



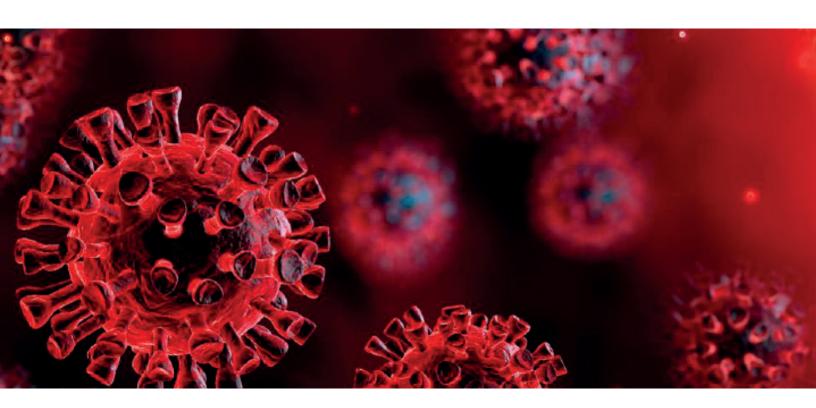


COVID-19 SITUATION ANALYSIS

CRISIS TYPE: EPIDEMIC



JUNE 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

Confirmed Cases	COVID Related Deaths	Tests Conducted
167K Total confirmed cases	2K Total death recorded	2.3M Test samples collected
1.K New confirmed cases in June 2021	48 New COVID related deaths in June 2021	163K New test samples collected in June 2021
38.8% Decrease compared to May 2021	433.3% Decrease compared to May 2021	-28.1% Decrease compared to May 2021

Figure 1. COVID-19 overview in Nigeria

COVID-19 EPIDEMIC OVERVIEW AND VACCINATION PROGRAM

The number of new cases decreased again by 27.8% in June dropping to 1,152 cases compared to 1,596 registered in May despite an increase of 7.6% tests from 2.1 million people in May to 2.3 million people tested in June. The country's trajectory indicates that Nigeria is yet to experience a third wave of COVID-19.

Following the 4,024,000 doses of Oxford/AstraZeneca vaccine received by government through COVAX facility in March, the statistics indicate that as of 28th June, 3,441,146 doses have so far been utilized for the 1st and 2nd dose vaccinations, which is approximately 88% of the total AstraZeneca COVID-19 vaccine stock in the country (NPHCDA). The people that have been vaccinated with 1st dose are 2,265,805 while those that have received 2nd are 1,175,341, respectively. The vaccination rollout continues with the Government of Nigeria expecting to take delivery of another 41 million additional doses of COVID-19 vaccines by the end of September 2021.

The government is focusing largely on creating awareness around second dose and reopening of first dose administration along with vaccine rationalization in the states. This is to ensure that those who received their first dose of the vaccine go out and get their second dose for maximum protection. For the BAY states the number of

new cases in June dropped significantly to 45, down from 121 new cases in the previous month. Therefore, despite overcrowded camps, poor hygiene and sanitation and continued population displacements there is no identified COVID-19 outbreak with the IDP population.

COVID-19 CONTAINMENT MEASURES AND COMMUNICATIONS

Travel bans for specified countries and mandatory quarantine remain in place, however many of the internal containment measures have been relaxed. Most entertainment businesses have reopened, adopting increased outdoor seating where feasible. Cinemas and night clubs have now also reopened – albeit at 50% capacity and with restricted operations after midnight. In the northeast, a recent assessment by <u>IOM</u> found that 72% of respondents stated there were no specific COVID-19 mitigation measures set up in their locality, 90% were living among host communities while 10% were living in camps or camp-like settings.

The NCDC collaborated with other partners to strengthen data use in response to COVID-19 by analysing existing data on COVID-19 to understand the social, economic, and political factors that influence knowledge and perception of COVID-19 among Nigerians.

SECURITY AND HUMANITARIAN ACCESS

With what appears to be the death of Boko Haram's leader, Abubakar Shekau, a change in strategy by OAGs in the northeast has been reported. With ISWAP and Boko Haram announcing a peace pact, it appears that more efforts will be made to persuade the local populations to support the insurgency in contrast to the indiscriminate use of violence against civilians that has been seen in the past.

However, OAG attacks on population centers continue with 150,000 displaced in Geidam and Yunusari Local Government Areas (LGAs). In addition, humanitarian organizations in the northeast have raised concerns about the returns process, noting that many areas of return remain unsafe—including Damasak and Dikwa towns, which both experienced major NSAG attacks in April.

The escalating insecurity in the northeast operational context remains a major challenge, threatening to further shrink the humanitarian space and impede access to

program sites. Illegal Vehicle Checkpoints (IVCPs) across key supply routes in the northern and southern axes of the Borno State are also hampering delivery of aid.

Finally flooding brought about by the onset of the rain season is further constraining both road and air access especially to the more remote garrison towns.

HUMANITARIAN NFFDS

A newly developed <u>food insecurity monitoring system for inaccessible areas</u> indicates that communities in 4 LGAs of Borno state (Bama, Gwoza, Kukawa and Magumeri) are at high risk of experiencing IPC level 5 (famine) food insecurity. Levels of Global Acute Malnutrition (GAM) are also estimated to be at extremely critical (phase 5) levels in these areas. Illness and a lack of access to health facilities are also contributing factors to a higher morbidity risk.

The situation is further compounded by the onset of the rainy season with flooding already damaging shelters, WASH infrastructure and hampering road and air logistics. The change of season is also demonstrable in the upsurge in cases of malaria, Acute Respiratory Infection (ARI) and Acute Water Diarrhea (AWD). Conflict remains the main driver of displacement and with-it humanitarian need as OAGs continue to launch attacks on civilian and military targets. COVID-19 infection rates remain low and overall economic data shows a small improvement, however high levels of unemployment, lack of income generating opportunities, reduced access to farmland due to conflict and low household purchasing power are all contributing factors to increased humanitarian needs.

The volatile situation and continuing forced displacements are leading to increased protection risks across the region. Schools remain open but there is little information on attendance levels or whether classroom practice has returned to normal.

2. Economic Context

NIGERIA'S ECONOMY RECOVERING FROM COVID IMPACT, BUT UNEMPLOYMENT AND INFLATION REMAIN HIGH

The Nigerian economy has started to gradually recover from the negative effects of the COVID-19 pandemic although unemployment and inflation have remained high. Following the sharp output contractions by the economy in the second and third quarters, GDP growth turned positive in Q4 2020 reaching 0.5 percent (yearon-year) in Q12021 attributed to agriculture and services sectors. The GDP growth is expected to reach 2.5 percent in 2021, while inflation is expected to remain elevated in 2021 - but likely to decelerate in the second half of the year to reach about 15.5 percent - following the removal of border controls and the elimination of base effects from elevated food price levels. With "fuel subsidies resurfacing besides additional spending for COVID-19 vaccines, and security challenges, the fiscal deficit of the Consolidated Government is expected to remain elevated at 5.5 percent of GDP". Nevertheless, the IMF reported that employment levels continue to fall dramatically and, together with other socio-economic indicators, are far below pre-pandemic levels. With the recovery in oil prices and remittance flows, the strong pressures on the balance of payments have somewhat abated, although imports are rebounding faster than exports and foreign investor appetite remains subdued resulting in continued FX shortage (The Cable, 18/06/2021).

HIGH PRICES PUSH ADDITIONAL 7 MILLION NIGERIANS INTO POVERTY

Surging inflation and rising prices have pushed an estimated 7 million Nigerians below the poverty line in 2020 alone. Although Nigerian economic growth has resumed after the COVID-19 shock, with food inflation, heightened insecurity and stalled reforms slowing growth and increasing poverty levels. Food prices have been rising in Nigeria and pushing more people into poverty for a few reasons. First, the depreciation of the Naira by 13% in the past year has resulted in steep increases in the prices of imported food items, such as rice, sugar, milk, beverages, and frozen food. Second, because of the rapid population growth reaching 2.6% per annum while agriculture value added has been growing at 2%, this means that agricultural output that is affected by instability, banditry, terrorist attacks, poor infrastructure and climate change is barely keeping pace with consumption hence causing food shortage supply that results into high prices for the limited available sources(The Conversation 27/06/2021).

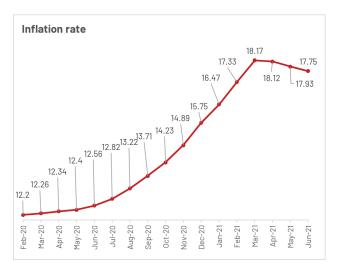
With the growing insecurity that is driving farmers out of their traditional routines in most of agrarian states and displaced millions of people rendering farming activities negligible in the regions of North-East, North-West, and North-Central, regarded as the major food-producing, there is a real threat of hunger looming large over the country. Nigeria was reported as the 10th country in the

world in the 2020 Global Hunger Index besides other countries such as Afghanistan, Haiti and Chad. According to the North-East Development Commission, over 2.6 million people are at risk of hunger in Borno State alone, largely due to Boko Haram/ISWAP terrorist attacks. This figure represents nearly half of the state's population, estimated at 5.86 million (2016), while the Food and Agricultural Organisation warned that insurgency has denied 65,800 farmers access to agricultural inputs (<u>The Punch</u>, 27/06/2021).

NIGERIA'S INFLATION RATE DROPS FURTHER IN JUNE 2021

The annual inflation rate continued its slow decrease for the third month in a row, reaching 17.75% in June of 2021, from 17.93% in May, amidst a small slowdown in prices of food & non-alcoholic beverages, we suppose that this slight decrease is leaning on the same factors identified in the May like the decrease in food and nonalcoholic beverages prices. In addition, annual core inflation excluding prices of agricultural produce slowed at 13.09% in June (vs 13.15%) in May. On a monthly basis, consumer prices creeped up 1.06%, following a 1.01% rise in the previous month. Even though there is an overall decline, the prices of food, the urban inflation rate increased by 18.35% (YOY) in June 2021 from 18.51% recorded in May 2021, while the rural inflation rate increased by 17.16% t in June 2021 from 17.36% in May 2021.

Figure 2. Inflation rate in Nigeria, starting February 2020



This rise in the food index was attributed to increases in the prices of Bread and Cereals, Potatoes, Yam and other Tubers, Milk, Cheese and Eggs, Fish, Soft drinks, Vegetables, Oils and fats, and Meat and non-food items

whose prices also increased were recorded as garments, passenger travel by air and by road, motor cars and vehicle spare parts, shoes and other footwear, pharmaceutical products, medical services. Furthermore, the decline in the rate of increase in the consumer price index indicates that the inflation rate in Nigeria might have peaked and is on its way downward. However, it is still worth noting that an inflation rate of 17.75% remains far superior to the 11.02% recorded before the closure of land borders in 2019. Even as the inflation rate dropped further for the third consecutive month since March 2021 as per graph below, it is worth mentioning that a decline in inflation does not necessarily imply that prices are falling. It simply means that commodity prices are increasing albeit at a slower pace (The Punch, 30/06/2021; Trading Economics 30/06/2021).

EXCHANGE RATE GAINS AT OFFICIAL WINDOW AS NIGERIA'S EXTERNAL RESERVES DROP BY OVER \$100M

The Naira appreciated against the US dollar at the Investors and Exporters window for the month of June to close at N411.50/\$1 from N412.00/\$1 recorded at the end of trade on 31st May 2021. On the parallel (black) market, the Naira remained stable as it closed at N502/\$1 on the same day, having dropped from N500/\$1 the previous day. During the month, the rate dropped as low as N410/\$1 and as high as N412.96/\$1.

Figure 3. Exchange rate & CPI in Nigeria, starting Febuary 2020



Nigeria's external reserve dipped by \$103 million on Monday, 28th June 2021 to stand at \$33.42 billion. This represents a 0.31% decline compared to the \$33.52 billion recorded the previous day and it is its lowest position since October 2017 as its year-to-date decline hits \$1.96 billion, while its month-to-date decline stands at \$812.3 million. This is despite the recent bullish trend recorded in the global oil market. This decline is attributed to a reduced forex earnings, especially from crude oil export due to the cut in production quota, as well as the widening international trade deficit.

The crude oil market made some recovery from its earlier losses, closing above \$75 per barrel on 29th June 2021 as against \$68.52 per barrel recorded on 31st May. According to the OPEC Secretary-General, the overall brighter picture tied to the pandemic recovery efforts has led to significantly improved oil market conditions and prospects for future growth (OPEC 29/06/2021).

3. Context - Security

The local media continues to report on the worsening security situation in Nigeria with bandits, kidnapping and the continuing Boko Haram insurgents highlighted as major issues affecting the country. On a daily basis across the country, communities are being raided, people are being killed or abducted by rampaging bandits and other criminal elements (*Today Online* 14/06/2021). The country is experiencing a spike in violent conflicts as indicated by the average weekly count of violent incidents, and banditry is the main contributor to conflict count and casualties. In the four weeks leading to 06 June 2021, Nigeria recorded

63 violent conflicts resulting in 452 deaths, 11 injured, and 268 kidnap victims. The North Central was the most problematic region, far outpacing the Northeast with its decade-long war against terrorists. Banditry (defined as a conflict caused by bandits, gunmen, robbers, and kidnappers) overtook political and religious issues as the most critical cause of lethal conflicts in Nigeria. Escalating attacks on unarmed citizens and government security agents in states including Kaduna, Benue, Katsina, Imo and Osun states are the leading cause of violent conflicts in Nigeria (Nextier SPD 07/06/2021).

Table 1: Shows violent incidents resulting into deaths in months of May and June 2021

	South	West	Sout	h East	South	South	North	East	North	West	North Central		
	May	June	May	June									
Type of Attack	Fatalities	Fatalities											
Abduction/forced disappearance	0	0	0	0	0	0	0	0	0	0	0	0	
Air/drone strike	0	0	0	0	0	0	0	0	9	0	0	5	
Armed clash	6	12	47	64	42	3	132	143	57	117	49	62	
Attack	5	21	30	9	1	4	20	5	79	281	233	90	
Mob violence	6	7	0	2	2	0		0	0	0	0	1	
Remote explosive/landmine/IED	0	0	0	0	0	0	13	18	0	0	0	0	
Shelling/artillery/missile attack	0	0	0	0	0	0		13		0		0	
Violent demonstration	0	1	0	0	0	0	0	0	0	2	1	0	
Grand Total	17	41	77	75	45	8	165	179	145	400	283	158	

Source: (ACLED 30/06/2021).

These patterns of rising armed group attacks and kidnappings have contributed to a growing sense of insecurity and fear, which community members generally described as worsening since the beginning of the pandemic (Mercy Corps 27/06/2021). A recent report released entitled "Mass Atrocities 2020 Tracking" states that 4,556 people were killed in 2020, representing a 43% jump from 2019. Of that number, 3,188 were civilians and 698 were state security agents. The report further states that the highest number of deaths were reported in the three northern regions of the country with a cumulative

of at least 3,720 killings while the three southern regions recorded at least 828 killings. Borno State has been, for a decade, ravaged by insurgency and is now the epicenter of the security crisis in the North-East, which is reflected as it ranks as the state most impacted by insecurity, with at least 1,176 conflict-related deaths. Gombe state in the Northwest however recorded the lowest number with at least one (1) mass atrocity-related death. The highest number of deaths in the southern region of the country was recorded in Delta State, with at least 141 killings, which were mostly attributed to rival cult gang clashes (*Global Right*s 28/05/2021). In comparison, first quarter of 2021, the same organization released report entitled

"Violent Incidents Report: January – March 2021" in which it reported that, at least 1,603 people were killed in violent attacks across Nigeria between January and March 2021 and approximately 1,774 people were abducted within the same three months. The report further revealed that of all people killed, about 921 people were killed by suspected bandits, 207 people killed by persons suspected to be members of Boko Haram or its breakaway faction, ISWAP, 205 killed in isolated attacks and 106 lives were claimed by cult clashes. Also, 79 people died through extra-judicial killings, communal crises led to the death of 53 people and 32 people killed by herdsmen (*Premium times* 17/05/2021)

HERDER-FARMER CLASHES: THE NEW NORMAL

In recent times, the farmer-herder conflict has escalated in almost every part of the country, becoming, by its frequency, a new normal resulting in displacement of hundreds of thousands and sharpened ethnic, regional, and religious polarization. This new trend of clashes has generalised a feeling of hopelessness with regards to a government's willingness to solve the problem and the capacity and capability to deal with the problem. According to a 2019 report by Foreign Affairs puts the death toll at 10,000 within a two-year period (Nextier SPD 02/06/2021). In last month, a fight between two men, a Yoruba man and Hausa man in Shasha market in Ibadan triggered a wave of conflict that spilled out of the market and into the host community, with the Yoruba targeting northerners. In protest of the killing of people from the north, northern traders blocked food supply chains and cattle movement southwards, pushing food prices upwards.

The combination of environmental degradation and violence attributable to climate change has pushed northern herders southward in search of pasture and water, resulting in almost daily clashes with farming communities (Crisis Group 30/06/2021). The intensity of the violence varies from region to region, but so far, Nigeria's northwest and north-central zones have been hit the hardest. Violence between the two groups has claimed more lives than the Boko Haram jihadist insurgency in the north-east, disrupting rural communities and threatening Nigeria's stability and food security (*The Africa Report* 09/06/2021). In addition, the pandemic movement restrictions have forced herders to change their migration patterns. With fewer grazing routes, herders have sometimes encroached on farmland, which has become more valuable considering COVID-19-related food insecurity. The resulting disputes have sparked cycles of violence between farmers and herders, deepening conflicts that have plagued Nigeria for years, particularly in the Middle Belt (Mercy Corps 27/06/2021).

KIDNAPS-FOR-RANSOM PLAGUE SCHOOLS ACROSS NIGERIA

Nigerian education system is faced with a spate of mass kidnappings and abductions by criminal gangs, with kidnappings for ransom motives. With the spate of recent school kidnappings, community and parental trust in the education system could shrink significantly, while exacerbating the problem of access to quality and equitable education. In recent months, a series of kidnappings of schoolchildren and students were orchestrated in central and northwestern Nigeria, where armed gangs have terrorized the population for a decade, looting villages, stealing cattle and carrying out mass kidnappings for ransom. Between December 2020 and March 2021, over 600 school going children have been reported kidnapped through at least five reported cases of abductions in northern Nigeria which resulted into the closure of about 600 schools in the region (Amnesty 14/04/2021).

In mid-June, gunmen also attacked a university in the northern state of Kaduna, killing one student and kidnapping five people, including three students (Africa news 18/06/2021). On 17th June, Federal Government College in Kebbi State, a University for girls in northwestern Nigeria was targeted in an attack that killed one police officer, three teachers and more than 80 students went missing as police reported and this was the third attack targeting school children or students in less than three weeks in northwestern and central Nigeria <u>CBS News</u> 18/06/2021). The attack on the Bethel Baptist High School was the 10th mass school Kidnapping since December in northwest Nigeria, left 140 students missing as armed bandits seeking ransom payments attacked students as they were in the process of sitting exams (france24 05/07/2021). Since December 2020, nearly 900 children and adolescents have been abducted in Nigeria in attacks on their schools.

DEATH OF BOKO HARAM FORMER LEADER AND RENEWED ALLEGIANCE TO ISWAP MAY CHANGE THE DYNAMIC OF THE CONFLICT AND ITS IMPACT ON CIVILIANS

Boko Haram confirmed the death of its dreaded leader, Abubakar Shekau, and announced its new leader during the reporting period (*Reuters* 19/06/2021, *Daily Post* 21/06/2021). After the death of Shekau, (who was widely criticized for his high handedness, indiscriminate use of violence and targeting civilians and fellow Muslims)

reports seem to indicate that the two factions (Boko Haram and ISWAP) will work together in a jihad on Nigeria after declaring a peace pact (*Daily Post* 26/06/2021).

Since then, ISWAP has embarked on a "winning hearts and minds" campaign, cajoling people living in various camps in the northern part of Borno State back to their villages. Their strategy includes assuring the targeted population of safety, security, and economic support once they return to their villages, which they fled at the height of the insurgency. (*Daily Trust* 13/06/2021). The group has also gone ahead to announce its own governor over some territories in Borno State, an announcement that has been refuted by the state's government (*Vanguard*, 13/07/2021).

It is important to note that past jihad efforts in the country by Boko Haram and other extremist Islamic groups have been characterized by indiscriminate use of violence against civilians.

SECURITY VOLATILITY IN BAY STATE CONTINUES TO AFFECT LIVING CONDITIONS.

The decade-long conflict in Northeast Nigeria continues to take its toll on the population. The growing food insecurity, shrinking humanitarian access and overcrowded camps are just some of the life-threatening consequences that women, men, and children are forced to deal with every day. Due to the rapidly deteriorating security situation in Northeast Nigeria, more families are fleeing their homes to survive and guite often, they come to camps to seek refuge, but the living conditions also present its own set of challenges. Overcrowding in camps is increasingly becoming an issue due to large groups of people fleeing areas recently attacked by NSAGs. But more worrying to UNHCR is the lack of space, which prevents physical distancing and increases the risk of the spread of communicable diseases such as COVID-19, measles, and cholera. It also increases the risk of fire hazards in camps due to limited distance between cooking points (UNOCHA 18/06/2021).

The humanitarian organizations in Northeast have raised concerns about the returns process, noting that many areas of return remain unsafe—including Damasak and Dikwa towns, which both experienced major Organised Armed Group (OAG) attacks in April—and have little access to livelihoods and basic services, including those provided by relief actors and government institutions (USAID 07/06/2021).

The security situation in the northern parts of Yobe state, especially in Geidam and Yunusari Local Government Areas (LGA) remains precarious as suspected NSAG operatives have maintained presence in the nearby area in proximity to both Geidam and Yunusari towns (OCHA 11/06/2021). Whereas in Adamawa, the security is relatively calm but highly unpredictable, particularly for Madagali and Michika Local Government Areas (LGAs), which are located in the northern part of the state bordering the Sambisa forest (OCHA 11/06/2021). The worsening security situation in Borno State has witnessed in the reporting period at least six civilians being killed, and 53 others injured during an armed clash between NSAGs and government forces (GFs) in Damboa LGA on 2 June. Similar clashes were reported in Rann town, Kala Balge LGA near the Cameroon border, barely three days after the Food Security Sector (FSS) partners pre-positioned 950 tons of food and nutrition supplies (OCHA 11/06/2021).

The latest reports by Nigeria Security Tracker (NST) indicates that the number of deaths caused by different security related incidents of political, economic and social grievances, has been on the rise since 2011. Borno as the epicenter of Boko Haram recorded the highest number of security related deaths compared to the rest of other states in the region. Approximately, 33,891 conflict related deaths have been recorded in Borno followed by 4,034 deaths in Adamawa and 3,062 deaths in Yobe since 2011. The first 6 months in 2021 represented 5,034 deaths compared to 9,694 deaths recorded during the entire year of 2020. Accordingly, the deaths from terrorism in northeast fell to 216 in June, a 79.4% decline from 1051 deaths recorded in May, making it the lowest in the since the beginning of the year. Figure 4 below illustrates deaths and cumulative deaths over time attributed to violence. The blue line shows the number of deaths per month, and the red shows the cumulative total deaths. The number of deaths is a conservative estimate, based on numbers reported by the press.

Deaths over time (Jan 2016 - May 2021) 1.800 80.000 1.600 70,000 Death Per Month 1 400 1.200 50.000 40,000 800 600 20,000 400 10.000 Death per month
 Cumulative death

Figure 4. Death from Non-State Armed group actions

Source: NST 30/06/2021

4. Humanitarian Access

The operating environment in BAY remains volatile, particularly in Borno State where security and access constraints and illegal vehicular checkpoints along supply chain corridors restrict movement of materials and humanitarian staff (WFP 25/06/2021). The worsening insecurity, marked by a spate of non-state armed group (NSAG) attacks and clashes with government forces, continue to impact ongoing aid operations across local government areas (LGAs) of Borno State, especially in the northern axis. Operations in Mobbar (Damasak town) and Dikwa LGAs have been limited to critical life-saving response sustained through third parties/communitybased actors since mid-April and humanitarian footprints remain low across some locations including Ngala, Monguno and Damboa LGAs due to heightened risks of violence (UN OCHA 11/06/2021).

The escalating insecurity in the northeast operational context remains a major challenge, threatening to further shrink the humanitarian space and impede access to programme sites. Following the armed clashes near Shehu Masta IDP camps in Dikwa and Konduga LGAs where at least 2 civilians were injured in crossfire and over 20 shelters were set ablaze, some IDPs have started moving out of the camp to host communities and the LGA reception center (UN OCHA 18/06/2021). Since the beginning of 2021, ISWAP has been on the offensive through the first quarter, launching a series of attacks on garrison towns and the "humanitarian hubs" protected by the army, resulting in the suspension of aid deliveries to already desperate people - many of whom have been repeatedly displaced. ISWAP is consistently hostile to relief agencies in the Northeast and targets their facilities, abducting aid workers at humanitarian hubs and on highways, and killing some of them (*The New Humanitarian* 17/06/2021).

General deterioration of security and shrinking operational contexts remain major concerns for the aid workers. During the month, the non-state armed group (NSAG) operatives have maintained illegal vehicle checkpoints (IVCPs) across key supply routes in the northern and southern axes of the Borno State along Damboa-Biu road, in Damboa LGA, stopping civilian commuters and demanding to see their identity documents before allowing them to go. An aid worker abducted at one of such IVCPs along Maiduguri-Damaturu road in early January regained freedom on 14th June 2021 after over five months in captivity (UN OCHA 28/06/2021). In addition, incidences of NSAG IVCPs that have been reported daily for over three weeks in neighboring Damboa LGA are also increasing in Gwoza and Pulka, with implications for movement of aid convoys and assets which are typically key targets of IVCPs (OCHA 18/06/2021).

INCREASED OAG ATTACKS ON HUMANITARIAN INFRASTRUCTURE AND STAFF AFFECT SERVICE DELIVERY.

In recent times, OAGs have increasingly targeted humanitarian staff and their infrastructure apparatus restricting relief actors from reaching affected populations in need of humanitarian services. It is reported that between January and March 2021, humanitarian

organizations nearly recorded about 1,200 security incidents that affected accessibility in Adamawa, Borno, and Yobe, compared with approximately 700 incidents during the same period in 2020. The continued 0AGs attacks against civilians and humanitarian traffic along key roads in the northeast, has left aid workers to depend on the UN Humanitarian Air Service (UNHAS) to reach field sites which is also limited by space and restricted programmatic criticality activities (USAID 07/06/2021). The availability of helicopters to field locations is currently very restricted due to space limitations, weather conditions and security concerns, which is impacting ETS deployments as the security situation remains volatile (WFP 04/06/2021).

Two critical aid facilities including a nutrition stabilization center and women's protection/empowerment unit both run by an INGO partner - were directly targeted by suspected NSAG operatives in Gujba town, Gujba LGA in the reporting period. The nutrition stabilization center was hosting some 38 children suffering from severe acute malnutrition (SAM) at the time of the attack on 17 June. Although staff managed to escape with all the sick children unhurt, vital supplies including food, NFIs, water hygiene and sanitation (WASH) kits and lighting equipment were looted from the facility. Sewing machines and other equipment stockpiled to support vulnerable women were also stolen from a women's empowerment facility in the same location during the attack. It was the second attack directly targeting the nutrition stabilization facility this year as partners continue to contend with an insecure operating context to sustain critical services to affected and vulnerable populations in the state (UN OCHA 28/06/2021).

According to the UN, the OAG attacks in Damasak and Dikwa during March and April that damaged humanitarian facilities and targeted aid workers, resulted in the suspension of projects and evacuation of workers. As of April 2021, the UN estimated that approximately 1 million people—including the entire population of LGAs of Abadam, Guzamala, Kukawa, and Marte—reside in inaccessible areas with limited access to aid relief (<u>USAID</u> 07/06/2021). Recently, children have become continuously targeted by Boko Haram through abductions, forced recruitment, and repeated attacks on schools with motives to use children, particularly girls, to carry improvised explosive devices (*European Union* 04/06/2021).

The continued attacks on health or community centers affects the operational capacity of humanitarian organizations. Due to security concerns and funding constraints, the scale down of operations by Terres des Hommes(TDH) in Rann is creating a major gap in the health response, especially primary healthcare services and temporary reduction of footprints by other organizations in critical locations including Damasak and Dikwa continues to disrupt the delivery of critical health interventions/ services such as life saving routine vaccines, including measles for affected populations (UN OCHA 11/06/2021).

Limited telecommunication network coverage in Geidam LGA is impacting efforts by humanitarian partners to remotely follow up and monitor the situation of households returning to communities across Geidam town where about 150,000 people were displaced in late April. Most areas in Geidam and Yunusari LGAs are still inaccessible to UN and INGO staff due to ongoing insecurity (<u>UN OCHA</u> 28/06/2021).

5. COVID-19 Epidemic Overview

NEW CASES CONTINUE TO DECLINE

Table 2. COVID-19 Nigeria (NCDC 27/06/2021)

	Total samples tested	Total confirmed cases	Total active cases	Total discharged cases	Total deaths
Nigeria	2.313,174	167,467	1,399	163,949	2,119

In June 2021, Nigeria recorded a total of 1,152 new cases, a decrease of 27.8% as the number of COVID-19 cases reached 167,467 cases despite an increase of 7.6% in the number of tests conducted since the outbreak (from 2,150,581 in May to 2,313,174 in June 2021). While the cumulative number of cases in June reached 167,467 cases, the positivity ratio remained at 0.7, implying an incident rate of 1:143,000. There were more than 5x as

many deaths in June – forty-eight (48) – compared to nine (9) deaths recorded in May. Most of the deaths occurred in Nasarawa state 26), Lagos State (17), Benue State (2) while Delta, Ogun and Ondo States recorded 1 death each, even though Lagos and Abuja remain the COVID-19 hotspots because its' economic and political capital of the country.

Table 3. Monthly Progression of COVID-19 Outbreak in Nigeria

	31-Jul	31-Aug	30-Sep	30-Oct	29-Nov	27-Dec	31-Jan	28-Feb	28-Mar	25-Apr	30-May	27-Jun
New cases per month	17,556	11,176	4,983	3,673	4,891	17,002	46,828	24,415	6,936	2,126	1,596	1,152
# of testing conducted				612,154	776,768	935,037	1,356,773	1,580,442	1,778,105	1,924,294	2,150,581	2,313,174
# Total Prevalence (confirmed cases)	42,689	53,865	58,848	62,521	67,412	84,414	131,242	155,657	162,593	164,719	166,315	167,467
# Total cases discharged	19,270	41,513	50,358	58,249	63,055	71,034	104,989	133,742	150,308	154,926	156,558	163,949
New Deaths	305	135	99	34	27	81	332	321	141	14	9	48
# Total deaths	878	1,013	1,112	1,146	1,173	1,2	1,586	1,907	2,048	2,062	2,071	2,119

POSITIVITY REMAINS STABLE AT LESS THAN 1% AS TESTING INCREASED BY 8% IN JUNE

The positivity rate remained unchanged in June even as the rate of testing increased. This is in contrast with the steady decline noticed in the previous four months (February – May), when there was a steady decline in the positivity rate recorded from 10.9 in February to 0.7 in May as indicated in Table 4 below. While the previous months decline in positive infections could be attributed to some states not sustaining enough testing rates, the stability in the rate between May and June could be attributed to the increase in awareness among residents, despites communities' persisting reluctance towards testing and stigmatization

thereof, possible health personnel shortages as staff are diverted to the ongoing vaccination roll out while insecurity is still preventing people from accessing tests. The security situation remains complex, unpredictable, and volatile, with existing health vulnerabilities exacerbated by the ongoing COVID-19 pandemic.

Table 4: Positivity rates for the last four months

	February	March	April	May	June
Positivity rate	10.9	3.5	1.5	0.7	0.7
Testing	223,669	197,663	146,189	226,287	162593

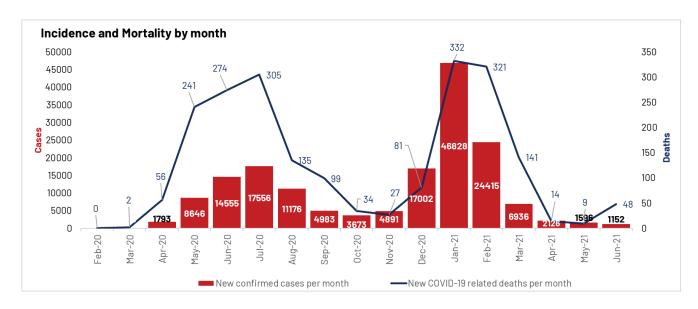
NIGERIA'S COVID-19 VACCINATION OVERVIEW

Following the 4,024,000 doses of Oxford/AstraZeneca vaccine received by government through COVAX facility in March, the statistics indicate that as of 28th June, 3,441,146 doses have so far been utilized for the 1st and 2nd dose vaccinations, which is approximately 88% of the total AstraZeneca COVID-19 vaccine stock in the country. The people that have been vaccinated with 1st dose are 2,265,805 while those that have received 2nd are 1,175,341, respectively (NPHCDA 28/06/2021).

The Government of Nigeria is expected to take delivery of 41,282,770 additional doses of COVID-19 vaccines by the end of September 2021. This expected delivery is a combination of the Oxford-AstraZeneca vaccines, the Pfizer-Bio-N Tech/Moderna and Johnson & Johnson

(J&J) COVID-19 vaccine. The government will receive AstraZeneca and Pfizer COVID-19 vaccines through the COVID-19 Vaccines Global Assess Facility (COVAX) while the Jassen vaccines will come from the African Union Commission. Accordingly, about 3,924,000 doses of Oxford/AstraZeneca/Moderna and 3,930,910 doses of Pfizer-Bio-N Tech/Moderna will arrive in the country by end of July or early August 2021 under COVAX facility donated by the United States Government. Another 3,577,860 doses of Pfizer-Bio-N Tech/Moderna COVID-19 vaccine are expected in 03 from the COVAX facility in addition to 29,850,000 doses of Johnson & Johnson (Jassen) COVID-19 vaccine that will arrive by the end of September from the African Union Commission. The government is putting in place all necessary logistics for storage, distribution, security, and accountability for the range of expected vaccines (Premium Times, 13/07/2021).

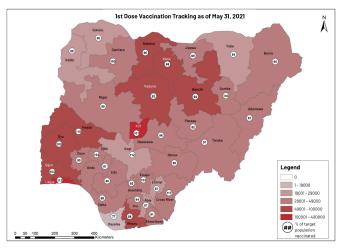


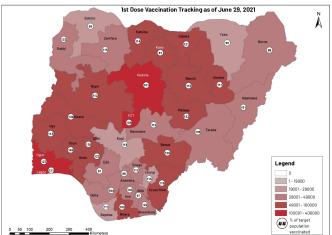


As of June 29th, 2021, a total of 2,299,987 and 1,209,491 people have been administered with the first and second doses respectively of the COVID vaccine across Nigeria. This figure represents about 98% above the initial priority target population of 1,781,732 people to be vaccinated that included health workers as well as first responders in the military, paramilitary, and other security agencies in the first roll out phase. The statistics indicate an improved community uptake of vaccines as a result of ongoing community awareness campaigns targeting adults aged 50 and older (with or without an underlying

disease) and anyone aged 18–49 with a comorbidity (such as hypertension, diabetes, lung disease, cancers and heart conditions) plus anyone without such conditions (NPHCDA, 29/06/2021). During the month in review, the government focused largely on creating awareness around second dose and reopening of first dose administration along with vaccine rationalization in the states. This was to ensure that those who received their first dose of the vaccine go out and get their second dose for maximum protection. In the same vein, eligible people who are yet to be vaccinated at all, had the opportunity to receive their first dose.

Map 1. COVID-19 vaccination in Nigeria June 2021 (1st Dose)

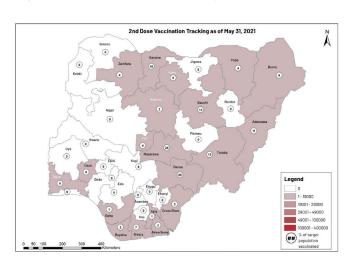


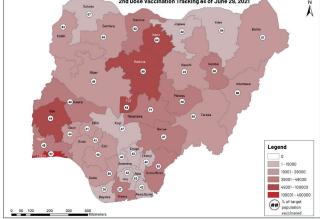


Since the beginning of COVID-19 vaccination in the country, the number of people accessing vaccines on a monthly basis have been growing tremendously in different states. By 29th of June, the number of people vaccinated in Lagos as epicenter of the disease in Nigeria increased from 313,433 in May to 362,179 in June representing a 15% increase in vaccination rate. The other states that registered an increase in vaccination rate include Kaduna with 8%, Ogun with 23%, Oyo with 14%, Kwara with 27% while River state with 15%, Katsina with 19% and Bauchi

with 18%. In Benue state, the vaccination increased by 30%, Niger by 19% while Plateau increased by 45% and Gombe state increased by 12%. According to NPHCDA as of 28th June, it reported that available data and comparative information from other countries indicate that Nigeria continues to have the highest vaccination rates in Africa with approximately 87,000 people being vaccinated daily. Egypt, South Africa, Ghana and Senegal each have a daily vaccination rate of 72,000, 52,600, 12,100 and 4,790 respectively.

Map 2. COVID-19 vaccination in Nigeria June 2021 (2nd Dose)





The statistics further indicate that in the month of June, there was an increased number of states that had started vaccinating people with a second dose of COVID-19 compared to the states registered in the month of May. By 29th June, Kano, Kaduna, Lagos and FCT including Oyo

had registered a high number of people vaccinated with second doze. Lagos registered 207,587 people, followed by FCT with 78,328, Kano with 64,007, Kaduna with 60,863 and 0yo with 57,683.

BAY STATES OVERVIEW

In the month under review, a total of 45 new cases were reported for the BAY states, the highest number came from Yobe (34), followed by Borno (7) and Adamawa (4) respectively. These statistics represent about 72% decline in new cases reported compared to 121 cases reported

in the previous month of May. Although reported cases for June from Adamawa and Yobe signified a decline compared to cases reported in May, there was an increase of cases reported for Borno compared to zero (0) reported in the previous month.

Figure 6. Monthly progession of Tests conducted and New cases

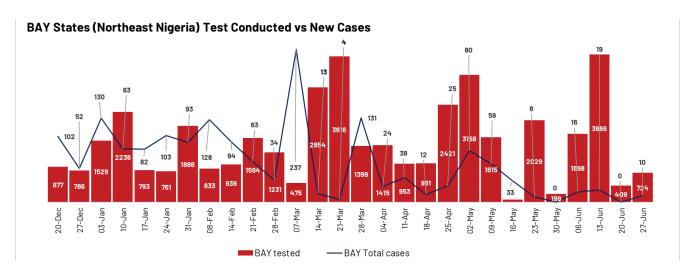


Table 5: BAY States Vaccination Overview for June 2021

State	Target Population	People Vaccinated (1st Dose)	% of people reached (1st Dose)	People Vaccinated (2nd Dose)	% of people reached (2nd Dose)
Adamawa	29,637	37,282	125%	25,310	85.40%
Borno	37,753	36,864	97%	21,132	55.90%
Yobe	30,827	27,558	89%	15,370	49.80%
Total	98,217	101,704	103.60%	61,812	62.90%

COVID-19 VACCINATION IN BAY STATES

Rollout of the second dose of COVID-19 vaccination continued across locations in BAY states. As of June 27, 2021, Adamawa has reached 37,282 (about 101% of its target population of 29,638 for the first dose, about 10.5% increase from what was reported in May (33,752). Borno and Yobe States have reached 98% and 99% of their target population respectively. Also as of June 27, 2021, Adamawa had the highest number of individuals (25,310) who were administered the second dose of the vaccine, followed by Borno state with 21,132, and Yobe with 15,370. Besides, Adamawa accounts for approximately 40.95% of the individuals vaccinated with the second dose in BAY

states given the initial total target population of 98,219. (NPHCDA, 31/04/2021).

TESTING & CONTACT TRACING

COVID-19 testing in June 2021 in the BAY states declined by 8%, from 7,065 to 6,497 samples. Yobe accounted for 53% of these samples, followed by Adamawa (35%) and Borno with 11%. There was also a slight decline in the number of contacts traced by 1% in June compared to the figures reported for May 2021 in the BAY states. There was a decline for Adamawa and Borno from 44 to 24 and 17 to 5 respectively, while that of Yobe remained unchanged.

Figure 7. Testing in BAY States

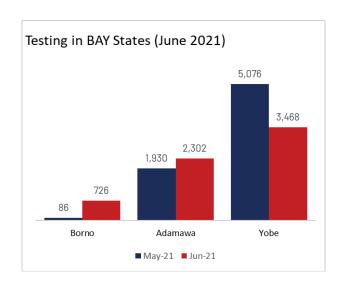
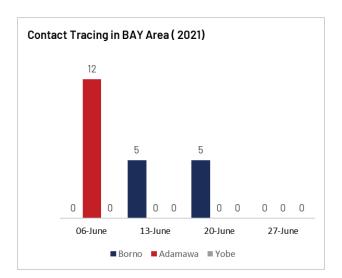


Figure 8. Contact Tracing in BAY States



6. COVID-19 Containment Measures

COVID-19: TRACING AIR PASSENGERS ESCAPED QUARANTINE

The Lagos state Commissioner for Health pointed out that Nigerians should be worried about the news of some air passengers refusing to submit themselves to the mandatory quarantine as directed by COVID-19 regulations. Since the battle against the COVID-19 pandemic is more of voluntary compliance than coercion, the government raised the alarm that 135 passengers from Brazil, India and Turkey refused to go on self-isolation after they were registered under COVID-19 regime. The government appeals to obdurate passengers to subject themselves to the isolation centers and to get tested, treated and certified negative by competent medical staff before continuing with their normal lives (*Vanguard* 03/06/2021).

As cases of the new, slightly altered version of the Delta COVID-19 variant known as Delta Plus spreads rapidly across the globe, the World Health Organisation urged fully vaccinated people to continue to wear masks, social distance, and practice other COVID-19 pandemic safety measures (*Vanguard* 28/06/2021).

RAPID ROLLOUT OF COVID-19 VACCINES AND MITIGATION MEASURES IN PLACE

A rapid rollout of COVID-19 vaccines is important while intensifying the COVID-19 preventive measures, such as physical distancing, wearing a mask, keeping rooms well ventilated, avoiding crowds, washing of hands, and coughing into a bent elbow or tissue. It is also important to note that the global supply chain for vaccines is limited, and an increasing number of Nigerians are fully vaccinated (Vanguard 16/06/2021). The biggest challenge from the pandemic has been the inability to gather for social events due to social distancing rules, which for most of the year restricted the number of attendees at indoor events to between 30-50. With these COVID-19 restrictions, events including religious services, are now broadcasting online using Zoom and YouTube Live. Most entertainment businesses have reopened, adopting increased outdoor seating where feasible. Cinemas and night clubs were restricted for the longest period but have now also reopened - albeit at 50% capacity and with restricted operations after midnight. The informal sector was less restricted as it mainly operates outdoors (How we made it in Africa 16/06/2021).

NIGERIA UPDATED ITS TRAVEL BAN

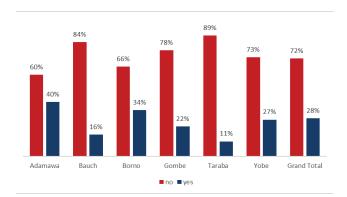
The government of Nigeria banned travelers coming from some African countries due to concerns about a fast-surging third wave of COVID-19. In the wake of possible importation of the third wave, travelers from South Africa, Zambia, Rwanda, Namibia and Uganda are not accepted into Nigeria. The travel ban for Turkey, Brazil, and India is extended for four weeks. (CGTN 29/06/2021).

In Lagos state Nigeria, the government used some strategies to curtail the spread of COVID-19 by implementing a new coronavirus law that carries strict penalties, including fines and imprisonment for violations. Under the new law, the Lagos state governor can "quarantine anyone he deems fit and for any period of time, sanction erring individuals with fines of up to 500,000 naira or imprisonment of up to five years" (Bloomberg 30/05/2021).

ASSESSMENT IN NORTHEAST NIGE-RIA FOR MITIGATION MEASURES TO PREVENT THE SPREAD OF COVID-19

As living conditions in locations of displacement are often cramped, mitigation measures to prevent the spread of COVID-19 are highly necessary. However, in 72% of the locations assessed in both camps/camp-like settings and host communities, respondents reported that no specific mitigation measures have been put in place. Out of the 72% of IDPs that said that no mitigation measures were set up in their locality, 90% were living among host communities while 10% were living in camps or camp-like settings. More concerning, specific mitigation measures to handle the pandemic were put in place in none of the camps/camp-like settings in Gombe and Taraba states. (IOM 01/07/2021).

Figure 9. Presence of mitigation measures per state (Source: IOM 01/07/2021)



However, in Northeast Nigeria, camps and camp-like settings were generally better equipped against the spread of the virus compared to locations where IDPs were living among host communities. In 75% of the locations where respondents were residing with host communities, no specific mitigation measures were put in place. In Taraba state, this number surged to 88% of the locations assessed, followed by Bauchi and Gombe with 84% and 78% respectively. Adamawa and Yobe reported having mitigation measures set up against the virus in about 40% and 28% respectively in the locations where IDPs were hosted among the local communities (JOM 01/07/2021).

7. Information and Communication for COVID-19

STRENGTHENING DATA USE IN RESPONSE TO COVID-19

The Nigeria Centre for Disease Control (NCDC), in collaboration with the College of Medicine, University of Lagos (CMUL) and other partners launched Data4COVID-19 Challenge in Nigeria as part of efforts to better understand and respond to the vast range of issues resulting from the COVID-19 pandemic and its consequences across Africa through innovative use of data. The initiative is aimed at analyzing existing data on COVID-19 to understand the social, economic, and political factors that influence knowledge

and perception of COVID-19 among Nigerians. This has been evident in Nigeria's response to the COVID-19 pandemic, where data is used to understand transmission patterns of the virus, anticipate demand on health services, manage national supply chains as well as inform risk communication strategies (*Radio Nigeria* 25/06/2021). Furthermore, the National Primary Health Care Development Agency (NPHCDA) worked closely with the National Agency for Food and Drug Administration and Control (NAFDAC), to launched an App named "MED-SAFETY" to help Nigerians report any vaccine side effect they, or another person, encountered, and they will receive timely responses from healthcare professionals (*NPHCDA* 24/06/2021).

NIGERIA AUTHORITIES STILL MAINTAINS MAY COVID-19 RESTRICTIONS IN PLACE

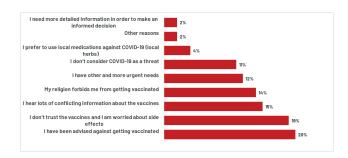
The COVID-19-related restrictions enforced in May have remained largely unchanged with coordinated efforts with partner organizations to reduce the spread of COVID-19 in the country. The success of these measures became most noticeable in June 2021 with a sharp drop in infections and deaths in the country (Guardian 12/06/2021). The Presidential Steering Committee (PSC) task force on COVID-19 restricted the host of the African Athletics Championships due to a surge of COVID-19 cases in certain countries coupled with the widespread prevalence of mutant strains of the virus outside Nigeria, which may pose the risk of importing these variants in the country (Premium times 04/06/2021). Furthermore, the Nigerian government placed a ban on United Arabs Emirates flights to Nigeria over COVID-19 testing procedures. On June 19, the UAE lifted a ban on travels between Dubai and Nigeria after a protracted disagreement between the two countries on COVID-19 protocols, but insisted on travellers from Nigeria to still undergo several other COVID-19 tests after the initial test in Nigeria when they arrived at UAE. The Federal Government refused to that as such placed a ban on United Arabs Emirates' flights from Nigeria (Punch, 01/06/2021).

COVID-19 VACCINE AWARENESS AND VACCINATION PREPAREDNESS IN NORTHEAST

An assessment was conducted for round 6th COVID-19 Situation Analysis in Northeast Nigeria in 2,384 locations - a decrease compared to the 2,397 sites assessed in the 5th round of assessment covering about 309 camps and camp-like settings and 2,075 locations where IDPs were residing with host communities. The assessment showed 99% of Internally Displaced Persons (IDPs) were aware of the ongoing pandemic, this number remained unchanged compared to the 5th round of assessments published in April 2021. While 72% of these respondents stated that there was frequent communication on the risks, transmission, and preventive measures such as hand washing and physical distancing which translates into a 3% decrease from the 75% of respondents in the 5th round that indicated the same. Whereas, considering levels of COVID-19 awareness in camps and camp-like settings specifically, it was reported that in 41% of the camps/camp-like settings assessed, everyone was aware of the pandemic (an increase from 39%), in locations where IDPs were living among host communities, respondents

in 35% (a decrease from 38%) of the locations assessed felt that everyone knew about the pandemic. In Taraba state, the perception that most inhabitants knew about the coronavirus pandemic was the highest at 54%, followed by Adamawa and Yobe, at 52% and 49% respectively. During the 6th round of assessment, respondents were tested on their knowledge and perception on vaccines against COVID-19. Approximately, 94% of IDPs stated that they have heard about vaccines against COVID-19 but in the state of Adamawa, only 31% of respondents reported not being aware of the existence of vaccines against COVID-19 (IOM 30/06/2021).

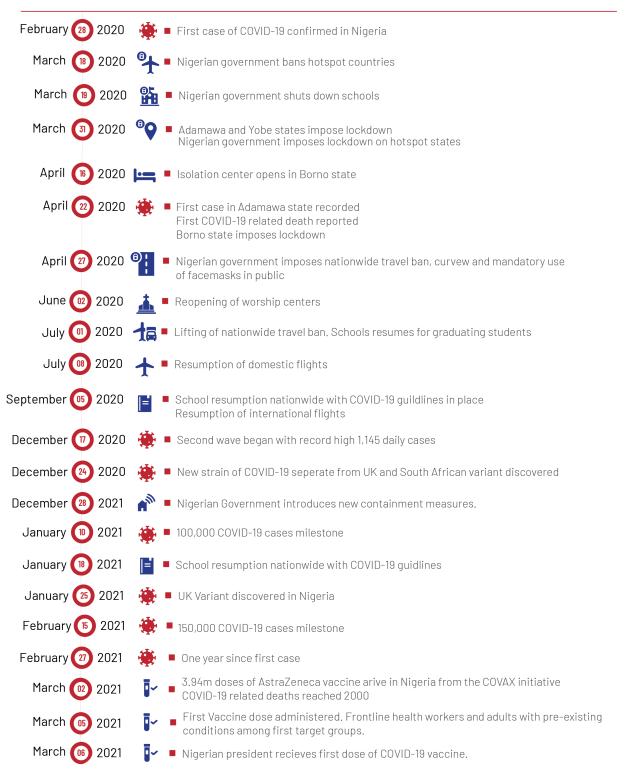
Figure 10. Percentage and reasons of respondents on not getting the vaccine if it is free and available (source: IOM 01/07/2021)



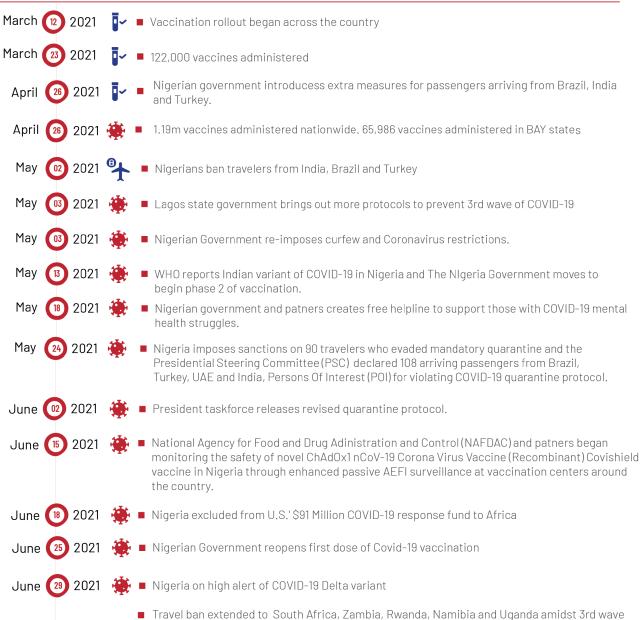
During the assessment, respondents were asked whether they would get vaccinated if a vaccine was available. Results indicate that about 50% of respondents stated that they did not dispose of sufficient information on COVID-19 and the vaccines to be able to make an informed decision on whether to get vaccinated or not. In the state of Bauchi, this number rose to 71% but in Gombe state, 69% indicated that they have sufficient information to be able to make an informed decision on whether to get vaccinated or not. On the other hand, about 69% of the respondents indicated that they would not get vaccinated, even if the vaccine was available and free. 25% of respondents stated that they would get vaccinated and 6% of respondents were still undecided. In Bauchi, 87% of the respondents indicated that they would not get vaccinated. In addition, when assessed the reason of not getting vaccinated, approximately 20% of the respondents that indicated that they would not get vaccinated were advised against vaccines and 19% mentioned that they did not trust the vaccines and were worried about the side effects while 15% were confused by the conflicting information on vaccines and 14% stated that vaccines are forbidden by their religion but 12% stated to have other urgent needs compared to 11% who did not consider COVID-19 as a threat (IOM 30/06/2021).

Feb 2020 - June 2021









of infection

8. Overview of Impact and Humanitarian Conditions

Northeast Nigeria is heading into a critical phase with the beginning of the lean season and along with it the start of the rainy season. Some communities in Hard-to-Reach (H2R) may already be experiencing IPC level 5 (famine) food insecurity compounded by a lack of health service provision in H2R areas. The level of acute malnutrition in northern parts of Yobe and Borno is close to critical (WHO classification)levels, malaria and Acute Respiratory Infection (ARI) rates are rising and there is no access to therapeutic feeding services for the households that remain in areas inaccessible to humanitarian assistance.

Health issues are on the rise with the onset of the rainy season. Monguno LGA is experiencing an above average rise in ARI cases with week 23 (June 07 to June 13) recording approximately 2,500 ARI cases for a population of only around 150,000. With humanitarian services constrained by weather and insecurity, garrison towns in the far north and east are face increased risks and rising humanitarian needs

Northeast Nigeria has now entered the lean season with 4.4m people projected to be food insecure during the months of June through to August. The U.N. resident and humanitarian coordinator for Nigeria, Edward Kallon, has called for more funding and support to the food security sector so all those in need can be reached. Of particular concern is the situation in hard-to-reach areas with some communities (isolated by the conflict) facing the risk of IPC level 5 (famine) food insecurity.

The latest World Bank report estimates 98 million Nigerians are living in multidimensional poverty, with most living in Northern Nigeria. However, the figures exclude Borno state where data could not be collected. Insecurity and displacement continue to be the main drivers of poor access to livelihood opportunities.

Malaria, Acute Respiratory Infection (ARI) and Acute Watery Diarrhea (AWD) rates are rising in line with seasonal trends as the BAY states enter the rainy season. This is of particular concern due to the recent impact of conflict on health service provision as well as the added burden of COVID-19 prevention, testing and treatment measures.

With the start of lean season Severe Acute Malnutrition (SAM) admissions are expected to rise. Data from a February assessment indicated a small decrease in acute malnutrition rates in central Borno, but stunting (chronic malnutrition) rates remain unchanged.

WASH facilities across managed camps have improved during the last month but increased pressure on the WASH sector is expected as the rains begin. Access to protected water sources remains significantly constrained in H2R areas.

There have been cholera outbreaks in at least 7 states across Nigeria including Gombe and Bauchi but, as yet no cases has been identified in the BAY states.

Although the level of emergency shelter provision has increased across displacement sites, many households are still relying on makeshift shelters, with loss to fire, windstorms, rains and flooding putting increased pressure on the shelter sector.

Conflict induced displacement and restricted humanitarian access are exacerbating protection risks in the BAY states.

Thousands of children are being denied access to education through conflict-driven displacement. Where households are able to return schools are compromised by a lack of teachers, learning materials and damage to school infrastructure.

9. Information Sources and Gaps

Recent attacks in Yobe are covered by a <u>multi-sector</u> <u>assessment of the displaced populations from Geidam and Kanama</u>. This alongside OCHA sitreps provide a snapshot of the issues facing those displaced by conflict. OCHA has released a series of sitreps for <u>Adamawa</u>, <u>Borno</u> and <u>Yobe</u> providing some brief sectoral highlights for each state.

The situation in Hard-to-Reach areas is covered by the usual sector focused factsheets from REACH of which both <u>March and April</u> updates were available during this month. However, given the surveys are based on the recall of key informants the situation in H2R areas is difficult to determine with any accuracy. A late additional source that analyses food insecurity in H2R areas is the <u>Famine Monitoring System June 2021 Bulletin for Inaccessible Areas</u>, produced by the Federal Ministry of Agriculture and Rural Development (FMARD) with support from UNICEF, WFP, FAO, REACH and other partners.

With no updated cadre harmonize available, data from the <u>March bulletin</u> is still being used along with the <u>April FEWS Net outlook</u> and the <u>FAO April overview</u>. With lean season underway this leaves a gap in understanding as to whether the projects from the March report are now being realized on the ground. A recently released <u>World Bankreport</u>, (along with associated commentary and local press coverage) provides an insight into the economic challenges being faced in Nigeria after the impact of the COVID-19 pandemic, although data from Borno state was not part of the report.

The most recent <u>ISDR reports and measles updates</u>, alongside the <u>May health bulletin</u> provide epidemiological data for the month as well as SAM admissions although this data is only available for Borno state. The rate of new COVID-19 cases continues to be low with little discernible impact.

No new information on the overall functionality of health centers has been released since last year, although health centers are often targeted during attacks. Information is lacking on whether health centers have been able to recover their capacity and the impact on functionality of the (often quoted) issue of finding and retaining appropriate medical staff.

Shelter and WASH details are available for managed camps using the latest <u>CCCM update for early June</u>. In addition, IOM flash updates on incidents such as flooding and fires, along with OCHA sitreps provide further information.

There is a lack of information for both Education and Protection sectors. No data on school attendance, access issues, learning outcomes or transition rates has been located. For protection although increased risk factors are highlighted in sitreps and other reports, caseload numbers or other quantitative data is not available. It is recognized however that Protection data can be confidential to protect those involved and talking about such sensitive issues may be culturally inappropriate or not in keeping with the humanitarian principle of do no harm. There such data can be difficult to collect and to share.

10. Sectors



OVERVIEW AND SOURCES

Information about the current livelihood situation in northeastern Nigeria continues to be sparse however a recently released <u>World Bank report</u> and <u>commentary</u> outlines the significant increase in households living in multidimensional poverty across Nigeria and this has been highlighted in local media including <u>The Conversation</u>, <u>Vanguard</u> and <u>The Guardian</u>. A <u>UNHCR thematic brief</u> looks at socioeconomic impact of COVID-19 on forcibly displaced populations and the implications for program

implementation, while the continuing constraints faced by IDPs in accessing livelihood opportunities are highlighted in the recent OCHA <u>sitrep 1</u> and <u>sitrep 4</u> from Adawawa alongside an <u>assessment of the displaced populations</u> from Geidam and Kanama.

More information on the situation in H2R areas is provided by the latest REACH factsheets for $\underline{\textit{March}}$ and $\underline{\textit{April}}$ where the access to livelihood activities and markets remains severely curtailed.

ALMOST HALF OF NIGERIANS LIVING IN POVERTY

According to the World Bank 47.3% Nigerians, or 98 million people, live in multidimensional poverty. Most of them are located in northern Nigeria. This poverty rate does not include Borno State, where insurgency has prevented data collection. Rising food prices in Nigeria exacerbate poverty because they reduce the real purchasing power of households, shifting expenditures away from essential items such as health, education and housing. An average Nigerian household spends more than half of their income on food.

Nigeria's national unemployment rate remains high at 32.5%, with northeast Nigeria likely to be further disadvantaged due to the impact of insecurity on markets, trading and access to land for cultivation. Both monetary and multidimensional poverty are largely concentrated in Nigeria's northern states (*Legit* 28/06/2021, *The Conversation* 27/06/2021, *FEWS Net* 30/04/2021, *World Bank* 07/02/2001).

ACCESS TO LIVELIHOOD ACTIVI-TIES CONTINUES TO BE SEVERELY CURTAILED IN HARD-TO-REACH (H2R) AREAS

Livelihood activities for most of the households in H2R areas of Borno and Adamwa still remain severely constrained. In March, for all 17 assessed settlements, 81-100% of them reported that people were not able to engage in their usual livelihood activities during the past month. April provided a similar picture with only Damboa recording any improvement (the proportion of settlements reporting curtailment of livelihood activities had dropped to 21 – 40%). Reported livelihood activities had changed somewhat in April with livestock rearing (reported in 59% of settlements) being the most common livelihood activity followed by casual labor (55% of settlements) and subsistence farming (34%). Hunting and fishing were also mentioned. It is likely that seasonal factors (as the region moves into lean season) are partly responsible for this shift.

Access to markets is also constrained, with 21 - 40% of settlements reporting a functional market with walking distance in just 4 LGAs. All other LGAs the proportion of settlements with a functional market nearby was between 0 - 20% (REACH 01/06/2021, REACH 15/06/2021).

LIVELIHOOD OPPORTUNITIES REMAIN LIMITED FOR IDPS

Access to vocational training and cash for work activities remains limited for the BAY states IDP populations. Only 27% of managed camps in LGAs affected by the displacements have access to cash for work activities within the onsite and nearby locations. Furthermore 58% of the managed camps do not have access to a form of vocational training within the site or nearby. In Adamawa, a NRC assessment highlighted inadequate skills among IDPs and returnees for formal or self-employment. In addition, the majority of the IDPs and returnees lack capital to start income generating activities. Even where IDPs and host community members who have received vocational training there is need to provide vocational kits to enable them to start their businesses.

In addition, UNHCR reports that the economic shock due to the pandemic leading to rising food prices and less jobs is making the transition away from in-kind support and towards cash-based assistance as well as medium-term livelihood support more difficult. The cash plus livelihoods approach is designed to ensure immediate basic needs are met while building greater self-reliance, but lack of economic opportunities and other negative factors such as insecurity and displacement make the implementation of such programs more challenging (<u>UN OCHA</u> 11/06/2021, <u>UN OCHA</u> 28/06/2021, <u>UNHCR</u> 22/06/2021).

CONFLICT AND INSECURITY IMPACTING LIVELIHOODS FOR RETURNS AND THE NEWLY DISPLACED

Humanitarian organizations have raised concerns about the returns process, noting that many areas of return remain unsafe—including Damasak and Dikwa towns, which both experienced major OAG attacks in April—and have little access to livelihoods and basic services, including those provided by relief actors and government institutions. For the displaced populations from Geidam and Kanamma access to land for the rainy season farming is the main concern for the IDPs at the moment, therefore support to revive their livelihood activities when they return back home will be an urgent need. Other issues reported by the IDPs included the loss of petty trade business (17% of respondents), loss of livestock (7%), lost access to fishing (7%) (USAID 07/06/2021, UN OCHA 17/06/2021).



OVERVIEW AND SOURCES

The latest <u>Cadre Harmonise report</u> projected that 4.37 million people will be food insecure (Phases 3 – 5) during the current lean season (June – August 2021), with those in Hard-to-Reach areas likely the worst affected. This represents a small increase compared to the lean season in 2020 (4.30 million). More information on the situation in H2R areas is provided by the latest REACH factsheets for <u>March</u> and <u>April</u> where the increasing prevalence of negative coping mechanisms indicates that the food security situation is deteriorating and was already grave in April, 2 months before the start of the lean season. A late additional source is the <u>Famine Monitoring System June 2021 Bulletin for Inaccessible Areas</u>, results from which indicate that inaccessible areas in four LGAs are at high risk of famine, namely Bama, Gwoza, Kukawa and Magumeri.

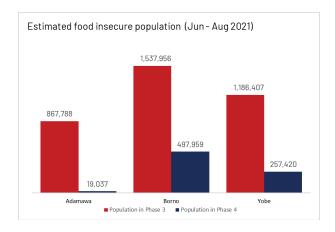
Conflict and insecurity affecting market access, farming and the delivery of humanitarian assistance were flagged as the main drivers of food insecurity in the north-east by the <u>April food security outlook</u> from FEWS NET and a synopsis of other drivers is provided by the <u>FAO April overview</u>.

A number of recent situation reports from <u>Adawawa</u>, <u>Borno</u> and an <u>assessment of the displaced populations of Geidam and Kanama</u> also provide insight to the food security challenges for IDPs, especially those recently displaced.

NORTHEAST NIGERIA ENTERS LEAN SEASON WITH 4.4M PEOPLE PROJECTED TO BE FOOD INSECURE DURING JUNE – AUGUST

During a visit to Geneva, the U.N. resident and humanitarian coordinator for Nigeria, Edward Kallon, stated that 4.4 million people in northeast Nigeria's Borno, Adamawa and Yobe states are facing a looming catastrophic situation of food insecurity that eventually could result in a famine. He further explained that "Of these 4.4 million people, 775,000 are in critical needs of food assistance and risk death, and also further dispossession, if necessary action is not taken now". – As at June 2021, Food Security Partners (government and partners) reached only about 2.0 million people with food assistance. The Food Security Sector continues to coordinate and advocate to both government and partners for scale up of food assistance and agricultural livelihoods to the people in needs (Food Security Sector 26/07/2021, VoA 20/06/2021)

Figure 12. Projected food insecure population (June - August 2021) across the BAY States



Of the 4.4 million people requiring food assistance in the BAY States, approximately 775,000 people will face emergency (IPC Phase 4), representing a 16% year-on-year increase and an 84% increase compared to 2019. The number of LGAs where the population will face Crisis Levels (IPC Phase 3) of food insecurity is expected to double during the lean season and 9 LGAs (Abadam, Gubio, Marte, Mobbar, Dikwa, Guzamala, Kalabalge, and Kukawa) in Borno State and Madagali in Adamawa State are expected to be in the Emergency Phase (IPC Phase 4) of food and nutrition insecurity. (NPFS 18/03/2020, FEWS NET 16/11/2020).

FOOD INSECURITY SITUATION GRAVE IN HARD-TO-REACH AREAS AS THE PREVALENCE OF NEGATIVE COPING STRATEGIES CONTINUES TO INCREASE

For H2R areas, the latest food insecurity data detailed in the new *Famine Monitoring System June 2021 Bulletin for Inaccessible Areas* indicates that four LGAs (Bama, Gwoza, Kukawa and Magumeri) are at high risk of famine. These LGAs require close monitoring considering the elevated levels of food consumption gaps, malnutrition and extensive/unsustainable usage of emergency coping strategies, which are largely underscored by limited availability of food stocks, restricted access to functional markets and health services (*FMARD* 16/07/2021).

The situation of the H2R areas of Borno and Adamawa remains precarious as households continue to rely on negative coping mechanisms to meet food. The situation was critical in 7 out of the 15 assessed LGAs as more than 80% of the settlements reported households eating wild

foods that are not part of their usual diet. The situation appears worse in April for the LGAs such as Bama, Dikwa, Guzamala, Kala/Balge, Marte and Ngala as compared to March with only Magumeri LGA, showing any improvement compared to the previous month. (*REACH* 01/06/2021, *REACH* 16/06/2021).

Many settlements also reported that most people go an entire day without eating a meal as a coping strategy. The situation was worse in Mafa as more than 80% of the assessed settlements reported going an entire day without eating compared to 1–20% in the March assessment. In LGAs such as Jere, Marte, Ngala, Dikwa, and Kala/Balge, 60–80% of the assessed settlements reported that they spent the entire day without eating a meal. In southern Borno/North Adamawa the situation appeared less severe but in Gwoza, Madagali Michika and Askira/Uba between 21% and 60% of settlements still reported most people using the same severe coping mechanism. In the remaining 5 LGAs assessed this was still mentioned but only in 1–20% of settlements (*REACH* 01/06/2021, *REACH* 16/06/2021).

It appears that there are already significant food shortages in the H2R areas. In 9 of the 15 assessed LGAs none of the assessed settlements report that "some people have access to enough food". In the other 6 LGAs, the proportion of settlements asserting that some people had access to enough food was between 1–40%. Although the H2R assessment has to rely on the perceptions of key informants that have recently visited the settlements, the vast majority of settlements indicate that not even "some of the people have enough access to food". In addition, for Kala Balge, Ngala, Mafa, Dikwa and Gwoza LGAs four out of five settlements or more (79% – 93%) reported hunger was severe for most people because they were not able to access enough food (REACH 01/06/2021, REACH 16/06/2021, WFP 22/06/2021).

ACCESS TO FOOD CONSTRAINED FOR RECENTLY DISPLACED HOUSEHOLDS

Many displaced households affected by the conflict and those in the transit areas are facing issues of accessing food. In Gwoza LGA of Borno state the newly arrived households reported to face acute food shortage due to non-inclusion in general food distribution. In Geidam LGA of Yobe after the displacement, 1% of the respondents did not have enough food to eat even a single meal per day at their current location while at least 10% said they eat one meal per day. Similarly, in the Mubi transit center in Adamawa a lack of food was a serious challenge faced by the IDPs.

Even where food is available or distributed, challenges remain. A livelihood needs assessment conducted by HARAF in Malkohi community (Yola South LGA) highlighted a lack of markets in close proximity to local communities, necessitating residents to frequent neighboring communities to purchase food. Also highlighted in the assessment was a lack of funds to purchase food. Some recipients of humanitarian assistance also indicated that the quality of food from the market is often better than the food they receive as aid (<u>UN OCHA</u> 11/06/2021, <u>UN OCHA</u> 18/06/2021, <u>Ground Truth Solutions</u> 18/06/2021).

FOOD PRICE INFLATION CONTINUES TO ERODE HOUSEHOLD PURCHASING POWER

Food prices have continued to increase and erode purchasing power of households and consequently, reduced food access. As a result of the food price increases, the Food Minimum Expenditure Basket value has increased by over 20% from the September 2020 recommendation by the FSS to partners to increase Food Transfer Values necessitating a second round increase in Transfer Values, since the COVID-19 outbreak (FSC 22/06/2021).



OVERVIEW AND SOURCES

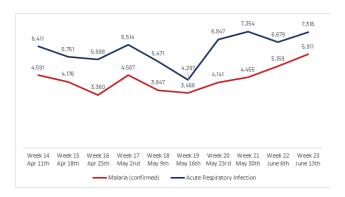
Integrated Disease Surveillance and Response (IDSR) reports ($\underline{IDSR\ wk20}$, $\underline{ISDR\ wk21}$, $\underline{IDSR\ wk22}$, $\underline{IDSR\ wk23}$) show that malaria cases have begun to increase in line with seasonal trends (the start of rainy season), as have cases of acute respiratory infection (ARI). In addition, the current measles outbreak has taken an upward turn although the number of new cases dropped in the last week of the reporting period. Note that only two measles bulletins for week ($\underline{wk20}$ and $\underline{wk22}$) were available via the HR response website so for consistency data was taken from the four ISDR reports to calculate measles infection rates. A summary of this data is provided by the latest (May) health sector bulletin.

The dire state of health service provision in Hard-to-Reach areas is provided by the most recent reports from REACH for March and April and the impact of attacks and displacement on the health of displaced populations from Geidam and Kanamma are shown in the findings of a rapid multi-sector needs assessment. With flash updates from IOM, OCHA Sitreps, MOH COVID updates outlining further issues across the BAY states.

MALARIA AND ACUTE RESPIRATORY INFECTION RATES ARE RISING

Malaria continues to be the main cause of morbidity, with the average weekly Malaria cases for the month increasing by 30% compared to the previous month. The increase is in line with the seasonal trend for malaria cases to increase as the BAY states move into the rainy season. The 2021 cumulative caseload for Malaria in Borno State is 139,388, with a morbidity rate of 13%. Over the last four weeks (W20-W23), the weekly case numbers ranged from 4,141 to 5,911, with an average of 4,917 cases per week. This compares with an average case per week of 3,765 for the last month (W16-W19). The number of (managed) camps in Borno and Adamawa reporting malaria, increased in the first half of June, rising to 30% of sites, up from 26% in the previous month. Health partners are planning to use Indoor Residual Spraying (IRS) to address the spread of malaria in IDP camps in Maiduguri, Jere and Monguno.

Figure 13. Spread of malaria and ARI in Borno state



The average weekly Acute Respiratory Infection (ARI) caseload has also increased with a rise of 29% compared to the previous month. The 2021 cumulative caseload for ARI is 196,823, with a morbidity rate of 18.3%. Over the last four weeks (W20-W23), the weekly case numbers ranged from 6,679 to 7,354, with an average of 7,049 cases per week. This compares with an average case per week of 5,467 for the last month (W16-W19). Monguno continues to be the worst affected LGA, reporting over 2,000 ARI cases reported weekly. This is even more concerning when considering the population numbers around 150,000, meaning that over 1.3% of the population are being diagnosed with ARI every week.

The average weekly cases of Acute Watery Diarrhea (AWD) for the month have increased by 92% compared to the previous month. Again, seasonal factors caused by the onset of the rainy season will often push an increase in cases, although the size of the increase is perhaps larger than normal. The 2021 cumulative caseload for AWD is

17,772, with a morbidity rate of 1.7%. Over the last four weeks (W20-W23), the weekly case numbers ranged from 602 to 1,494, with an average of 884 cases per week. This compares with an average case per week of 460 for the last month (W16-W19).

ISDR reporting for weeks 20 to 23 has improved over the last month with completeness rates ranging from 76% – 79%, but still below the 80% target (<u>ISDR</u> 22/06/2021, <u>ISDR</u> 08/06/2021, <u>ISDR</u> 01/06/2021, <u>CCCM</u> 25/06/2021, <u>WHO</u> 15/06/2021, <u>REACH</u> 11/06/2021).

MEASLES CASES ARE BACK ON THE RISE

Measles cases are back on the increase with the average weekly Measles (suspected) cases in Borno for the last month in Borno increasing 17% compared to the previous month. The cumulative suspected caseload and deaths for Measles are 8,427 and 94, respectively. Over the last month (W20-23), the weekly suspected case numbers ranged from 391 to 608, with an average of 520 cases per week. This compares with an average suspected case per week of 444 for the last month. However, in the last week in the reporting period (week 23), cases dropped down to 391. Maiduguri and Jere LGAs continue to have the majority of new cases. Lack of vaccination (due to insecurity and reluctance to use health facilities due to COVID) along with overcrowding in camp settings are possible contributing factors to the outbreak (ISDR 22/06/2021, ISDR 16/06/2021, ISDR 08/06/2021, ISDR 01/06/202, WHO 03/06/2021, WHO 17/06/2021). Note for consistency data was taken from the four ISDR reports as the weekly measles reports for weeks 21 and 23 were not available.

HEALTH SERVICE ACCESS CONTINUES TO BE VIRTUALLY NON-EXISTENT IN HARD-TO-REACH AREAS

Health services are still not accessible for populations in the majority of settlements in the H2R areas of Borno and Adamawa. Latest data from April indicated that only a few settlements (1–20% of the sample) in Ngala and Kala/Balge indicated that there was a functional health care service that the population could reach and return from in one day. In the other 13 assessed LGAs, none of the settlements reported access to health services. Overall, 99% of settlements indicated there were barriers to health care with the most common being "Never had health facilities nearby" cited by 85% of settlements, other barriers included "Facilities destroyed by conflict" (5%) and "No health care workers in the area" (3%) (REACH 11/06/2021, REACH 31/05/2021).

POPULATIONS DISPLACED BY RECENT ATTACKS ARE PUT AT INCREASED RISK OF HEALTH ISSUES AS AFFECTED AREAS STRUGGLE TO REOPEN HEALTH SERVICES

The recurrent conflict-induced displacement has a negative impact on the health of IDPs. According to the multi-sector needs assessment undertaken in Yobe covering the populations displaced from Geidam and Kanama displacement with 41% of respondents reporting that some of their family members had fallen sick since they were displaced from Geidam/Kanama. Fever/malaria was the main issue reported by 51% of those respondents whose families had members who had fallen sick, this was followed by diarrheal diseases (17%) and injury from the conflict (10%). Only 34% of respondents reported that the sick family member had received treatment indicating either a lack of access to, or availability of, healthcare services.

With 34% of displaced households reporting family members sleeping in the open and 24% of households reporting not having access to latrines the displaced households are more at risk from mosquitos (malaria) or catching diseases from poor sanitation/hygiene.

Massive population displacements, the influx of returnees, refugees, and attacks on hospitals and primary health care centers by NSAGs continue to disrupt the health service delivery and challenge the health program implementation, including delivery of life-saving assistance such as vaccination and COVID-19 response. In particular the attacks in Yunusari and Geidam have disrupted primary health care services, whilst in Borno, access constraints due to insecurity are also impacting ambulance services and referral systems. After recent attacks some health facilities in Dikwa have resumed their operations, however the facilities and medicines are insufficient to meet the increasing health and psychological needs of IDPs and host communities (IOM 28/06/2021, IOM 14/06/2021, UN OCHA 11/06/2021, MOH 15/06/2021).

NO CHOLERA OUTBREAK AS YET IN THE BAY STATES

Since the beginning of the year, 10,833 suspected cholera cases have been reported with 112 confirmed cases and 289 deaths across Nigeria. The Nigeria Centre for Disease Control has activated a multi-sectoral National Cholera Emergency Operations Centre (EOC), following this increase in cholera cases across the country. Bauchi

state, which borders Yobe, has reported 37 lives lost to cholera. According to the Bauchi State Primary Healthcare Development Agency, cholera cases have spread to 15 LGAs. NCDC has recorded 112 confirmed cases and 289 deaths from cholera outbreaks in 2021. However, no cases have yet been seen in the BAY states. The NCDC continues to advocate for improved access to clean water, proper sanitation and hygiene, a critical measure to prevent cholera cases and outbreaks. However as the rainy season starts, the already overstretched WASH infrastructure will be put under increased pressure (*Govt of Nigeria* 21/06/2021, *Today Online* 16/06/2021).



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The latest <u>WFP dashboard</u> for May indicates that 515,000 children under 5 years of age will suffer from Moderate Acute Malnutrition (MAM) and a further 320,000 will suffer from Severe Acute Malnutrition (SAM) in 2021 (figures from the 2021 HRP).

The perception of malnutrition in Hard-to-Reach (H2R) areas is provided by the most recent reports from REACH for <u>March</u> and <u>April</u> and remains concerning. Data from the new <u>Famine Monitoring System June 2021 Bulletin for Inaccessible Areas</u>, indicates critical GAM levels in the most food insecure LGAs of BAma, Gwoza, Kukawa and Magumeri, especially for younger children (6 - 17 months). The latest ISDR reports (<u>IDSR wk20</u>, <u>ISDR wk21</u>, <u>IDSR wk22</u>, <u>IDSR wk23</u>) provide regular updates of the numbers of Severe Acute Malnutrition cases identified in Borno state which continues at a rate of approximately 8,000 a month.

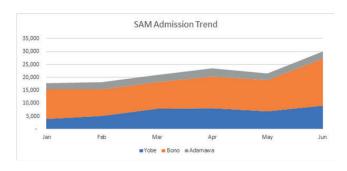
Overall malnutrition data is given by the most recent large-scale survey on malnutrition in the BAY states is the Nutrition and Food Security Surveillance Round 9(NFSS IX) which is supported by the <u>IPC Acute Malnutrition</u> analysis 2020 - 2021, and summarized (alongside the response) via the Nutrition Sector Dashboard, however this data was collected in October 2020 so is now somewhat dated. There has been a more recent **SMART** survey conducted by Save the Children in February, however the assessment only covers four LGAs in Central Borno (Maiduguri Metropolitan Council (MMC), Jere, Mafa and Konduga). It provides a detailed updated analysis for the prevalence of malnutrition as well as an analysis of several contributing factors such as diet diversity, use of food coping mechanisms and infant and young child feeding practices (IYCF). Overall, the prevalence of acute

malnutrition in central Borno appears to have decreased slightly in February, but stunting levels remain static.

MALNUTRITION RATES LIKELY TO RISE AS THE NORTHEAST HEADS INTO LEAN SEASON

In a recent trip to Geneva, the U.N. resident and humanitarian coordinator for Nigeria, Edward Kallon stated that malnutrition rates are rising in all three states in northeast Nigeria and have reached a particularly dangerous high of 13.6% in Yobe State. The general trend of malnutrition in the region can be seen in Figure 14 which shows SAM admissions over the whole of 2021. Malnutrition rates increased in all 3 states during the months of Mar - June, with Borno and Yobe states seeing the biggest rise. A further deterioration in the malnutrition situation across almost all LGAs is expected with many deteriorating enough to be classified in a higher (worse) IPC AMN level. However, it is likely that those LGAs currently classified as IPC AMN Phase 4(critical) are likely to remain the same even though there may be an increase in acute malnutrition levels in these areas (IPC 17/03/2021).

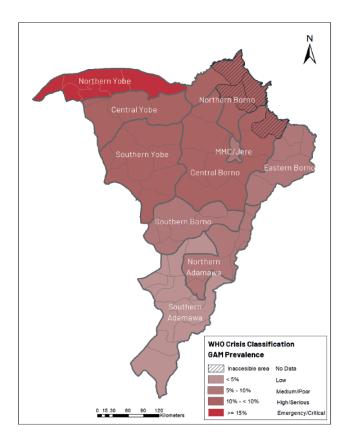
Figure 14. SAM admission trends in the BAY states for 2021 (Source: Nutrition Sector 30/06/2021)



The most recent Nutrition and Food Security Surveillance Round 9 assessment (NFSSIX, data from October 2020) and IPC nutrition analysis show the seriousness of the deteriorating malnutrition situation in the BAY states with both high and rising malnutrition rates throughout the region. Yobe has the highest Global Acute Malnutrition rate with a SAM (WHZ) rate of 12.3%, followed by Borno (10.0%) and Adamawa (6.2%) – see Figure 15. Looking more closely, Northern and Central Yobe along with Northern Borno show the highest rates with the GAM rate in Northern Yobe at 15.8%, above the critical/emergency threshold. The rest of Borno, Yobe and Northern Adamawa have GAM

rates either close to, or slightly above the 10% threshold (High/Serious), ranging from 10.7% (central Borno) to 7.5% (northern Adamawa). Only the region of southern Adamawa is categorized as low with a GAM rate of 4.7% (*Govt Nigeria* 19/03/2021, *UNICEF* 30/06/2021).

Figure 15. GAM rates across the BAY states (Source: UNICEF 30/06/2021



The major contributing factors of acute malnutrition in all the analyzed LGAs include very poor food consumption patterns (both quantity and nutritional quality) and high morbidity rates (diarrhea and fever). It is concerning to note that these findings are overall malnutrition rates for regions encompassing several LGAs and there may be pockets of significantly higher malnutrition rates. In addition, the survey does not cover hard-to-reach areas which are not accessible to humanitarian organizations. The limited evidence available points to higher levels of food insecurity in H2R areas, driving higher malnutrition rates (IPC 17/03/2021, Govt Nigeria 19/03/2021).

MALNUTRITION IS AT CRITICAL LE-VELS IN SOME HARD-TO-REACH AREAS OF CENTRAL AND EASTERN BORNO STATE

Levels of acute malnutrition among new arrivals from inaccessible areas is Critical (Phase 4 IPC Acute Malnutrition Classification) with overall GAM rates at 20.7% and SAM at 4.9% with the LGAs of Bama, Gwoza, Kukawa and Magumeri the worst affected. The high levels of acute malnutrition indicate an extremely stressed population including food insecurity, poor sanitation and hygiene and health conditions, the key underlying causes of acute malnutrition (FMARD 16/07/2021).

The overall perception of malnutrition as the main health problem has increased slightly with 20% of settlements in H2R areas citing malnutrition as the main health problem in April, up from 13% for the previous assessment in March although there would be some fluctuation expected as the LGAs/settlements vary from month to month.

Perceived malnutrition affecting children remains widespread in the H2R areas in central and eastern parts of Borno. In April the proportion of assessed settlements where perceived malnutrition among children was reported to affect more than half or all the children in the settlements was very high (61-80%) in Mafa LGA and was cited by approximately half of the assessed settlements (41-60%) in Dikwa and Kala Balge. However, the perception of malnutrition is lower month on month in several other LGAs including Michika and Madagali in Adamawa state (REACH 11/06/2021, REACH 31/05/2021).

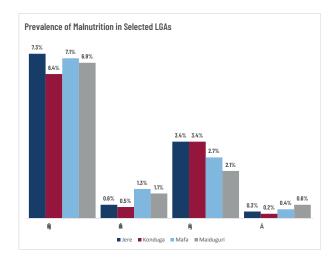
MALNUTRITION RATES IN CENTRAL BORNO HAVE DECLINED

A SMART survey was conducted to investigate the nutritional status of children in four LGAs in central Borno (MMC, Jere, Mafa and Konduga) with data collected between 31 January to 11 February 2021 (For detailed results, please consult the original study. The study found that GAM rates were similar across the surveyed LGAs, ranging from 7.3% (WHZ) for Jere to 6.4% in Konduga, and from 3.4% (MUAC) in Jere/Konduga to 2.1% in MMC (see Figure 16). Severe Acute Malnutrition (SAM) rates were slightly higher in Mafa

and MMC at 1.3% (WHZ) and 1.1%, compared to Jere and Konduga (0.6% and 0.5% respectively). This was mirrored MUAC figures with MMC recording the highest SAM rate 0.6% (MUAC) and Konduga the lowest (0.2%)(Save the Children 10/05/2021). Compared to data from October Acute Malnutrition rates in MMC and Jere appear to have declined. For Mafa and Konduga there also appears to be a small drop although comparisons can only be made to the overall rates identified for the central Borno region, however this is not a direct comparison as 5 other LGAs included in central Borno data.

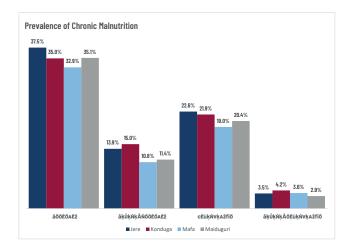
If the data shown in Figure 14 is considered (SAM admission rates for 2020), the SAM admission rate for October (just after lean season) is higher than for February (after the harvest) so a drop in acute malnutrition rates would not be unexpected.

Figure 16. Acute Malnutrition Rates in Central Borno (source: Save the Children 10/05/2021)



The prevalence of stunting in Jere, Konduga, Mafa and MMC LGAs was above 30% across the surveyed LGAs, so for all LGAs this is interpreted as high based on WHO and UNICEF chronic malnutrition thresholds (>30.0 - 39.9) see Figure 16. These stunting rates are on a par with those measured in the October survey (again with the caveat for Konduga and Mafa not having a direct comparison available). This would indicate that longer term malnutrition rates are not improving (Govt Nigeria 19/03/2021, Save the Children 10/05/2021)

Figure 17. Stunting rates in Central Borno (source: Save the Children 10/05/2021)



SAM PREVALENCE RATE REMAINS HIGH IN BORNO STATE, MORBIDITY RATES STABILIZE

SAM rates continue to remain high with more than 8,000 SAM cases recorded in the last four weeks (May 17- Jun 13) in Borno State as reported by IDSR. These figures are similar to the previous month. Jere LGA reported the highest number of SAM cases in the reporting weeks followed by Monguno LGA and Maiduguri LGA. The SAM cases also continue to rise in Nangzai LGA. Furthermore the cumulative total number of cases stands at 48,297 in week 23 with 39 deaths and an increased morbidity rate of 4.5%, a slight increase on the previous month.

Monguno LGA is of particular concern with high rates of malaria and ARI along with SAM which can prove fatal for infants. In addition, Monguno saw nearly 150 cases of acute water diarrhea (AWD) in week 23. Maiduguri LGA also has a high number of AWD cases compared to the rest of the state, also a risk factor for infants with SAM. Reporting rates improved in the period with completeness close to the 80% target rate for all 4 weeks (ISDR 22/06/2021, ISDR 16/06/2021, ISDR 08/06/2021, ISDR 01/06/2021).

CONFLICT CONTINUES TO CONSTRAIN ACCESS TO NUTRITION SERVICES AND NEGATIVELY IMPACT NUTRITION PRACTICES

Lack of human resources for the children's nutrition stabilization has affected the treatment of about 57 severe acute malnutrition (SAM) cases in Fune and Fika LGAs of

Yobe State. There have been recent attacks by suspected non-state armed group (NSAG) operatives on two critical aid facilities including a nutrition stabilization center run by an INGO partner in Gujba LGA that was hosting some 38 children suffering from Severe Acute Malnutrition (SAM). Although staff managed to escape with all the sick children unhurt, vital supplies including food, NFIs, water hygiene and sanitation (WASH) kits and lighting equipment were looted from the facility. It was the second attack directly targeting the nutrition stabilization facility this year and the continuing violence is impacting the ability of government and partners to provide critical services to affected and vulnerable populations in the state, as well as discouraging health professionals from working in the region (<u>UN OCHA</u> 17/06/2021, <u>UN OCHA</u> 28/06/2021).

A recent survey of those displaced by attacks in Geidam and Kanama shows that those displaced are not following infant and young feeding practices which is a malnutrition risk. Only 23% of the respondents reported children of less than 6 months in their households are exclusively breastfed and only 32% of the respondents say children 6-23 months are breastfed at least once a day. Optimal breastfeeding is so critical that it could save the lives of over 820,000 children under the age of 5 each year worldwide, with UNICEF and WHO recommending exclusive breastfeeding for the first 6 months of life. The ability of women to breastfeed their children may have been impacted by displacement where 34% of households reported some of their members were sleeping out in the open and 65% of households reported that they had not received any food assistance in the last 2 weeks (<u>UN OCHA</u> 17/06/2021, <u>UN OCHA</u> 18/06/2021, <u>UN</u> OCHA 28/06/2021, WHO accessed 15/07/2021).



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Monitoring of WASH facilities in managed camps detailed by the *Early June CCCM Camp Management Bi-Weekly tracker* shows a marked improvement in the provision of WASH facilities, however significant needs remain. Access to hygiene facilities for IDPS (both in camps and residing with host communities) outlined in the *DTM COVID-19 Situation Analysis #6* indicates good access to water and soap, however there are gaps in some areas and handwashing practice appears quite limited. Access to WASH facilities in Hard-to-Reach areas are provided by REACH WASH Factsheets for *March* and *April*, while the recent assessment of the displaced populations of *Geidam and Kanama* and *Yobe OCHA sitrep* outline the challenges faced by recently displaced populations in accessing clean water and sanitation facilities.

Measures to deal with the recent cholera outbreak in Nigeria are covered in the <u>NCDC press release</u>, however there are yet to be any cases in the BAY states. However with rains now reported in the region and the continuing pressure on the WASH sector an outbreak of cholera remains a serious risk.

ACCESS TO CLEAN WATER AND GOOD WASH FACILITIES REMAINS CONSTRAINED IN HARD-TO-REACH AREAS

The majority of the settlements in H2R areas in Adamawa and Borno continue to use unimproved water sources as their primary drinking water source. In 12 out of the 15 assessed settlements in H2R areas in Borno and Adamawa, almost all the settlements reported using unimproved water sources as their main source of drinking water, putting populations at risk of waterborne diseases such as cholera. However, a small proportion (1-20%) of settlements in 5 LGAs and a more substantial proportion of settlements (21-40%) in Ngala and Kala/Balge reported using improved water sources. Overall, 59% of settlements report an unprotected well as the main water source, with 28% using surface water. This data is similar to previous months although there is a small increase in the usage of unprotected wells.

Many settlements in H2R areas in Borno and Adamawa still report that safety concerns prevent at least some of the population from accessing preferred water sources. The overall situation has worsened a little since the previous report by REACH in March, but the sample included more LGAs, so direct comparison is not possible. Out of the 15 assessed LGAs, almost all the assessed settlements in Mafa, Dikwa, and Kala/Balge reported safety concerns hindering people's access to preferred water sources. In addition, a significant proportion (61–80%) of the assessed settlements in Marte, Ngala, Jere, Askira/Uba, Madagali, and Michika reported the same issue. For the other 6 LGAs the proportion of settlements citing security issues affecting water access ranged between 21–60%.

Access to latrines is mixed with 21–60% of 13 settlements (out of 15) assessed LGAs reporting that at least some people are using latrines. In Gwoza however none of the assessed settlements reported people using latrines, conversely in Askira/Uba between 81–100% of settlements reported some people using latrines. These numbers are slightly lower than the previous month. More worrying is that of those settlements reporting latrine use, 99% said the proportion of people using latrines was less than half. The main reason cited for not using latrines was

"cultural reasons" (54% of assessed settlements), followed by "overcrowded" (15%).

Handwashing practice in H2R areas is predominantly water only (75% of assessed settlements), with either sand, ash or soap used with water in 18% of assessed settlements. Lack of soap and poor access to latrines will only further push up risk factors for disease outbreaks as the rainy season begins (*REACH* 15/06/2021, *REACH* 31/05/2021).

MOST IDPS HAVE ACCESS TO SOAP AND HANDWASHING FACILITIES, BUT HANDWASHING PRACTICE IS POOR

Although many IDP sites do not have dedicated handwashing stations with soap and water (77% of sites reported the absence of such facilities), the majority of the displaced populations do have access to soap and water. Overall, 16% of sites reported everyone had access to soap and water, and 64% of sites reported either about half or most people had access to soap and water. This still leaves 19% of sites where either no one or only a few households had access to soap and water.

Despite most people having access to water and soap, 65% of sites reported no evidence of hand washing practices with Taraba (89%), Yobe (84%) and Bauchi (81%) reporting the poorest levels of hygiene practice. Such findings are worrying as handwashing is a key preventative measure for stopping the spread of COVID-19 and is also important in preventing the spread of water borne diseases such as cholera. This is particularly pertinent as the region heads into the rainy season where the risk of a cholera outbreak increases (IOM) 01/07/2021).

PROVISION OF WASH FACILITIES IN MANAGED CAMPS IS IMPROVING BUT GAPS STILL REMAIN

Overall data from the most recent CCCM biweekly tracker (June 1 - 15) shows small improvements across several WASH indicators. Seventy nine percent of managed camp displacement sites reported an average waiting time at water points of less than 30minutes. This is an improvement from 75% compared to the previous month. For 17% of the sites the wait is between 30 minutes and one hour. In only 4% of sites is the average wait time above one hour.

In Borno state the percentage of functional latrines remain static at 86% but in Adamawa 82% of latrines are now functional compared to 77% the previous month.

In addition, across all sites the percentage of latrines that need desludging has dropped to 17% compared to 21% the previous month. Shower functionality has also improved with 84% of showers now functional compared to 82% during the first two weeks of May, however this still leaves 1,641 showers in need of repair and 24 sites without a shower on site (CCCM 25/06/2021, CCCM 16/06/2021).

WASH SECTOR FACING CHALLENGES IN YOBE DUE TO INCREASED INSECURITY AND POPULATION DISPLACEMENTS

Displaced populations and vulnerable host community households still face critical WASH needs across Yobe state. With rains reported in the state at the beginning of June, the rainy season poses additional challenges and an urgency to scale up the WASH response to reduce the risk of water borne diseases. The massive displacement from Geidam and Kanamma is adding more burden on the existing WASH facilities in the areas of displacement. While IDPs in the host community are able to access portable water from the existing facilities in the community, IDPs in transit sites in Yunusari, Yusufari, and Mozugun are facing a difficult situation.

Results from the recent survey of households displaced by conflict in Geidam and Kanama confirmed that households in host communities in urban areas have relatively better access to potable water than those in transit sites and rural areas. The majority of the respondents (63%) in the displaced site indicated pushcart water vendor as the primary source of water for drinking, cooking, laundry, and hygiene with 41% of the respondents reported spending NGN 200-500 on purchasing water for the household per day, 51% of households spent less than 200N and 8% of households spent more than 500N. Three-quarters of the respondents said their drinking water source was within 500 meters from their dwelling; however, for 7% of the respondents, it was 1km to 3km or more from their dwelling to their drinking water source. Forty-five percent of respondents reported having to spend more than 15 minutes to one hour to collect water. Cost, distance and time spent queuing for water can all impact a household's ability to access enough clean water. In addition, with heavy reliance on water vendors there is a risk that some of this water is coming from an unprotected source (UN OCHA 11/06/2021, UN OCHA 17/06/2021).

Across Yobe there is limited data about the available water sources and there is a long-standing need to map and consolidate data on all water sources across all LGAs however the sector is constrained by limited WASH information management capacity (UN OCHA 11/06/2021).

INSECURITY AND THE RAINY SEASON PUT PRESSURE ON THE ALREADY STRETCHED WASH SECTOR

In Dikwa LGA the exit of a major sector partner is having a negative impact on WASH service provision although existing partners are working to restore services to host communities and displaced populations. The onset of the rainy season is already bringing disruption with rains having damaged several blocks of latrines in Muna Gara (MMC) and Dikwa. A recent assessment of storm damage found 11 damaged toilets and 8 damaged shower points affecting 200 households in 3 sites across Monguno, Bama and Gwoza LGAs.In Damboa LGA repairs to WASH infrastructure have been delayed due to access constraints. Monitoring activities in MMC indicate major response gaps across informal settlements, where access to water and sanitation services is limited and hygiene awareness is low (UN OCHA 11/06/2021, IOM 28/06/2021).

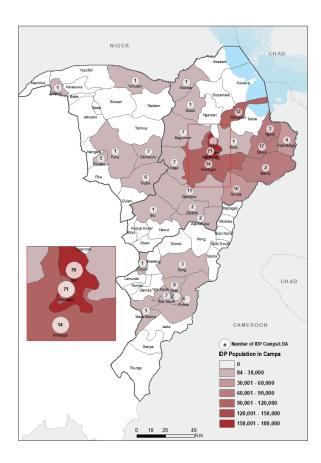


OVERVIEW AND SOURCES

Monitoring of shelter provision in managed camps detailed by the *Early June CCCM Camp Management Bi-Weekly tracker* shows a steady improvement in the provision of emergency shelter, however significant needs remain and the rainy season, with associated flooding and windstorms, is expected to continue to lead to shelters' damage and destruction, especially makeshift shelters or older emergency shelters that have already suffered significant wear and tear. Shelter usage and needs in Hard-to-Reach areas is provided by REACH WASH Factsheets for *April* and *March*.

OCHA sitreps for <u>Borno 2</u> and <u>Borno 3</u> describe the vandalism of shelters in Monguno LGA, as well as shelter issues in Bama LGA where many returnees have found their original homes occupied by IDPs. In addition, shelter needs in Ngala are highlighted due to a recent influx of IDPs. A <u>DTM Flash repor</u>t provides details on population displacements from Dikwa caused by continuous insecurity while the recent <u>assessment of the displaced populations of Geidam and Kanama</u> and <u>Yobe OCHA sitrep</u> provided an insight to the issues of shelter being faced by the recently displaced populations in the state. Various DTM and OCHA reports give details of fire and flooding incidents that have resulted in the damage and destruction of shelters and camp facilities.

Figure 18. Number of IDP Camps and IDP population/



DISPLACEMENT DRIVING SHELTER NEEDS

Repeated attacks by Non-State Armed Groups (NSAG) since the beginning of March have led to large scale displacement thereby increasing the need for shelters, especially in transit centers. Such attacks have continued to result in displacements in Dikwa with DTM recording the movement of over 1,190 individuals from the LGA towards Jere, Konduga, and Maiduguri Metropolitan Council between 12-18 June 2021. Similarly, on the first day of May 2021, a total of 8,347 returnees were recorded by DTM at the same transit point (IOM 22/06/2021).

In Yobe State it was reported that suspected NSAG members have maintained their presence around Geidam and Yunusari towns, a predictor of the likelihood of future attacks and displacements. A recent MSNA conducted in Geidam and Kanama reports that more than half of IDPs were living in congested accommodation, with 70% of households reporting more than five individuals sharing

a space and some household members having to sleep in the open due to overcrowding (OCHA, 17/06/2021).

OCHA reports that over 2,200 people (450 households) are facing shelter shortages in Ngala LGA. This is because of an increasing influx of new arrivals which continues to stretch resources and facilities in already congested camps and host communities. The situation is made worse by partners struggling with limited space to scale-up shelter construction in such areas (*OCHA* 28/06/2021).

WIDESPREAD RELIANCE ON MAKE-SHIFT SHELTERS PUTS HOUSEHOLDS AT RISK AS RAINS ARRIVE

Makeshift shelters remain the most prominent type of shelter in use by IDPs in H2H areas and the situation does not appear to be improving as between March and April, REACH assessments for both months indicate makeshift shelters as the most commonly reported shelter type in 51% of assessed settlements in H2R areas (REACH 11/06/2021, (REACH 31/05/2021).

Forty percent of IDPs living in managed camps now have emergency shelter. This is an increase of 3% from the previous month and equates to approximately 6,000 households. However, 37% of households are still living in makeshift shelters, a further 10% in transitional shelters, with the remainder in collective/communal shelters or public facilities. Despite this increase in emergency shelter provision the households in makeshift and transitional shelters are at risk as the rainy season can bring heavy rains and strong winds. Overcrowding is also an issue, with 3,652HH sharing shelters, up from 2,818HH for the previous month (CCCM 25/06/2021).

SHELTERS CONTINUE TO BE DESTROYED BY FIRES, RAINS AND FLOODS

Across Borno many shelters have been either destroyed or damaged due to a number of incidents in May/June. Monguno appears to be one of the worst affected LGAs with a fire outbreak at the Kuya Primary School Camp at the end of May destroying 327 shelters and partially damaging 30 shelters, affecting a total of 1,246 individuals in 353 households. Rainstorms have reportedly damaged over 130 shelters being used by 200 households in Monguno, Bama and Gwoza LGAs of Borno State with the Government Girls Secondary School (GGSS) Camp in Monguno worst affected (JOM 04/06/2021, OCHA 28/06/2021).

In early June, flash flooding from heavy rainfall resulted in varying degrees of damage to shelters and critical facilities across camps and host communities in the MMC area and Gwoza LGAs. Nearly 1,000 IDPs were directly affected, with valuables and property damaged or destroyed. Bakasi, Teachers' Village, Stadium, Gubio, Pampas and Medinatu camps are among the worst affected (OCHA, 11/06/2021).

IOM reports that at least 10 camps, 9 collective settlements, 2 host communities and one transitional center were affected in Jere, Maiduguri, and Konduga LGAs. In Madinatu Camp in Jere LGA heavy rainfalls damaged 755 shelters and left an estimated 3,967 individuals without shelter. An additional 1,618 shelters were damaged by storms, leaving a total of 1,518 households without shelter. In Dikwa, many shelters have been destroyed by windstorms, rainfall, and fire outbreaks while others are partially damaged because of termites and worn-out tarpaulins (IOM, 15/06/2021, IOM, 22/06/2021).

With further rainfall and storms likely during the rainy season considerable pressure will be put on shelter actors to try and provide solutions for the newly displaced and those who lose their shelter due to such incidents.



OVERVIEW AND SOURCES

The rising protection needs due to displacement brought by repeated attacks on several LGAs in Yobe State are covered in UN OCHA situation reports including <u>Yobe 1</u> and <u>Yobe 2</u>, of particular concern is the fate of separated children. In Hard-to-Reach areas, the latest REACH reports for <u>March</u> and <u>April</u> show that landmines remain a threat to civilians in Borno with at least one mine related incident reported during the last month in several LGAs including Dikwa and Kala Balge. Violence by NSAGs remains the biggest safety concern of the majority of inhabitants. <u>An OCHA sitrep from Borno</u> provides insight into the challenges of providing protection services with heightened insecurity and the displacement and relocation of IDPS. However, there remains a lack of data on the prevalence of protection issues across the BAY region.

DISPLACEMENTS IN YOBE STATE DRIVING PROTECTION RISKS

While Borno State remains the epicenter of the conflict, the Protection Sector has reported the needs of an estimated 180,000 persons, including 60,000 children

displaced from Geidam and Kanamma towns as the key protection challenge in Yobe State (<u>UN OCHA</u> 04/06/2021)

Recent attacks on Yobe State, especially in Geidam and Yunusari LGAs are increasing protection risks as people continue to flee to safety. Many families have reported cases of missing members, especially children, following the massive displacement from both Geidam and Kanamma towns. Several children have also been alleged to be associated with various armed groups that are part of the conflict, therefore exposing them to violence and psychological distress. Additionally, there have been reports of secondary displacement of IDP households to Gashua, Yusufari, Nguru and Damaturu, adding to the dire situation of people there. IDPs from Geidam attempting to return home report being traumatized by the continuous insecurity situation in their area (UN OCHA 28/05/2021)

A Multi-Sector Needs Assessment conducted in Yobe found that a majority of IDPs are facing movement restrictions in their place of displacement because of local authorities. Many also reported security concerns including physical violence, fear of abduction and armed attacks. Some reported discrimination in accessing services and lack of information on available services. As many as 45% of the respondents reported begging within the neighborhood as a coping strategy while a lower percentage reported engaging in transactional sex, early or forced marriage and use of drugs or alcohol (UN OCHA 17/06/2021).

Twenty six percent of respondents reported that the lack of safe space in the community is the primary safety and protection concern facing displaced children, adolescent girls and women in host communities. Other issues raised included the risk of attack when travelling (9% of respondents); sexual violence/abuse (8%); emotional/psychological abuse (6%); early/forced marriage (6%) and others. In terms of places that are regarded as the most unsafe for women and girls, toilets and water points together are the biggest concern (38%) followed by visiting health facilities (10%); unoccupied shelters in the community (9%); collection of fuel/firewood (7%) and along routes to access services (5%).

FLOOD DAMAGE LEAVES HOUSEHOLD HOMELESS

Recent assessments by the Housing, Land and Property (HLP) Sub-Sector, and interaction with beneficiaries reveals increasing levels of HLP destruction caused by floods in the BAY States with Borno particularly affected. Many informal settlements/camps have been affected by the flooding, with shelters damaged and there have also been reports of loss of life. Many households have been

rendered homeless and another impact has been the lack of access to farmlands (HLP sector 26/07/2021).

SAFETY CONCERNS PERSIST IN HARD-TO-REACH AREAS

According to the latest (April) assessment conducted by REACH, violence by AOGs continues to be the primary safety concern reported by most people in H2R areas. Violence by AOGs is cited as the primary concern by men, women and boys and it is the second most significant issue for girls under 18 years of age (after early or forced marriage), with abduction being the third most common safety issue. Boys also cite forced recruitment, abduction and looting as key safety concerns, with little month-onmonth change with the issues highlighted by each group. In approximately 20% of settlements no safety issues are reported.

There was a marked increase in landmine-related incidents in March with 81-100% of assessed settlements in Konduga reporting at least one landmine-related accident with civilians or livestock in the month prior to data collection. A proportion of settlements (1 – 40%) reported similar incidents in another 9 of the 17 assessed LGAs. In April, there were fewer incidents recorded, but both Dikwa and Kala-Balge still had incidents reported in 61-80% of assessed settlements and 21-40% of assessed settlements respectively (REACH 11//06/2021, REACH 31/05/2021).

CONFLICT-INDUCED DISPLACEMENT AND RESTRICTED HUMANITARIAN ACCESS EXACERBATES PROTECTION RISKS IN BORNO STATE

Humanitarian operations in Mobbar (Damasak town) and Dikwa LGAs have been limited to critical life-saving responses sustained through third parties/community-based actors since mid-April leading to a low humanitarian footprint due to heightened risks of violence. This affects the quality of programming, especially the timely follow-up and resolution of emerging issues in the affected areas. Protection sector partners are still unable to access Marte LGA, where approximately 500 IDP households were recently relocated, due to ongoing insecurity, cutting beneficiaries from critical protection assistance and services.

Children continue to remain vulnerable to a multitude of threats in Borno including abduction, violence, child labor and child trafficking. There continues to be an increase

in gaps and needs for child protection (CP) services in Borno state with increased threats and risks exacerbated by recent attacks along with the influx of IDPs into Bama. Recent camp closures by the government, where IDPs have been relocated to other LGAs, has had a negative impact on the delivery of child protection services.

Conflict-induced displacement is disrupting the protection response and depriving affected populations of critical protection assistance and services. The current IDP relocation to Auno from Maiduguri is disrupting ongoing and planned sectoral activities to beneficiaries; and with a lack of operational partners in Auno, this is leading to major gaps in critical protection services for IDPs (<u>UN OCHA 11/06/2021</u>).



OVERVIEW AND SOURCES

The underlying challenges faced by the education sector in Nigeria were highlighted by the Minister of State for Education in Nigeria, Chukwuemeka Nwajiuba, who stated that Nigeria has the highest number of out-of-school children in sub-Saharan Africa, putting the figure at 10,193,918. He went on to say that the system is characterized by high illiteracy level, infrastructural decay and deficits and in addition there are an inadequate number of qualified teachers, inadequate infrastructural facilities/resources and a lack of funding (*Vanguard* 29/06/2021). When considering the challenges of education provision in the BAY states, these systematic issues should be kept in mind.

June statistics for education services in managed camps are provided by the CCCM bi-weekly tracker report (01 - 15 June 2021). Education provision is still extremely limited in Hard-to-Reach(H2R) areas as outlined by the April and May REACH education factsheets. The impact of conflict and NSAG attacks are provided by an EU Report although the information is somewhat dated. More recent incidents are outlined in the UN OCHA Yobe Sitre. Finally the National Survey on School Resumption During COVID-19 Pandemic gives a nationwide update on the reopening of schools and challenges in complying with the NCDC Guidelines for Safe School Reopening.

LACK OF ACCESS TO EDUCATION PREVALENT ACROSS HARD-TO-REACH AREAS

Access to education services was mixed across the 15 LGAs assessed in April with just over half (56%) of assessed settlements reporting that there was no access to education services. All assessed settlements in the H2R areas of Askira/Uba, Michika and Madagali reported that there were no education facilities available. The other LGAs covered by the study were evenly spread with 3 LGAs falling into each of the reporting bands (between 21-40% of settlements, 41-60% of settlements, 61-80% of settlements and 81-100% of settlements) (*REACH* 30/04/2021).

However, none of the assessed settlements reported children accessing formal schooling, with it likely that most education available will be quranic education. The four main reasons for lack of education services were "Never had education facilities nearby" (68%), "Destroyed by conflict" (11%), "No teachers" (10%) and "Schools not allowed" (6%) (REACH 30/04/2021).

It is unlikely that H2R areas will gain access to education services unless the security situation improves (and they cease to be H2R areas). Government-run schools are not operating in these areas, so teachers are not deployed here. As can be seen from the survey, schools have been targeted and destroyed during the conflict and in some places insurgents forbid schools to open (REACH/06/2021, REACH/06/2021).

ACCESS TO QUALITY EDUCATION FOR CAMP-BASED IDPS REMAINS MIXED

Primary education is available onsite for 37% of camps, with 31% of the remaining camps having primary schools within 1 km. However, 22% of camps required children to travel between 1–5km to access a primary school, for the other 10% the distance was more than 10km. In 60% of camps where education facilities are available onsite, schools continue to need instructional and writing materials (*CCCM* 16/06/2021).

NSAG ATTACKS IN THE BAY STATES DENY EDUCATION TO TENS OF THOUSANDS OF CHILDREN

Insurgent attacks continue to deny tens of thousands of children access to education. The education sector

estimates that most of the children from the estimated 30,000 households displaced from Geidam and Kanamma one month ago are out of school. There may be more than 60,000 school-aged IDP children across 11 LGAs hosting displaced populations. Although the improving security situation in Geidam and Kanamma provides hope that schools may reopen soon it is reported that some teachers are reluctant to return to the schools in fear that they may be targeted in the event of deterioration in the security situation. During the attack on Geidam on 26 April 2021, two teachers were reportedly killed by suspected insurgents.

In addition to recent attacks in Yobe and on garrison towns in Borno state, attacks have also occurred in Adamawa. In April, there was an attack on the village of Kwapre (Hong LGA), where 7 people were killed and 50 houses, worship centers, markets and schools were burnt, leading to the displacement of 5,000 people. Since 2009, over 1,400 schools have been destroyed and 2,295 teachers killed across the North-East in protracted conflict (EU 04/06/2021, UNICEF 04/06/2021, UN OCHA 11/06/2021).

As the population waits to see if they can return to their homes in Geidam and Kanamma, education remains in limbo for many children. Parents report that they are still undecided about where to enroll their children in school, whether in places of displacement or to wait until they return to their homes. Even if parents were to decide to enroll their children in school, the challenge of availability of schools in places of displacement, especially in rural areas, remains a limiting factor (<u>UN OCHA</u> 11/06/2021).

SCHOOLS COMPLIANCE WITH COVID-19 SAFETY GUIDELINES LOWEST IN YOBE STATE

To ensure schools are well informed about the safety protocols, the government conducted training programs on safe school reopening across all school levels in both the formal and non-formal education system. However, only 50% of those who responded reported that they participated. Many schools conducted awareness and sensitization programs on COVID-19, with 70% of respondents in formal and 67% in non-formal reporting that they are aware of the programs conducted in their schools (NCDC 04/05/2021).

Yobe was the worst state amongst those surveyed for familiarity with NCDC protocols, with over 50% of respondents answering "no" or "not sure" to questions around knowledge of the NCDC protocols. Borno and Adamawa were roughly in line with the national average where 86% of respondents indicated familiarity with the protocols, despite more respondents in Adamawa

reporting not participating in any training on the subject.

Compliance with social distancing appears high with the non-formal sector reporting slightly higher compliance rates than formal schools. For those in the formal education system, schools observe social distancing in the classroom 77% of the time compared to 80% for nonformal institutions. More non-formal (69%) than formal schools (64%) reported their schools and learning centers check temperatures and an equal number of non-formal and formal said they have sick bays available for those who exhibit symptoms (NCDC 04/05/2021).

Other preventive measures put in place and reportedly followed include education personnel, learners and visitors always wear face masks in the classrooms, learners washing their hands with soap under running water before entering the classroom and the pasting of safety protocol posters in every classroom and learning centers. Compliance to these measures appear high for both the formal and non-formal systems, although the non-formal schools reportedly did better

Yobe was also the fourth worst state in terms of keeping social distancing in the classroom (approximately 45% of respondents replied no such measure was implemented), mostly attributed it to the lack of facilities, overcrowding, misconception and ignorance about the virus and space to allow for distancing. Adamawa appears to have

outperformed the rest of the country in this regard (<5% reporting a failure to social distance), only surpassed by Abuja and Jigawa. Borno was at the lower end of the scale, with approximately 25% of respondents indicating social distancing was not observed in the classroom (NCDC 04/05/2021).

While a decrease in school enrollment was reported nationwide, the situation appears to have been worse in Adamawa with approximately 70% of respondents indicating a decrease in enrollment. For Yobe and Borno a little over 30% of respondents reported a decrease in enrolment. This may have been made worse by the fact that back to school campaigns were either not conducted or not widespread in the three states, as with 20 other states assessed by the survey. It is possible that the economic impact may have hit private school enrolment harder, but the data is not available to make any conclusive judgement.

Beyond the lack of provision for vaccination of teachers and students in schools, there are mixed feelings about the effectiveness of the COVID-19 vaccine, as many respondents in 16 states, including the BAY states, are not convinced that the schools/learning centers will be safer after vaccination. This calls for an effectiveness campaign across board and for provision to be made to have students and their teachers vaccinated (NCDC 04/05/2021).

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 19.

Figure 19. IMMAP/DFS Secondary Data Analysis Framework

																		Cross	Protection	WASH	Education	Food Sec.	Health	Shelter	Livelihood	Nutrition	Analytical Outputs	
	st pic		ors		Lockdowns		ration				ing sccess ts		Veeds		*	Drivers & Aggravating factors										Crisis impact:		
	Demographic	Environment		fact		50		Local integration	ш	Dead		People facing manitarian acc constraints		Information Needs		8. Impact	Impact on people										Humanitarian profile, Affected	
	Dem	Env		Mitigating factors	"			Loca	ш	å		Peo	ш	Inform		œi	Impact on services and systems										people	
	suo		suc	奎	sure	2		22	ш			sical s	=			rrian Ss	Living standards										Severity of humanitarian	
	_		ğ	tors	mea	messa		Itention	ш		40	Security / physical constraints	matic	sebuell		9.Humanitarian Conditions	Coping mechanisms										conditions: PIN by severity	
	Socio cultural	Infrastructure	og Co	ting fac	lated	Public Health measures	t		60		cces	Securi	Infor	onchalle		9. 19. 19.	Physical / mental wellbeing										class: People at risk	
1. Context	Socio	Infras	Events/Shock/Ongoing Conditions	ggravat	nent re	Publi	4. Displacement	Pullfactors	Casualties	Missing	6. Humanitarian Access	factors ted	7. Communication and Information	Informati		10.At Risk	People at risk/vulnerable										Number of people at risk	
1.00			nock/(Drivers & Aggravating factors	ontainm		Displ	P	5. Cas		manit	Access of relief actors to the affected population	nicati			ties	Priority needs (pop)										Current and forecasted priority	
			ts/S	훕	9 Cor	ctions	4	factors			. 문	Acces	James and a	8		11.Priorities	Priority needs (Hum.)										needs: Priority geo areas	
	Security	Economics	2. Even	stics	3.COVID-19 Containment related measures	Movement restrictions		Push fa	п		9		7. Con	and mean		H.P.	Priority interventions (pop)										Priority aff. groups Priority sectors Etc.	
		ä		Characteristics	3.0	Mover		*		panfu		ance ance		hannels		/\$	Government & local authorities											
	lcal	egal & policy		60	ĺ	Physical distancing		Type, #, Mvmt		Inju		Access of affected population to assistance		Information channels and me		12. Capacities / Response	International actors										Gaps in response: PIN Reached PIN Covered	
	Political	Legal &		Type		Phy		7				Access		Infor	72.C		National/local actors										PIN not reached	

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 March to the 31 March were used).

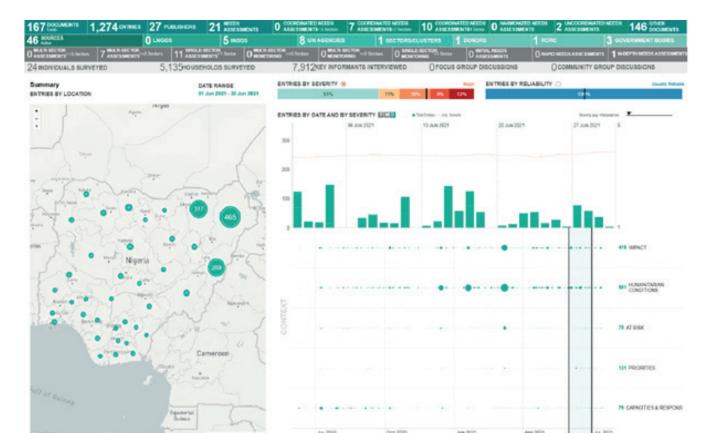


Figure 20. Documents by Location, Timeline and Primary Categories (Analytical Framework)

Precision
Health 177 (14%)
Pregnant or Lastering Women 4 (7%)
Premain Head of Household 3 (7%)
Premain Head of Household 3 (7%)
Displaced I Refugees 86 (4%)

Livelihoods 49 (7%)
Child Head of Household 1 (7%)
Choricely II 1 (7%)

Education 43 (7%)
Affected O Household 2 (7%)
Choricely II 1 (7%)

Affected I Refugees 34 (7%)
Affected I Refugees 35 (7%)
Affected I Refugees 36 (7%)
Affected I Refugees 36 (7%)

Choricely II 1 (7%)

Affected I Refugees 36 (7%)

Affected I Refugees 36 (7%)

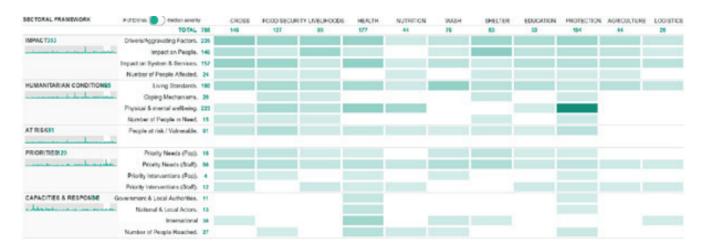
Affected I Refugees 36 (7%)

Choricely II 1 (7%)

Affected I Refugees 36 (7%)

Figure 21. Documents and Entries by Sector and Affected Group

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



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

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

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

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

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

The analysis workflow is provided overleaf (Table 6).

Table 6: IMMAP/DFS Analysis Workflow

	1. Design & Planning	2.Data collation & collection	3.Exploration & Preparation of Data	4.Analysis & Sense Making	Sharing & Learning
Main activities	Definitions of audience, objectives and scope of the analysis	Identification of 116 relevant documents (articles, reports) from 37 sources	Categorization of the available secondary data (1,094 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 5 Needs assessment reports)	Explanations (Identification of contributing factors)	Review, editing and graphic design
	Definition of collaboration needs, confidentiality and sharing agreements	Data protection & safety measures, storage	Additional tags	Interpretation (priority setting, uncertainty, analytical writing)	Dissemination and sharing
	Agreement on end product(s), mock up and templates, dissemination of products	Interviews with key stakeholders	Information gaps identification	nformation gaps & limitations	Lessons learnt workshop,
Tools	Analysis Framework Analysis Canvas Data sharing agreements Report template	SDR folder Naming convention	DEEP(SDAF) DEEP (Assessment registry) Coding scheme	Interpretation sheet Black hat	Revised report template Analytical writing guidance Lessons learnt template



Thank you.





Contact

Global project manager

Benjamin Gaudin

email: bgaudin@immap.org

Nigeria focal point

Johnson Taremwa

email: jtaremwa@immap.org

Website

Direct Link : https://immap.org/



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