies increasing from 12% to 27% in 2020

([WFP 19/02/2021](#)).

The situation is of course a lot more nuanced than shown by overall percentages. There are areas where the use of crisis and/or emergency coping strategies is much more prevalent than the overall 33.8% average. In Mobbar (Borno) and Yunusari (Yobe) LGAs, over 75% of households adopted crisis/emergency coping strategies and in another 13 LGAs (also in those two states) the figure is over 50%. The main reason for adopting coping strategies was overwhelmingly access to food (more than 80%), with access to health services and medicines the second-highest need, and access to adequate shelter the third ([WFP 19/02/2021](#)).

Figure 12. Prevalence of livelihood coping strategies

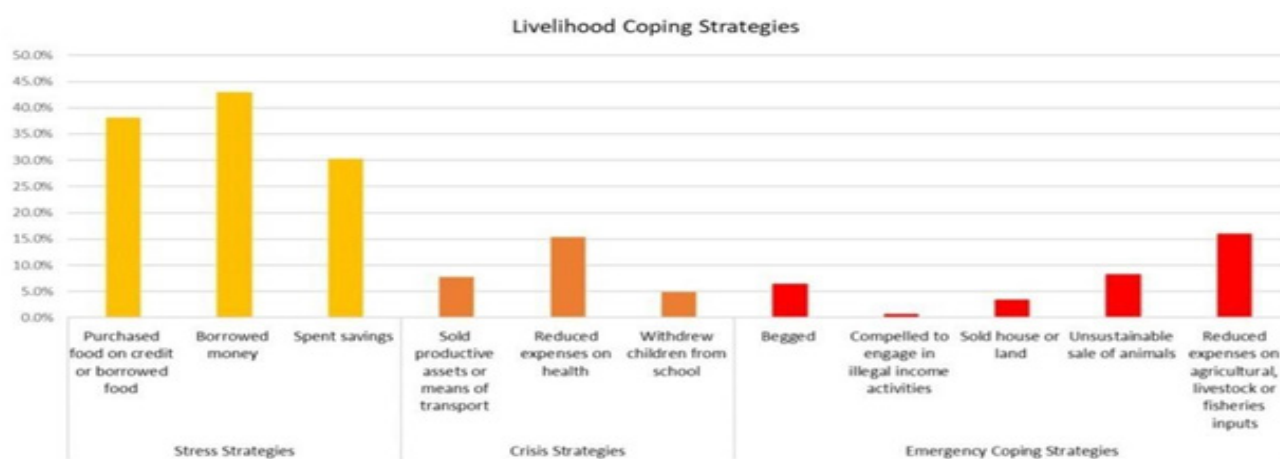


Figure 21: Percentage of households reporting at least one individual livelihood coping strategies, classified by severity

Source ([WFP 19/02/2021](#)). P21¹

HOUSEHOLD SIZE AND DEBT IS RISING.

An interesting observation based on World Bank data saw that across Nigeria households had 6.6 members in November 2020, compared with 5.5 members in January/February 2019. Individuals are reported to have moved in with parents or other relatives, potentially to pool incomes and manage the risks faced through the COVID-19 crisis, while others have reported returning from work migration or education. In this way, Nigerian households are having to fully restructure in order to find ways to cope with the crisis ([World Bank 21/02/2021](#)). In the northeast 15 LGAs have a median household size of 5 and only 2 LGAs have a median household size less than 5 (Bama and Kaga

both have a median household size of 4). Twenty-eight LGAs have a median household size of 6, 13 LGAs have a median household size of 7 and three LGAs have a median household size of 8. This also then indicates that the "average" overall household size in the northeast is likely to be 6 or more* in line with the national findings, but also shows that the local picture can be very different from the overall "average" ([WFP 19/02/2021](#)).

Forty-three percent of all households incurred some form of debt, with the main reason being food-related needs (70%) of all debt-incurring households), with health and purchase of agricultural inputs being other commonly cited secondary reasons. Whilst the proportion of households and underlying reasons for debt did not

* Livelihood coping strategies are classified into the following three severity categories 'stress', 'crisis' and 'emergency'. Households may adopt more than one coping behavior, and as such households are classified according to the most severe of the strategies (WFP 19/02/2021).

change much compared to 2019, the median debt amount for food increased from 6,000 naira to 10,000 naira (a 66% increase compared to 2019) ([WFP 19/02/2021](#)). This data also corroborates the findings on coping strategies that indicate households are becoming more vulnerable to shocks and will be less able in the future to cope with them.

THE MAJORITY OF HOUSEHOLDS IN NORTHEAST NIGERIA HAVE EXPENDITURES BELOW THE MINIMUM EXPENDITURE BASKET*

Overall, 57.4% of surveyed households have expenditures below the MEB, meaning that these households did not

Food Security

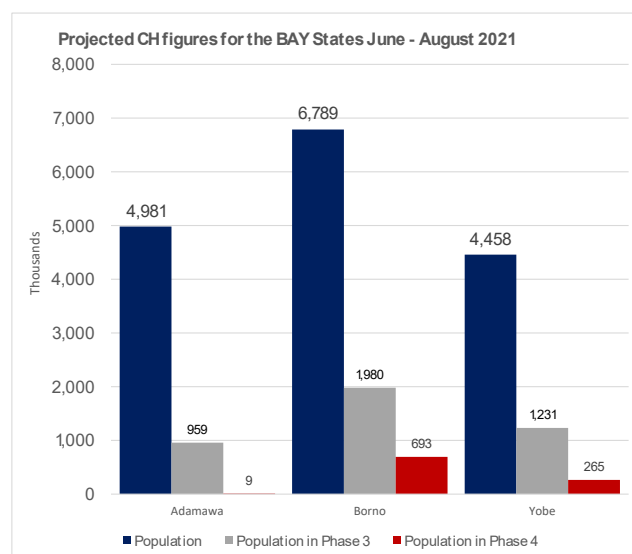
Recent data from the [WFP essential needs assessment](#) confirms Cadre Harmonise findings that food insecurity is set to increase in the coming lean season. Food consumption scores have dropped to levels comparable with the height of the crisis as the rise in negative coping mechanisms becomes more widespread. Worryingly these assessment figures do not include households in hard-to-reach areas where a reach survey from September 2020 indicates increasing pressures on households and limited options in terms of food sources or coping mechanisms. Alarming as the overall averages and median scores are when individual LGAs are looked at the level of food insecurity in some areas is far far worse.

FOOD INSECURITY IS INCREASING AS FOOD CONSUMPTION WORSENS TO LEVELS LAST SEEN IN FEBRUARY 2017

5.1 million are expected to be in critical phases of food and nutrition insecurity in northeast Nigeria in the 2021 lean season, which constitutes a 19% increase compared to the 2020 lean season ([ECHO 11/02/2021](#)). At 44%, the proportion of poor and borderline food consumption marks a ten-percentage point increase in severity compared to the previous year and is the highest value since February 2017. The increase in poor and borderline food consumption also corresponds to the increase in food-insecure population noted in the October 2020 round of Cadre Harmonise ([WFP 19/02/2021](#)).

have enough economic capacity to meet their adequate needs. Even more concerning 42% of households have expenditures below the survival minimum expenditure basket (SMEB), suggesting monthly expenditures not able to meet food needs. With a 70% median share, food constitutes the main portion of the expenditure, an indication that households are compromising on other needs to meet their other needs and visa-versa. This is backed up by data on the median expenditure on education, clothing, savings, construction and transport, which for all categories was zero, indicating that at least half of all households spent nothing on those items in the survey period ([WFP 19/02/2021](#)). These figures paint a picture of poverty and vulnerability as the norm amongst populations in northeast Nigeria.

Figure 13. Projected CH figures for the BAY States June – August 2021



HARD TO REACH AREAS (H2R) ARE OF PARTICULAR CONCERN.

In the majority of Local Government Areas (LGAs) in Borno State, outside of LGA capital towns or “garrison towns”, humanitarian actors are unable to access people shown to be in severe need of food assistance, making people living in hard-to-reach areas at high risk of food insecurity

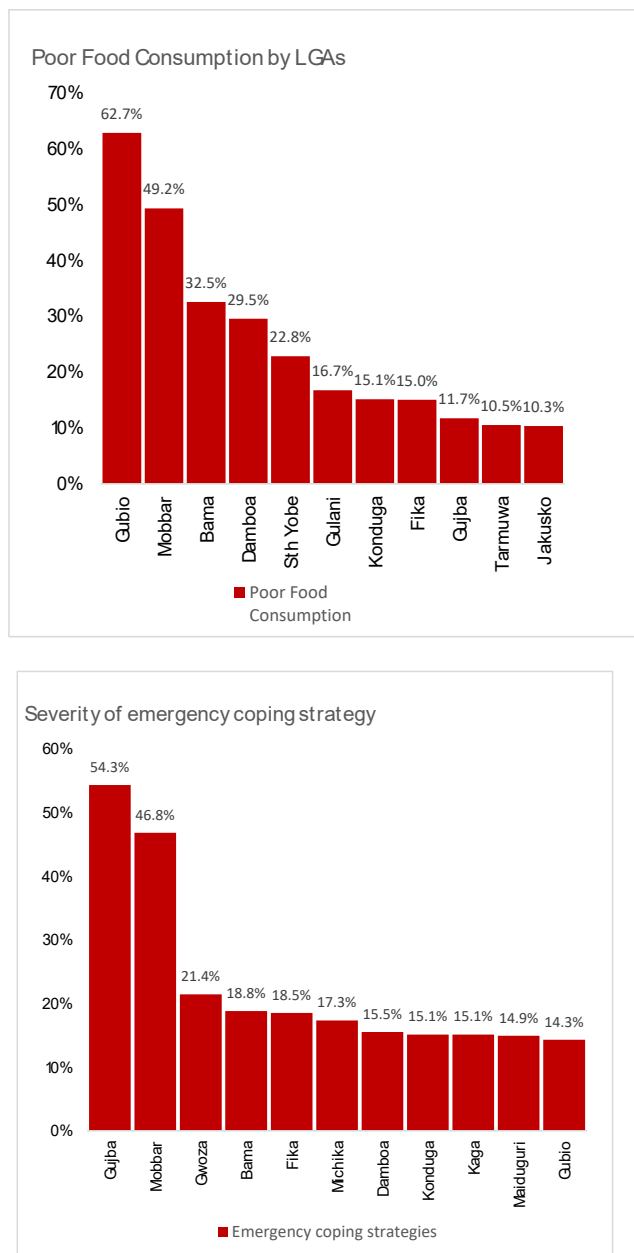
and adverse health outcomes. Data from an assessment in the H2R settlements of 4 Borno LGAs (conducted in August – September 2020) found that persistent hunger was described by 13 of the 28 Key informants. Of particular concern, KIs reported exhaustion of coping strategies, suggesting an inability to cope with lack of access to food. All these are indications that settlements have been experiencing high levels of food insecurity, and in the event, there is a shift in the conflict that isolates households and further restricts already limited food and income sources for a prolonged period, then a risk of IPC level 5 persists ([FAQ](#) 29/01/2021).

FOOD CONSUMPTION IS WORSENING

Food Consumption has worsened compared to previous years, with poor and borderline food consumption nearly as high as the peak of the crisis (2017). Borno state recorded the highest prevalence of households with poor food consumption (10%) followed by Yobe (6.5%) and Adamawa (1.2%). In total 43.7% of households fall under poor or borderline food consumption categories in the northeast region. There were 12 LGAs where over 10% of households had poor food consumption scores (see Fig 14), with the 4 worst (ranging between 63% – 30%) being Gubio, Mobbar, Bama, and Damboa in Borno state. Overall, 6 LGAs had combined poor and borderline food consumption scores for over 80% of the households, 3 in southern Yobe and 3 in Borno State ([WFP](#) 19/02/2021).

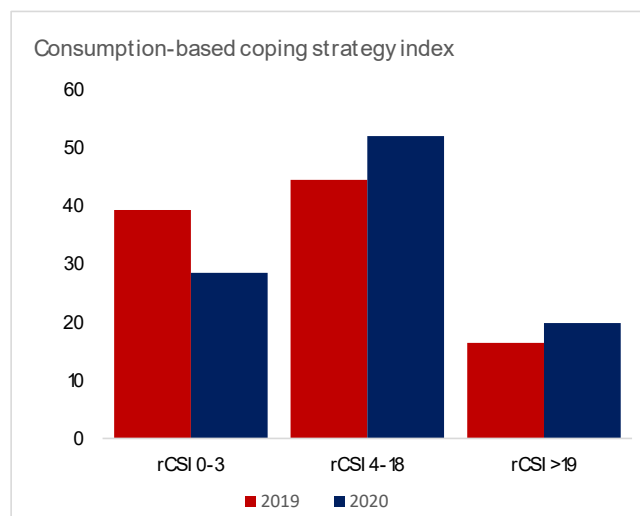
There is a clear correlation between populations with a high proportion of households having poor food consumption and the prevalence of emergency livelihood coping strategies. Seven LGAs (Fig 14) of the 11 where over 10% of households have poor food consumption are also in the list of 11 LGAs with the highest prevalence of emergency coping strategies.

Figure 14. Top Eleven LGAs in terms of Poor Food Consumption Scores and Highest Prevalence of Emergency Coping Strategies (WFP 19/02/2021).



FOOD INSECURITY IS DRIVING THE ADOPTION OF NEGATIVE COPING MECHANISM

Figure 15. Coping strategy index between 2019 and 2020Source (WFP 19/02/2021) p15.



Households are still adopting potentially harmful coping strategies in response to shocks, with 58% of households (surveyed across Nigeria) that were hit by a shock between July 2020 and December 2020 reducing their food consumption in response ([World Bank](#) 21/02/2021). WFPs essential needs analysis shows an increase in the frequency of more severe consumption-based coping strategies at the end of 2020 compared to 2019. Based on a Coping Strategy Index, the following chart shows 51.9% of households (up 7.5% compared to 2019) having a rCSI between 4 – 18, indicating both moderate frequency and use of severe consumption-based coping strategies. A further 19.8% of households (up 3.5%) have rCSI scores of 19 or over, indicating frequent use of more severe coping strategies such as adults/mothers reducing their own consumption so that children can eat ([WFP](#) 19/02/2021).

The three most common coping strategies were (1) relying on less preferred or expensive foods; (2) Reducing portion size of meals and (3) reducing the number of meals eaten in a day ([WFP](#) 19/02/2021).

NEGATIVE COPING MECHANISMS WIDESPREAD IN H2R AREAS.

A wide range of coping strategies were reportedly used by people in H2R settlements to cope with lack of access to food. The most commonly reported coping strategy was eating wild food, not normally part of people's diet. More severe coping strategies reported included making people sick, spending days without eating, and begging for food ([REACH](#) 02/02/2021).

Single female-headed households were reported to face additional challenges in accessing food and livelihood sources compared to male-headed households. A few KIs described that challenges faced by single female-headed households force some women to engage in negative coping mechanisms such as transactional sex ([REACH](#) 02/02/2021). In addition, despite not being asked directly about negative coping mechanisms used by women in the H2R settlements, two KIs from Gwoza described how hunger forced some women in their settlements to engage in sexual activities in exchange for money, food, or other goods; another KI from Bama described women to be forcefully married, potentially because their relatives could not feed them ([REACH](#) 02/02/2021).

Six KIs from Damboa stated engaging in casual labor was a severe coping strategy as it required a lot of energy and would sometimes take place in exposed areas with a high risk of conflict-related attack. A few KIs directly mentioned coping strategies that they used to apply but were no longer able to. These included getting support from neighbors or relatives, selling livestock, or eating stored food, again indicating that the food security situation was getting worse ([REACH](#) 02/02/2021).

FOOD ASSISTANCE IS CITED AS A TOP PRIORITY FOLLOWED BY LIVELIHOODS.

Food assistance is the critical priority cited by the majority of households. Based on WFP data (collected in November/December 2020 during the harvest season), food assistance was the top priority for nearly 70% of households surveyed. Livelihood support (≈12%), health/medical (≈9%), and water (≈5%) were the other main priorities mentioned. All four were mentioned as a second priority by at least 10% of households with education and shelter both a second priority for about 8% of households. Again, there were widespread differences between individual LGAs. Looking just at Borno state for example, in Kwaya Kusar water was the top priority for 52.2% of households, followed by Livelihoods (30%), Health (7.8%),

Education (4.8%), and food in fifth place prioritized by only 3.5% of households. By contrast in Gubio, Gwoza, Magumeri, and Mobbar and more than 90% of households prioritized food as their top priority. For Gubio and Mobbar this is unsurprising as these LGAs had by far the highest percentage of households with poor food consumption (see Fig 14). In Yobe there was only one LGA where less than 64% of households had food as the top priority ([WFP 19/02/2021](#)).

The lack of food is further evidenced by the high prevalence of households reporting low stock. Approximately 25% of households reported no food stocks, 34% percent households only had enough stock to last for a week, another 33 percent had enough to last two to four weeks, and only 8.5 percent of households had enough to last at least a month ([WFP 19/02/2021](#)).

Health

Malaria cases continue a slow drop, but malaria continues to be the main cause of morbidity. Measles cases are increasing with the outbreak centered in 4 LGAs but cases are also being recorded elsewhere. Recent findings from [WFP's essential needs assessment](#) show that many households view access to healthcare as a priority, but equally, most are spending less on health than the estimated Minimum Expenditure Basket level, and some households have cut expenditure on healthcare to pay for food. Providing health services continues to be challenging in a context of increased insecurity that is negatively impacting supplies, infrastructure, and the availability of key health workers.

MALARIA IS THE MAIN CAUSE OF MORBIDITY FOLLOWED BY ACUTE RESPIRATORY INFECTION (ARI)

Malaria continues to be the main cause of morbidity with 4,189 confirmed cases during week 8 and 7,821 suspected cases with proportional morbidity at 12.0% and 22.5% respectively. Of identified causes, ARI is the next biggest cause with 6,713 cases (with a proportional morbidity rate of 19.3%) reported during week 8. Severe Acute Malnutrition (SAM) was the third-

highest identified cause of morbidity (see nutrition), however, "other causes" accounted for 14,050 cases in week 8 and a proportional morbidity rate of 40.4% ([EWARS 08/03/2021](#)).

Overall, malaria numbers continue to decrease (from approximately 29 thousand confirmed cases in January to 24 thousand confirmed cases in February). This is backed by data from the latest CCCM survey where cases have decreased to almost half in mid-February with 29% of camps reporting malaria cases as compared to 55% of camps at the end of January 2021 ([CCCM 22/02/2021](#), [CCCM 12/02/2021](#)).

Similarly, there were slight drops in identified cases of ARI and SAM. However, the Early Warning, Alert and Response System (EWARS) reporting for February whereas only at 65%, below the 80% target and less than the 67% for January so other than malaria, other main contributors to morbidity probably remain close to static.

The 2021 cumulative total for Acute Watery Diarrhoea is 4,527 cases with a morbidity rate of 1.2%, again with February showing a small drop in the number of cases reported.

Table 3. Main causes of morbidity February 2021

Syndrome	# Cases weeks 5 - 8	Cumulative Cases 2021	Proportional Morbidity 2021
Malaria (confirmed)	24,312	53,073	13.90%
Malaria (suspected)	40,477	84,996	22.20%
Acute Respiratory Infection	36,573	77,275	20.20%
Severe Acute Malnutrition	7,711	15,879	4.10%
Acute Watery Diarrhoea	1,897	4,537	1.20%
Bloody diarrhoea	561	1,078	0.30%
Mental Health	129	306	0.10%
Other	69,592	145,403	38.00%
Total Cases	181,643	383,139	100%

MEASLES OUTBREAK GROWS.

There were 98 suspected measles cases in week 8 bringing the cumulative total of cases for 2021 to 592, this constitutes a steady increase with 201 cases occurring in weeks 1 – 4 and 391 cases in weeks 5 – 8. There are over 50 confirmed cases in Magumeri LGA with approximately 10 confirmed cases in each of Maiduguri, Jere and Gubio LGAs. There was a large outbreak of measles in the first half of 2019 (reaching a peak of over a thousand cases per week for several months), but this was not repeated in 2020 ([EWARS](#) 08/03/2021).

HEALTH SERVICES DELIVERY STILL CONSTRAINED BY VARIOUS CHALLENGES.

Although the health sector reports that the health situation is improving under the new northeast Nigeria Health Sector strategy, health service delivery continues to be hampered by the breakdown of health facilities infrastructure. In addition, there is a serious shortage of skilled health care workers, particularly doctors, nurses and midwives, with many remaining reluctant to work in inaccessible areas because of ongoing armed conflict. Continuous population displacements disrupt and challenge health program implementation and access to secondary health care and referral services in remote areas (especially hard-to-reach areas) is significantly limited ([Health Sector](#) 11/02/2021).

HOUSEHOLDS HEALTH EXPENDITURES ARE LOW DESPITE BEING CITED AS A PRIORITY NEED.

Data from the recent essential needs assessment (ENA) found that both median household health expenditure (at 500 Naira) and the mean household health expenditure (at 1,359 Naira) were below the monthly health spending level as per the MEB which is calculated to be 2,508 Naira. Fifteen percent of households reported reducing spending on health and education as one of the coping strategies used as many struggled to afford enough food. Forty-three percent of all households incurred some form of debt, and of these over 40% cited health as either the first or second reason for taking on the debt ([WFP](#) 19/02/2021).

In terms of perceived needs, 47.4% of households identified access to healthcare as a serious unmet need (4th, just behind access to a toilet, livelihoods/income, and food were the top two unmet needs). Nearly 10% of households cited health as their number one priority and a further 30% of households chose it as their second priority ([WFP](#) 19/02/2021).

As usual, there are more acute pockets in some LGAs compared to others. In Borno Access to health care was cited as a serious unmet need by 83.7% of households in Guibo and 84.9% in Kaga, yet by only 3.0% of households in Dikwa and 18.8% of households in Gwoza. In Yobe state in 3 LGAs saw more than 90% of households citing access to healthcare as a serious unmet need (Jakusko, Karasuwa and Gujba); for Adamawa the southern LGAs of Maiha, Hong, Song and Gombi recorded the highest health needs at 76.5% of households ([WFP](#) 19/02/2021).

Finally, in terms of biggest shock to the household, the ENA found that sickness to a household member was the third-highest “most significant” shock showing that poor

health and lack of access to health care can have a major impact on vulnerable households ([WFP](#) 19/02/2021).

Nutrition

Data from the October emergency nutrition survey remains the most recent analysis for the sector, however the IPC Acute Malnutrition Analysis is expected to be available in mid-March, nutrition status in hard-to-reach (H2R) areas is presumed to be significantly worse although limited data is available ([OCHA](#) 12/19). With the harvest collected, food security levels have increased, although macroeconomic factors and other issues continue to stress populations in the northeast. Insecurity, its disruption of farming, and its impact on humanitarian aid and commerce continues to be the biggest driver of malnutrition in the BAY states.

THE RATES OF NEWLY REPORTED SEVERE ACUTE MALNUTRITION (SAM) CASES REMAIN STEADY AT AROUND 1,500 PER WEEK IN BORNO STATE ([EWARS](#) 08/03/2021; [HEALTH SECTOR BULLETIN](#) FEBRUARY 2021)

Reporting through the Early Warning, Alert and Response System (EWARS) identified 1,469 cases of SAM in week 8 (Feb 22 – Feb 28), with a morbidity rate of 4.2%. Overall, for the 4 weeks of February the total number of SAM cases were 7,711, a drop of approximately 10% from the previous month. The cumulative total for 2021 is 15,879 SAM cases at a morbidity rate of 4.1%.

However, for both issues it should be noted that low reporting occurred (65% in week 8, below the target of 80%) due to the ongoing migration to the new EWARS mobile version by reporting sites. This will probably result in lower numbers reported ([EWARS](#) 08/03/2021).

GLOBAL AND SEVERE ACUTE MALNUTRITION RATES HIGH

The Preliminary Report for the Nutrition and Food Security Surveillance: northeast Nigeria – Emergency Survey (October 2020 round 9) covers the following geographic regions:

Adamawa State: Southern Adamawa, Northern Adamawa

Borno State: Northern Borno, Southern Borno, East Borno, Central Borno, MMC/Jere

Yobe State: Central Yobe, Southern Yobe, Northern Yobe

The highest rates for acute malnutrition amongst children under five based on MUAC screening were in Yobe State, with a GAM rate of 5.2% and a SAM rate of 2.1%, clearly higher than the other states. However, numbers in Borno were also high, especially for children aged 0 – 59 months (WHZ) where they were almost on a par with Yobe. Within the states, SAM (MUAC) rates were highest in Northern Yobe (2.8%), Central Yobe (2.7%) and highest of all in Northern Borno (3.1%). Three of the five domains in Borno and all domains in Adamawa recorded SAM rates below 1%, whereas all domains in Yobe SAM rates were over 1.5%. (NBS 17/12/2020).

Figure 16. Prevalence of global and severe acute malnutrition in children Source: National Bureau of Statistics 17/12/2020

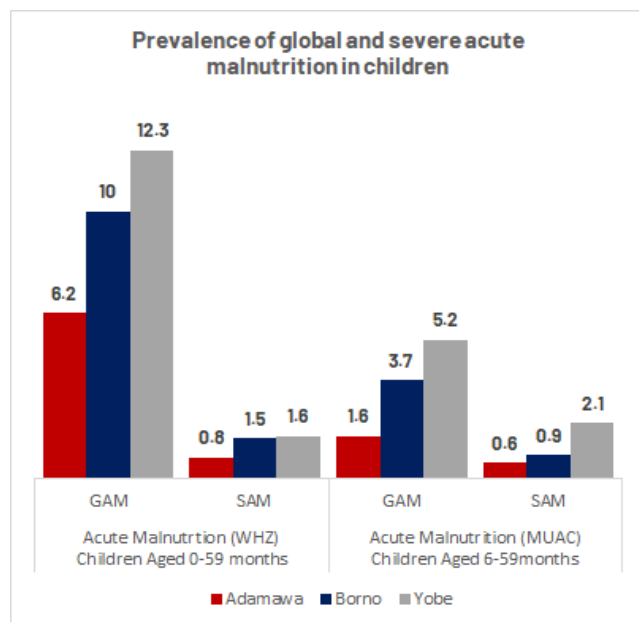
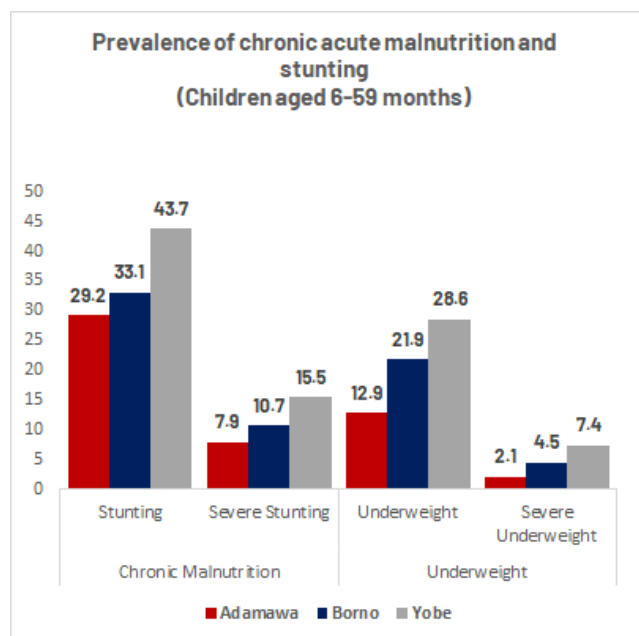


Figure 17. Prevalence of chronic acute malnutrition and stunting in children aged 6 to 59 months Source: National Bureau of Statistics 17/12/2020



GAM AND SAM RATES ROUGHLY UN-

CHANGED SINCE THE PREVIOUS YEAR

There is limited data from previous surveys, with most previous assessments calculating malnutrition rates at the LGA level. However, there is data from October 2019 from several LGAs in the East Borno domain. The GAM (WHZ) rates were Ngala (14.3%), Dikwa (10.4%) and Bama (8.7%) and the SAM (WHZ) rates were Ngala (3.8%), Dikwa (2.1%) and Bama (1.2%). The malnutrition rates for these individual LGAs were therefore perhaps on average slightly higher in 2019 than 2020 with East Borno recording a GAM (WHZ) rate of 9.6% and a SAM (WHZ) rate of 1.8%. However exact comparisons are not possible as not all East Borno LGAs from 2020 were included in the 2019 survey ([FHI360](#) 01/11/2019).

CHRONIC MALNUTRITION MOST PREVALENT IN YOBE

Stunting is a measure of chronic malnutrition that occurs because of inadequate nutrition over a longer period. The prevalence of stunting was highest in Yobe (43.7%). Underweight refers to the proportion of children with low weight-for-age. It can be interpreted as the number of children that are too thin for their age. The prevalence of underweight children was also highest in Yobe (28.6%) by state. In terms of domain within states, all domains with Yobe showed high prevalence for stunting (ranging from 42.7% to 44.6%) and underweight (ranging from 27.8% to 35.9%). Outside of Yobe, Central Borno had the highest prevalence of stunting (35.9%) and Northern Borno had the prevalence of underweight (26.2%) ([NBS](#) 17/12/2020).

Interestingly, in-line with nutrition survey data that highlighted Yobe as the state with the highest prevalence levels of acute and chronic malnutrition, almost one in five respondents (19%) from camps in Yobe cited malnutrition as the second main health issue, this was not flagged as an issue at all in Borno or Adamawa ([IOM](#) 28/01/2021).

MALNUTRITION PERCEPTIONS IN HARD-TO-REACH AREAS

Households in hard-to-reach areas have little to no access to humanitarian food assistance. They are mainly consuming wild foods and face wider food consumption gaps, and elevated levels of malnutrition are likely facing Emergency (CH Phase 4) outcomes ([FEWSNet](#) 31/01/2020).

Data from a November assessment indicates widespread

concern amongst the population over malnutrition in H2R areas. Over a third of the LGAs assessed estimated that in the majority of settlements half or more of children were malnourished. In half of the assessed LGAs one in five settlements or more perceived that children were dying due to malnutrition ([REACH 26/01/2021](#)).

It is difficult to make concrete analysis of such perception



The narrative in the section was primarily derived from [WFP](#) and [REACH](#) assessments as published. It is important to note that the WFP assessment was conducted in October 2020.

The majority of the affected people in displacement sites report boreholes as their main source of water, however the availability and access to water for drinking remains challenging. Many residents must depend on unimproved water sources, thus putting themselves at risk of contracting and spreading water borne diseases, or face issues accessing enough water for daily needs. Lack of access to adequate sanitation facilities is even more widespread with almost half the population reporting access to a toilet as a serious concern.

AFFECTED POPULATION REPORTS SERIOUS UNMET WASH NEEDS

In northeast Nigeria access to toilets has been reported as one of the most serious unmet needs* by 48.3% households affected by the conflict and COVID-19. This is followed closely by access to safe water for drinking/cooking mentioned by 42.1% and other hygiene needs (33.1%) ([WFP 19/02/2021](#)).

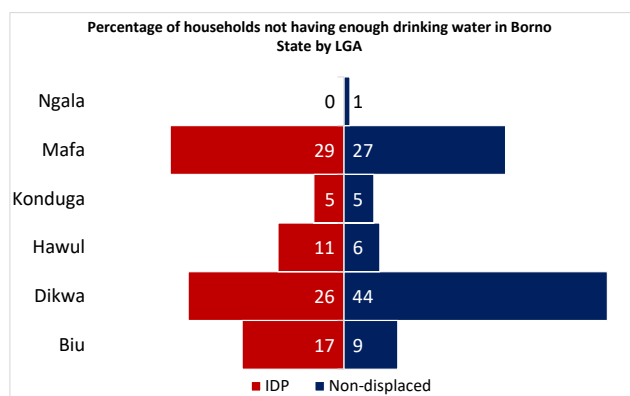
Approximately 12 out of 60 assessed LGAs in the BAY states reported that 40.1% – 60% of households were using an unimproved water source. The situation was worse in 3 other LGAs, Michika (Adamawa state) reported over 80% of households used an unimproved water source and the proportion in Fune (Yobe) and Bayo (Borno) was between 60.1 and 80% ([WFP 19/02/2021](#)). However, the majority of other LGAs access to improved water sources was between 60 – 100%. This aligns with findings from a REACH assessment in Borno State, where 6 LGAs reported between 67% – 99% of households assessed had access

surveys. As they continue, trend analysis will at least show how perceptions are changing. Although the numbers above are not particularly high it should be noted that the survey took place during the harvest season when food would generally be most abundant.

to an improved water source ([REACH 19/01/21](#)).

However, this still leaves hundreds of thousands of households across the BAY states without access to an improved water which constitutes a serious health risk especially with diseases such as cholera being endemic in the region. Finally access to an improved water source does not guarantee enough water, and many households reported not having enough water.

Figure 18. Households reporting not enough drinking water by LGA in Borno State ([REACH 19/01/21](#))



Access to adequate sanitation is also limited in some areas. In Yobe State, 80% or more of households in 10 out of the 17 LGAs assessed reported using unimproved toilets. In Adamawa only two LGAs reported above 80% of households using unimproved toilets, but the majority of the remaining LGAs (12) reported between 60.1% and 80%, according to the same WFP report ([WFP 19/02/2021](#)). Bathing facilities in camp settings are also of concern with 14% of showers in need of repair. In addition, 21 sites across 4 LGAs do not have showers on site. ([CCCM 22/02/2021](#))

COMPLEXITY OF THE HUMANITARIAN

* Based on the Humanitarian Emergency Settings Perceived Needs Scale (HESPER).

CRISIS MAKES PREVENTING AND CONTROLLING THE SPREAD OF DISEASE DIFFICULT.

In the northeast, access constraints, congestion in IDP camps and poor sanitation infrastructure poses a great challenge in preventing and controlling diseases including COVID-19. Already, several COVID-19 cases have been reported in several IDP camps. The humanitarian setting poses challenges for COVID-19 as the lack of infrastructure hampers disease prevention and treatment, rendering public health and hygiene promotion responses almost impossible ([ECHO](#) 11/02/2021).

The lack of space to construct new latrines and the need to scale up manual desludging and rehabilitation of old latrines which is normally a last resort are issues WASH sector partners continue to grapple with ([OCHA](#) 4/2/2021). Managing solid waste too is proving difficult as camps in MMC face huge challenges in disposing of solid waste and large dump sites have since formed in most of the camps which are both unhygienic and unhealthy ([OCHA](#) 4/2/2021).

Partners encounter difficulties transporting and delivering WASH NFIs as some such efforts have in the past been disrupted by unknown persons who scare away agency staff and loot supplies ([OCHA](#) 4/2/2021).

AVAILABILITY OF SOAP AND WATER FOR HANDWASHING HAS IMPROVED.

Despite the difficulties faced by humanitarians in transporting and distributing NFIs due to security challenges and COVID-19 restrictions, sources like the

World Bank and IOM have reported improvements in availability of soap and water for handwashing. According to IOM, most IDPs in 39% of the 2,396 sites (including camps and host communities) assessed had access to soap and water, a 3% improvement from a previous survey. Everyone in 18% of sites reported having access to soap and water ([IOM](#) 01/12/2020).

During the lockdown, the World Bank estimated that only 31% of the rural population in Nigeria had access to a basic hand washing facility with soap and water, compared to 53% of the population in urban areas. However across Nigeria, the share of households with insufficient access to soap for hand-washing dropped from 24% to 11% between June 2020 and November 2020 ([World Bank](#) 21/02/2021). Frequent handwashing with soap and running water has been one of the established infection prevention and control strategies since the outbreak of the virus ([WHO](#) 05/05/2020).

WASH SITUATION STILL REMAINS POOR IN HARD-TO-REACH AREAS.

There was no new data on WASH in hard-to-reach areas reported in February. It is unlikely that the situation has improved with such areas reporting much lower access to protected water sources and other WASH facilities than the rest of the BAY states. Insecurity is still a contributing factor that is negatively impacting settlement's ability to access safe water sources. In all LGAs surveyed at least some of the settlements reported that safety concerns were preventing households from accessing their preferred water source. In half (8) of the assessed LGAs this proportion was between 61 – 100% of assessed settlements ([REACH](#) 27/01/2021).



SHELTER

Incidents of fire outbreaks, movement of IDPs and the unavailability of land space for the expansion of camps and camplike settings remain key challenges in the northeast. Data also indicates that those living in hard-to-reach areas rely mostly on makeshift shelters or in some cases living in the bush as conflict continues to lead to the destruction of homes. The situation is not much better for returnees, many of whom find their homes destroyed.

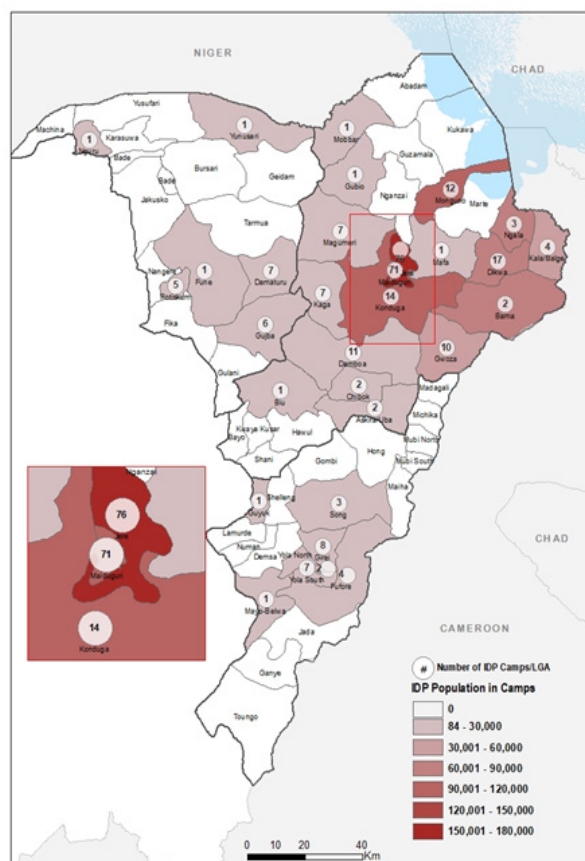
DENSITY OF IDP POPULATION IN

CAMPS AND NUMBER OF CAMPS/LGAS

Data from Displacement tracking matrix round 35 has indicated that Jere has the highest displacement camps with 76 camps followed by Maiduguri with 71.

It should be noted that camps differ in size, so an LGA with 2 large camps may have a larger IDP camp population than an LGA with several smaller camps. Also, the slight majority of IDPs live in host communities outside of camps, so some LGAs with only a few small camps can still have a sizable IDP population.

Figure 19. Number of IDP camps and IDP camps population in BAY area



CONFLICT CONTINUES TO IMPACT SHELTER IN HARD-TO-REACH (H2R) AREAS AND IN AREAS OF RETURN.

Conflict continues to take a toll in H2R areas where available data indicates that many households are living in vulnerable situations with shelter solutions that are insecure and exposed to climatic factors.

According to a REACH report, NSAGs continue to destroy shelters in hard-to-reach areas of Borno State, leaving people with no choice but to sleep in bushes ([REACH](#) 02/02/2021).

Data from a survey of H2R covering 16 LGAs in Borno state found that 79% of settlements identified makeshift shelters as the main shelter type, followed by permanent house/shelter (15%) with 12% of settlements indicating that living in the bush was the prevalent shelter location ([REACH](#) 26/02/2021).

MANY CAMPS AND CAMP-LIKE SETTINGS DO NOT MEET SPHERE STANDARDS FOR SHELTER SPACING AND ARE THUS OVERCROWDED AND VULNERABLE TO DISEASE OUTBREAKS AND OTHER DISASTERS.

According to ECHO, four out of five IDPs are living in overcrowded conditions with makeshift and temporary shelters built near each other. This makes physical distancing impossible exacerbates risks of a disease outbreak due to poor health and sanitation conditions ([ECHO](#) 11/02/2021). There is a high need for additional land space to accommodate the growing need for shelters, but suitable lands are currently unavailable.

A comparative analysis of the CCCM site tracker report for the first and second half of the month showed a movement away from emergency shelter to makeshift housing, possibly brought on by depreciation of emergency shelter and continued displacements. Across 36 sites in 11 LGAs in the first half of the month, 48% of the IDPs were living in emergency shelters. This reduced to 43% by the second half. And conversely the number living in makeshift shelters which was reported as 31% in the first half increased to 36% in the second half. The number of those in public facilities remained at 6% ([CCCM](#) 22/2/2021, [CCCM](#) 12/02/2021).

The sector also reports that more than 1,200 households in four LGAs were sleeping in the open without any shelter while 2,084 HH are sharing shelters with other families in 11 LGAs across the BAY states ([CCCM](#) 12/02/2021). In addition, the movement of over 1,301 HHs from host communities into the GSSSS Camp in Monguno, Borno State resulted in an increase in the threshold of an already congested camp.

IDPS LIVE IN SUBSTANDARD SHELTERS THAT OFFER NO SECURITY OR CLIMATE PROTECTION.

Many IDPs live in substandard shelter including unfinished, abandoned buildings and makeshift, partially damaged or shared shelters with OCHA reporting the need for shelter for over 75,000 HHs ([OCHA](#) 4/02/2021).

In Borno State, more than fifty percent of households in Damboa, Bayo, Mobbar, Gwoza, Kala/Balge reported having shelters built with non-durable material for walls. A similar number in four of these LGAs (Damboa, Mobbar, Gwoza and Kala/Balge) reported having non-durable roofs

([WFP](#) 19/2/2021).

The situation does not appear to be much different in Yobe state where most housing assessed by WFP used non-durable material (wood, mud, corrugated materials, plastic sheets, and straws) rather than durable materials (like cement, bricks, and stones). In Adamawa, the situation was better as the majority of shelters in most LGAs had durable walls and/or roofs, however in some of the conflict affected LGAs (Michika and Madagali) roughly two thirds of shelters had non-durable walls, and even more non-durable roofs.

Another consequence of substandard shelter is their proneness to fire outbreaks. The CCCM sector has made efforts for partners to put more emphasis on sensitization and campaign awareness on fire outbreaks in line with the reviewed fire sensitization guidelines ([CCCM](#) 22/2/2021). Despite this at least five fire incidents have been reported across camps in Monguno LGA in recent weeks directly affecting over 800 people. ([OCHA](#) 4/2/2021).

INCREASE IN CASES OF FORCED EVICTION, SECONDARY OCCUPATION AND LIMITED ACCESS TO LAND.

Recent surveys, reports and interactions show that there has been an increase in the cases of forced eviction particularly at informal sites within Maiduguri

and Jere Local Government Areas of Borno State, Pockets of similar issues have also been recorded in Gerei Local Government Area of Adamawa. An assessment by the HLP Sub-sector shows that there is about 60% of increase in the cases of forced eviction from April, 2020 to date, with IDPs living in the informal settlements most affected. There are also issues of Secondary Occupation which is also leading to another dimension of eviction particularly at areas of returns like Banki and Bama being most affected. The need for access to more land for construction is Shelter particularly for returnees and secondary occupant is paramount but limited access to land coupled with security restriction on expansion within return areas is another challenge (HLP Sub-sector 21/03/2021).

SHELTER SITUATION FOR RETURNEES IS CONCERNING.

As the unilateral relocation of IDPs by Borno State Government continues, the condition of houses in some areas of return are dire as between 40-85% of refugees returning from Cameroon to Niger Republic report finding that their houses had been destroyed ([UNHCR](#) 10/2/2021, [OCHA](#) 4/02/2021). According to the latest DTM data, 27% of households were either fully or partially damaged and 73% (down by 1%) were not damaged ([IOM](#) 28/01/2021).

Protection

Persistent attacks by NSAGs on civilian and IDP locations is making the protection environment more volatile and concerning. Continued cross-border movements by refugees in neighbouring countries returning to Nigeria and internal displacements are pushing people into overcrowded camps or areas with limited humanitarian access. Factors continue to increase the vulnerability of populations, in particular women and girls who are at risk of exploitation and abuse.

PERSISTENT ATTACKS BY NSAGS ENDANGERS CIVILIANS AND THREATENS THE HUMANITARIAN SPACE.

The security situation remains very unstable, with a very high level of active hostilities between the Nigerian army forces and the NSAGs. NSAGs also increase their criminal activities and armed conflict

by burning properties, robbing farmers, abducting, and killing people. Increased informal checkpoints by NSAGs pose an additional threat to civilians, who are regularly abducted or killed during such incidents, in both Borno and Yobe States ([ECHO](#) 11/02/2021). Attacks appear to be getting increasingly daring as a rocket propelled grenade struck Maiduguri, the Borno State capital, killing at least 10 and injuring 46 others ([AOAV](#) 24/02/2021).

RETURNEES FACE HARDSHIP AND ABUSE

Individuals who fled to neighbouring countries for safety report being abused during and upon their return to the country. As many as 43% who returned from Niger Republic reported not being provided with food or water on their journey back while 7% reported being separated from

their families ([UNHCR 10/02/2021](#)). Amongst returnees from Cameroon (7.8%) reported being mistreated and experiencing physical violence. 9.7% reported being separated from their families and 17.3% reported not being provided with food and water on their return ([UNHCR 10/02/2021](#)). Having lost their homes and other possessions, such returnees often become IDPs and must deal with the same difficult conditions other IDPs face.

Borno Government has facilitated the transfer of some 3,400 IDPs to Marte LGA, in late November, continuing unilateral relocation of civilians to hard-to-reach and inaccessible areas which started in August 2020 ([OCHA 4/2/2021](#)).

Marte is among the worst-affected areas of Borno State and has not been accessible to aid workers since 2014 and has only recently been recaptured by the government ([OCHA 01/03/2021](#), [Vanguard 24/02/2021](#)).

The humanitarian community continues to advocate for principled and multi-stakeholder approach to civilian relocations across the region based on the Strategy, protection and recovery of the northeast policy agreed upon in 2017 and the Kampala Convention.

GENDER CONTINUES TO DEFINE VULNERABILITY AND EXPERIENCES.

People's experiences of conflict and violence are shaped in part by their gender. It is not surprising therefore, that women and girls are especially vulnerable to the threat of sexual violence. This is exacerbated by cultural practices of gender inequality and subjugation ([The Conversation 02/02/2021](#)).

An assessment by the CCCM Sector found that of the 20% of households being headed by vulnerable people, 19.6% are headed by women (> 18 yrs) while 0.4% are headed by children (<18 yrs) ([CCCM 22/02/2021](#)).

Women, especially single female headed households, face additional challenges while accessing food and are engaged in negative coping mechanisms like transactional sex and street begging which suggests an inability to cope with the lack of access to food and livelihood opportunities. This also creates tension in IDP camps and host communities ([REACH 2/2/2021](#)).

Women in the hard-to-reach settlements of Borno State also reported to be forcefully married because their relatives cannot afford to feed them, and many women had to engage in sexual activities in exchange of money, food, or other goods ([REACH 2/2/2021](#)). With continued economic volatility and growing food insecurity the dependence on and prevalence of transactional sex and other negative coping mechanisms is likely to increase.

Education

While most schools have resumed, the unavailability of resources is limiting the implementation of COVID-19 precautionary measures in many schools, putting children at risk of infection. Households are not spending money on education as food and other needs are prioritized. Children are also engaged in commercial activities to generate income to support their families missing out on their schooling.

MANY SCHOOLS IN THE NORTHEAST FACE A CHOICE OF NOT OPENING OR OPENING AND PUTTING CHILDREN AT RISK.

Last year, many schools in the northeast were unable to reopen due to their inability to meet the COVID-19

preventive guidelines issued by the government, resulting in many children continuing to miss out on education. In October 2020, 80% of families surveyed reported having at least one child who was unable to go to school, mainly due to the COVID-19 related school closures (WFP 19/02/2021). In Yobe State, there has been a 21% increase in the number of sites (IDP camps) where between 25% and 0% of children attend school in comparison to December 2019, before the virus outbreak. IDP children in host communities were disproportionately affected (WFP 19/02/2021).

With the start of the new school year, schools appear to have reopened despite difficulties in compliance with COVID-19 prevention measures. While the majority of the schools have succeeded in resuming and suspending large gatherings, meeting other guidelines such as compulsory face masks use, daily temperature checks, constant supply of water and hand-washing facilities have proved

difficult. Many children are therefore put at increased risk of contracting (and spreading) the virus through furthering their education.

GETTING CHILDREN TO RETURN TO SCHOOL MAY BE CHALLENGING.

Despite the resumption of schools, many children have been unable to return to school for various reasons. Many households reported having to engage their children in income generating activities and farming, to support the family, rather than send them to school due to the economic hardship brought by the COVID-19 restrictions. Some organizations have begun to engage community workers to try to get children back to school ([NRC](#) 22/02/2021).

The 2019 JENA found cost to be the biggest barriers to school enrollments in the northeast. Schools typically refuse to enroll children who are unable to pay for school uniforms or Parent-Teacher Association (PTA) and other levies ([EIEWG](#) 06/12/2019). It is unsurprising that this continues to be the case, given the economic downturn since the COVID-19 outbreak and it concurs with data from 6 LGAs in Borno state where the majority of households cited cost as the main reason children did not attend school ([REACH](#) 19/01/21).

This lack of school attendance reflects that education is behind priorities such as food assistance and support to livelihoods and income generation. However, there are some exceptions, interestingly, 69% of respondents in Mobbar reported education as a third priority need. Indeed, more respondents prioritize education over other needs like food assistance (which wasn't reported as a need at all), healthcare, water and shelter ([WFP](#) 19/02/2021) which were all listed as priority needs in the LGA by the Humanitarian Needs Overview ([OCHA](#) 15/03/2021). Entire communities in the LGA were completely deserted in the peak of the insurgency as a vast majority of the people left to seek refuge in Niger Republic. Many returned when the towns became accessible in 2017 but are still struggling to put their lives together ([UNHCR](#) 11/03/2017). Schools in the area are unlikely to be able to provide much in terms of quality education with findings from the joint education needs assessment (JENA) conducted in 2017 reporting little or no access to education areas such as Mobbar* ([ACAPS](#)

01/11/2017).

HOUSEHOLD EXPENDITURE ON EDUCATION DECLINES

An essential needs assessment conducted by WFP ([WFP](#) 19/02/2021) reports the median expenditure on education as zero. This means that at least half of the over 12,000 respondents interviewed did not spend any money on education related costs during the period surveyed. Fifteen percent of those who reported still spending on education described reducing expenses on health and education as the most used crisis coping strategy. **EDUCATION SERVICES IN MANY CAMPS EITHER NOT AVAILABLE OR UNDER RESOURCED**

Forty one percent of camps neither have access to a functional primary school nor alternative basic education on site. For those camps that do have access to education services CCCM data showed that over 60% of the camps were in need of instructional and writing materials. For camps without education facilities many children walk to nearby schools, however for 29% the distance is over 5km ([CCCM](#) 22/02/2021). Fifty percent of sites do not have access to functioning secondary schools ([CCCM](#) 21/12/2020).

THERE IS A LACK OF ACCESS TO EDUCATION SERVICES IN HARD-TO-REACH (H2R) AREAS.

With no new data on education services in H2R areas released in February, it is assumed that access to education remains constrained. A REACH survey of H2R areas in 16 LGAs in Borno and Adamawa found that in 12 LGAs, approximately 50% of settlements or less had access to educational services. Only in Dikwa, Marte, Gubio and Gwoza did this percentage of settlements rise above 60%. Overall access to education services was reported for 48% of assessed settlements. It should be noted that many children will be sent to informal Islamic schools outside of the formal education system (this is the case throughout northern Nigeria), so positive answers to "do you have access to educational services" would most likely include those schools ([REACH](#) 26/01/2021).

11. 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.

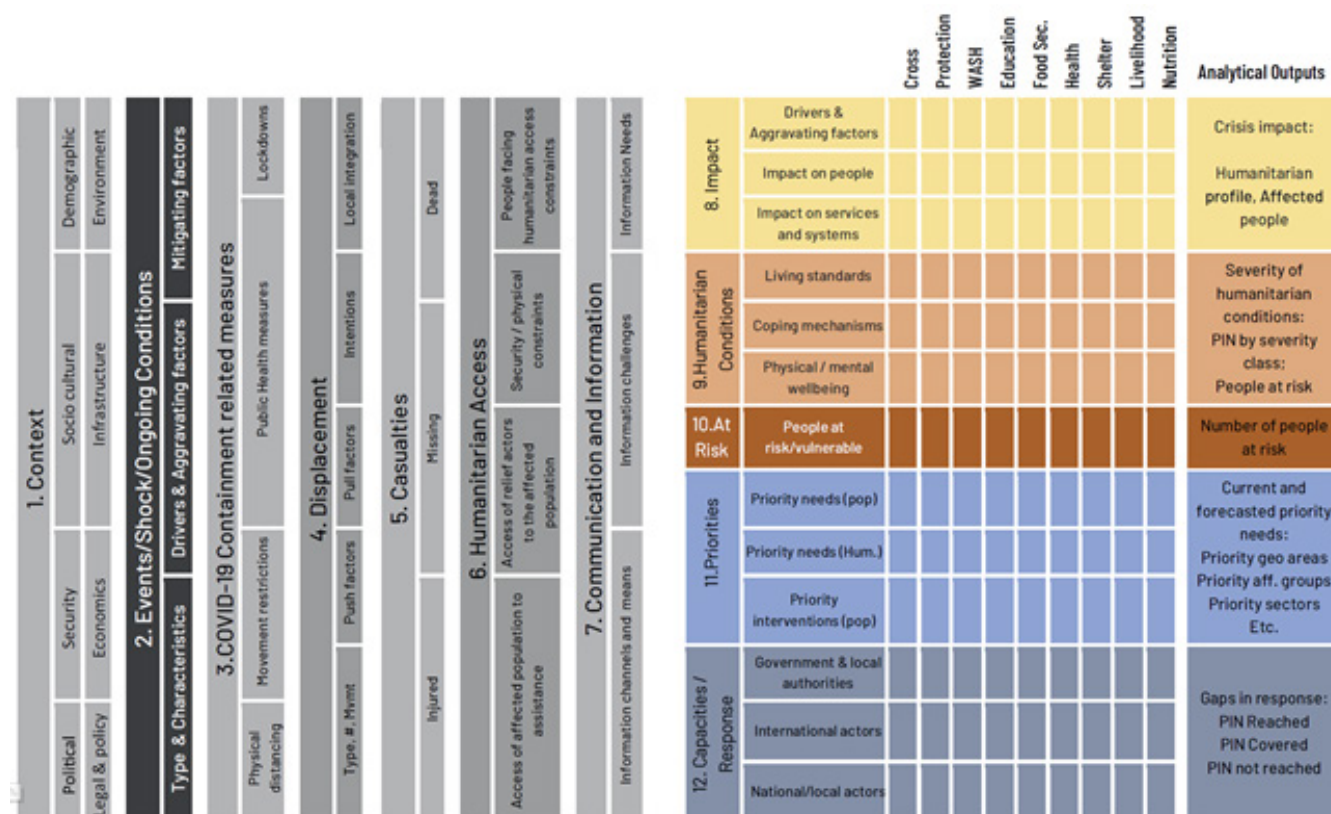
Methodology. To guide data collation and analysis, IMMAP and DFS designed a comprehensive Analytical Framework to address specific strategic information needs of UN agencies, INGOs, LNGOs, clusters, and HCTs at the country level. The analytical Framework is essentially a methodological toolbox used by 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 14.

Figure 20. 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 household, 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. Details of the information captured for the report are available below (publicly available documents from the 01 February

to the 03 March were used).

Figure 21. Documents by Location, Timeline and Primary Categories (Analytical Framework)

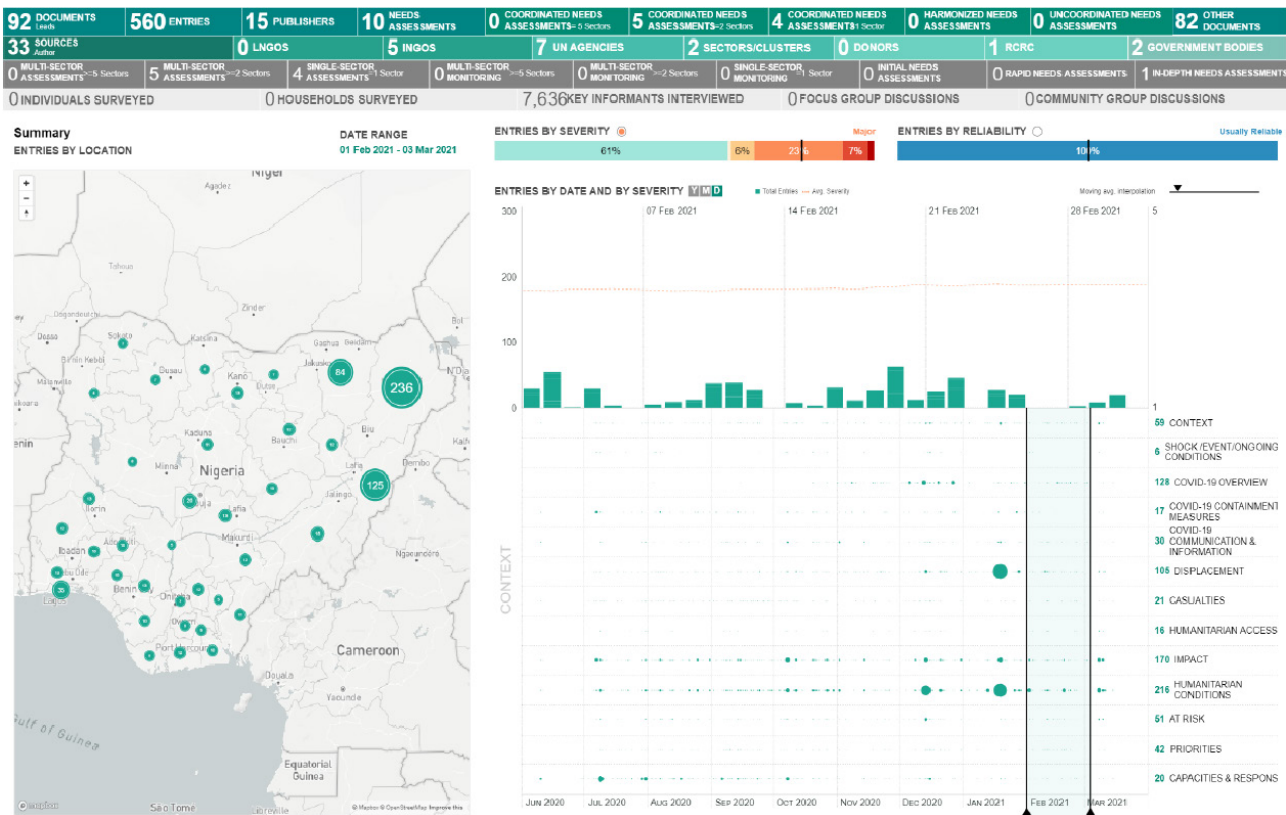


Figure 22. Documents and Entries by Sector and Affected Group

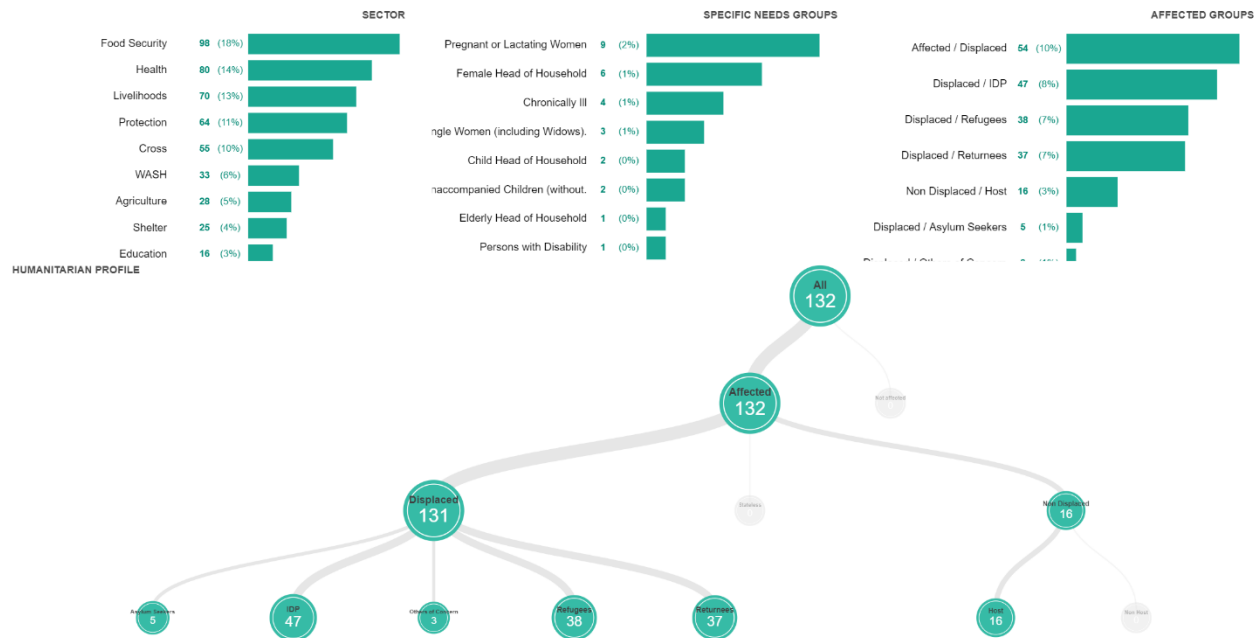


Figure 23. Entries by Sector and sub-Categories of the Analysis Framework

SECTORAL FRAMEWORK	# of Entries	median severity	CROSS	FOOD SECURITY LIVELIHOODS	HEALTH	NUTRITION	WASH	SHELTER	EDUCATION	PROTECTION	AGRICULTURE	LOGISTICS	
	TOTAL	321	55	98	70	80	14	33	25	16	64	28	9
IMPACT147	Drivers/Aggravating Factors	82											
	Impact on People	73											
	Impact on System & Services	46											
	Number of People Affected	1											
HUMANITARIAN CONDITIONS266	Living Standards	127											
	Coping Mechanisms	37											
	Physical & mental wellbeing	55											
	Number of People in Need	23											
AT RISK46	People at risk / Vulnerable	46											
PRIORITIES35	Priority Needs (Pop)	15											
	Priority Needs (Staff)	12											
	Priority Interventions (Pop)												
	Priority Interventions (Staff)	9											
CAPACITIES & RESPONSE3	Government & Local Authorities	3											
	National & Local Actors												
	International	18											
	Number of People Reached	1											

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 27).

Table 4. IMMAP/DFS Analysis Workflow

IMMAP/DFS Analysis Workflow					
	1.Design & Planning	2.Data collection & 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 92 relevant documents (articles, reports) from 33 sources	Categorization of the available secondary data (560 excerpts)	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 10 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	Information gaps & limitations	Lessons learnt workshop, recommendations for next round
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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