



UNICEF Nigeria 2018

Consolidated Emergency Report

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Acronyms

C4D	Communication for Development
CFS	Child Friendly Space
CJTF	Civilian Joint Task Force
CLTS	Community-Led Total Sanitation
CMAM	Community Management of Acute Malnutrition
CPIE	Child Protection in Emergencies
CRC	Convention on the Rights of the Child
CSD	Child Survival and Development
DDR	Disarmament, Demobilisation and Reintegration
DTM	Disaster Tracking Matrix
ECD	Early Childhood Development
EiE	Education in Emergencies
EU	European Union
FMWR	Federal Ministry of Water Resources
GAM	Global Acute Malnutrition
GBV	Gender-Based Violence
HF	Health Facility
HIV	Human Immunodeficiency Virus
HNO	Humanitarian Needs Overview
HRP	Humanitarian Response Plan
IDP	Internally Displaced Person
IOM	International Organization for Migration
IP	Implementing Partner
LGA	Local Government Administration
MAM	Moderate Acute Malnutrition
MICS	Multiple Indicator Cluster Survey
MRM	Monitoring and Reporting Mechanism
NCDC	Nigeria Center for Disease Control
NFI	Non-Food Items
NGO	Non-Governmental Organisation
NSCDC	Nigeria Security and Civil Defence Corps
OCHA	Office for the Coordination of Humanitarian Affairs
PCA	Programme Cooperative Agreement
PMTCT	Prevention of Mother-to-Child Transmission of HIV
RRM	Rapid Response Mechanism
RUTF	Ready-to-Use Therapeutic Food
SAM	Severe Acute Malnutrition
SEA	Sexual Exploitation and Abuse
SGBV	Sexual and Gender Based Violence
SMART	Standardized Monitoring and Assessment of Relief and Transitions survey
SMS	Short Message Service
TLC	Temporary Learning Center
UASC	Unaccompanied and Separated Children
UN	United Nations
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene

Executive Summary

In 2018, Northeast Nigeria entered into the tenth year of the protracted crisis that continues to cause displacement, hamper development and erode resilience. Clashes between the Nigerian military and non-state armed groups escalated into conflict in May 2013, with authorities declaring a state of emergency in Borno, Adamawa and Yobe states. Since then, the region has experienced a massive destruction of infrastructure, a collapse of livelihoods, widespread displacement and brutal attacks on the civilian population.

Threats of attacks by armed groups and military restrictions related to the state of emergency – particularly restrictions on freedom of movement – continue to have negative impact on trade, livelihoods and markets, leaving a substantial proportion of the civilian population dependent on humanitarian assistance. Since the start of the conflict, more than 20,000 people have been killed and more than 4,000 people abducted.

The high level of insecurity has exacerbated the already dismal situation of women and children. Displacement increased in 2018, with over 1.8 million people who remain internally displaced across the three Northeast states of Borno, Adamawa and Yobe, with 85 per cent of the displaced in Borno alone. Children make up 56 per cent of the IDP population, and 54 per cent are women.

Between January and November 2018, an average of 4,000 individuals—mainly women and children—were displaced every single week, up from an average of 1,400 in 2017. The cumulative impact of violence and stress has weakened the coping capacities of communities, and left more than 2 million girls, boys and caregivers in need of psychosocial support. Access to adequate water, sanitation and hygiene (WASH) remains a challenge. In 2018, cholera outbreaks affected more than 12,000 people

and claimed nearly 200 lives in all three states. Across the northeast, particularly in Borno State, at least 867 primary, junior and senior secondary schools remain closed.

In 2018, 7.1 million people were in need of humanitarian assistance. Thanks to the generous support of donors, and despite widespread insecurity and difficult operating conditions, in 2018 UNICEF continued to deliver on its Core Commitments to Children in Humanitarian Action, reaching over 3 million people with access to basic health, water, sanitation, nutrition, education and child protection services.

UNICEF reached over 233,000 children with treatment for severe acute malnutrition (SAM) in 2018, including children from internally displaced persons (IDP) sites and host communities. Over 1.2 million people accessed safe water, and 943,000 people benefitted from hygiene promotion and distribution of hygiene supplies.

Over 520,000 children were reached with lifesaving child protection services, including at least 9,595 unaccompanied and/or separated children who received integrated case management services and 732 unaccompanied and separated children who were reunited with caregivers. 1,670 children formerly associated with non-state armed groups were provided with social and economic reintegration support, and over 312,000 children received psychosocial support services. Over 491,000 children received learning materials to improve their access to formal education.

In 2018, the funding shortfall stood at over US\$ 47 million of the US \$142 million appeal. The shortage of funds combined with insecurity – disruptions in access and movement, attacks against aid workers - hampered the delivery of emergency aid to the children most in need.

Humanitarian Context

In 2018, UNICEF's humanitarian assistance focused on identifying the most vulnerable populations, assessing their needs and providing a response based on UNICEF's Core Commitments for Children and Humanitarian Appeal for Children.

As the year drew to a close, the total number of IDPs in 2018 peaked at 1.8 million, up from about 1.6 million at the beginning of the year. New displacements of people over the course of 2018 were relatively stable, with a total of 176,000 newly displaced people in Adamawa, Borno and Yobe states. The last weeks of December witnessed the highest movement of people, due to increased conflict between Nigerian security forces and non-state armed groups, especially in northern Borno. Hostilities in Baga on 26 December and Monguno on 28 December resulted in significant fresh displacement, with new registrations at camps in Maiduguri and Monguno estimated at 44,032 people in 11 camps.

With increased IDPs, the availability of land for humanitarian response became an increasingly urgent limitation for humanitarian partners attempting to provide shelter, construct latrines and provide safe water. In Monguno, over 10,000 persons are currently sleeping outside without any shelter, almost all camps in Maiduguri are congested and more people continue to arrive. Apart from the impact that hostilities have had on the local population, they have also significantly reduced humanitarian access and increased the number of people who are beyond the reach of humanitarian assistance.

At least 253 humanitarian workers temporarily relocated from their duty stations in November-December due to ongoing hostilities, including 113 humanitarian workers who relocated from Monguno on 29 December. Among the specific incidents that impacted on UNICEF facilities are the 7 December attack on Rann (Kala Balge LGA, Borno state) where the UNICEF-supported clinic was burnt, and the 24 December attack in Kukareta (Damaturu LGA, Yobe state)

where the maternity section of the Kukareta health facility was burnt and medicine looted. On 24 and 26 December NSAGs also burnt down three primary schools in Kukareta and Katarko towns where 1,389 children (721 girls and 668 boys), including internally displaced children, were attending school.

The cumulative impact of violence and stress has weakened the coping capacities of communities and left more than 2 million girls and boys in need of psychosocial support. Sexual violence - including rape, sexual exploitation, forced and early marriage, survival sex and domestic violence, physical assault, denial of resources, and psychological and emotional abuse - are among the most frequently reported violations. Adolescent girls in particular are exposed to sexual abuse and forced marriage. Based on reports by the Monitoring and Reporting Mechanism (MRM), the use and recruitment of children by NSAGs constituted over 35 per cent of the incidences of grave violations reported in 2018. Children used by and associated with armed groups are exposed to severe abuse and violations, including emotional, physical and sexual violence. Analysis of data on gender-based violence (GBV) show that of GBV survivors seeking assistance, 44 per cent were children (98 per cent girls), of whom 46 per cent reported having suffered sexual violence. An estimated 2.9 million school-aged children need humanitarian assistance in education.



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Access to adequate water, sanitation and hygiene (WASH) remained a challenge. In 2018, cholera outbreaks affected more than

12,000 people and claimed nearly 200 lives in all three north-eastern states. In 2018 440,000 children at risk of severe acute malnutrition (SAM) in 2018, and an additional 503,000 children at risk of moderate acute malnutrition (MAM). Across the Northeast, particularly in Borno State, at least 867 primary, junior and senior secondary schools remained closed. Maintaining humanitarian support will be critical to ensuring that affected people do not slip further into crisis and in building resilience against future shocks, particularly as the conflict and related population movements continue.

Humanitarian needs were not limited to Nigeria's Northeast. Tens of thousands of boys and girls were affected by inter-communal violence between farmers and herders in Nigeria's Middle Belt region, with more than 200,000 people still displaced in Benue and Nasarawa States alone. In August and September, heavy rains across Nigeria caused severe flooding in 12 states, affecting an estimated 2.3 million people. Along Nigeria's eastern borders, the conflict in neighbouring Cameroon caused more than 30,000 Cameroonian asylum seekers to flee into Benue, Cross River and Taraba States. In addition, all of Nigeria's 36 states and the Federal Capital Territory (FCT) experienced disease outbreaks in 2018, including cholera, meningitis, Lassa fever, measles, monkey-pox and yellow fever.

In 2018, health and nutrition services were scaled up to reach children in displacement sites and vulnerable children living in conflict-

affected parts of the country. As a result, UNICEF was able to treat more than 212,700 children with SAM, achieving 99 per cent of the target. More than 1.1 million people gained access to safe water with UNICEF support over the course of the year—more than twice the achievement for 2017. However, due to significant funding gaps in the WASH sector, UNICEF only achieved 37 per cent of the planned target for access to sanitation facilities.

In the health sector, funding gaps prevented UNICEF from rehabilitating damaged health infrastructure and purchasing equipment to improve the quality of care. With available funds, UNICEF prioritized ensuring the continuity basic primary health care, through adequate staffing and supplies in conflict-affected areas, which allowed UNICEF to reach nearly 2.9 million people with outpatient consultations (exceeding the target).

UNICEF's child protection response reached more than 294,000 children and caregivers with psychosocial support services, and over 193,000 children and caregivers with mine risk education. Nearly 203,000 boys and girls received learning materials, though funding gaps prevented UNICEF from reaching a higher number of children as originally planned.

Results

Delivering on UNICEF's Core Commitments To Children in Humanitarian Action

Water, Sanitation and Hygiene

Access to adequate water, sanitation and hygiene (WASH) remained a challenge. In 2018, cholera outbreaks affected more than 12,000 people and claimed nearly 200 lives in all three north-eastern states. Countrywide, in 2018 UNICEF's emergency response reached 1,228,266 people (116 per cent of the target) with WASH services.

Water

UNICEF enabled 592,265 people to gain access to safe drinking water in IDP sites, return areas and host communities through the construction and rehabilitation of 416 handpumps and 70 solar/motorized boreholes. Throughout the year, UNICEF, with its NGO partners CIDAR, DRC and TdH, provided regular operation maintenance and chlorination services including the installation of dosing pumps at more than 4

90 water points, reaching 265,000 people (40 per cent total of IDP camp population) living in 18 high-risk IDP camps in Borno with sustained access to potable water. Additionally, 311,400 people enjoyed sustained access to potable water through regular chlorination and free residual chlorine monitoring (through CIDAR) of 679 community water points in 19 IDP camps and host communities in Jere and MMC to mitigate the spread of WASH-related diseases. By providing 3,340 45kg drums of HTH chlorine and coagulants to water boards in Adamawa, Borno and Yobe states, UNICEF reached up to 4 million people, including 609,100 IDPs and host communities being served under urban systems, with access to potable water, decreasing the risk of waterborne diseases and supporting to control cholera in these areas.

Sanitation

In 2018, UNICEF responded to the sanitation needs of 94,150 people in IDP camps and

host communities through the provision of 1,018 emergency latrines, 471 VIP latrines, 506 bath shelters and 222 handwashing facilities. Through its partners NEWSAN, RUWASSA and DRC, UNICEF reached 276,706 people (40 per cent of the IDPs living in camps) living in 39 cholera-affected and high risk IDP camps and communities in Dikwa, Ngala, Mafa, Pulka, Rann, and Monguno LGAs of Borno state with sustained environmental sanitation services including camp cleaning, garbage collection, and cleaning and disinfection of up to 7,000 latrines. UNICEF also sustained adequate sanitation access to 216,550 IDPs through the regular desludging of more than 4,000 latrines in Borno.



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Hygiene promotion

Mass sensitization campaigns on hygiene promotion and cholera-prevention practices, such as handwashing and elimination of open defecation, were carried out by UNICEF throughout the year for 943,789 people (representing 94 per cent of UNICEF's target in the three Northeast states). Millions more were reached through hygiene promotion campaigns on mass media (including radio and television). UNICEF distributed WASH/dignity kits to more than 423,090 persons (85 per cent of UNICEF's target), which included about 40,000 pre-positioned

kits for cholera and flood response, 10,000 kits for families with children affected by malnutrition, and 30,515 kits with provisions for menstrual hygiene management targeting young girls.

	Overall needs	UNICEF and IPs		Sector Response	
		2018 Target	Total Results*	2018 Target	Total Results*
WATER, SANITATION & HYGIENE					
Number of people provided with access to safe water per agreed standards	2,886,000	1, 050,000	1,228,266	2,100,000	3,915,387
Number of people with access to improved sanitation facilities.	1,000,000	250,000	94,150	600,000	579,030
Number of people benefiting from sustained environmental sanitation services (solid waste management and latrines cleaning and desludging of latrines)	TBC	600,000	493,256	1,000,000	1,721.78
Number of people exposed to community tailored hygiene messages aiming at hygienic behaviour and practices.	2,886,000	1,000,000	943,789	2,000,000	1,562,435
Number of people benefiting from basic hygiene items including top-ups.	2,886,000	500,000	369,253	1,500,000	404, 453

Results

Delivering on UNICEF's Core Commitments To Children in Humanitarian Action

Education

The recent crisis in Northeast Nigeria has put pressure on an education system that was already weak before the start of the conflict. In 2015, more than 75 per cent of children in Yobe and Borno states were out of school as compared to 24 per cent in the rest of Nigeria.

There are multiple barriers for children to access education in the Northeast. A critical challenge is the inability of parents to support the cost of learning materials and the charges levied in schools due to loss of assets and livelihoods during the crisis. Additional barriers include the poor quality of education mainly due to a lack of adequately trained teachers, a lack of teaching and learning materials, insufficient or overcrowded classrooms, and inadequate WASH facilities.

More alarmingly, throughout the crisis, especially between 2009 and 2015, education has been the object of deliberate and systematic attacks by non-state armed groups, leading to the loss of life and property and weakening an already fragile education system. With an estimated 19,000 teachers displaced since 2009 and 645 killed and approximately 1,200 schools damaged or destroyed, the use of schools for military purposes, the intimidation and harassment of teachers, institutional and human capacities are overstretched to respond to the educational needs of children and youth. In Borno state, 824 out of 1,359 government schools remain closed.

Getting children back in school in areas where security permits remains a critical priority for UNICEF. Supporting the return of children to school and advocating for the opening of schools in more secure areas were therefore key activities in 2018.

In response to the cholera outbreak in Borno state, UNICEF's Education team worked closely with the WASH and C4D sections on preventive measures in schools located in hot spots, which included training teachers,

printing and distributing posters on cholera in local languages, promoting handwashing practices in schools, and the distribution of soap. 32,450 schoolchildren had improved knowledge on preventing cholera through the training of 806 teachers on improved hygiene practices in cholera-affected LGAs.



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UNICEF education and child protection supported an ECHO-funded resilient education approach that greatly increased students' knowledge of what to do in case of emergency. Children were confident and better-equipped to deal with dangers and risks associated with being at and going to school. The development of school emergency preparedness and response plans expanded from 33 to 173 schools in the three north-east states to build child, teacher and community resilience.

Scale up

In 2018, through implementing partners, UNICEF increased access to education for 55,985 (55,550 female) children through the rehabilitation of 176 classrooms and the establishment of 312 temporary learning spaces within formal and non-formal education settings. Fourteen life skills and vocational training centres were established in partnership with the Norwegian Refugee Council benefiting 1,552 out-of-school youth (76 per cent females).

UNICEF, as education sector lead, played a key role in ensuring continued access to quality education to 491,918 (278,921 girls) conflict-affected children through the provision of essential teaching-learning materials including school bags and uniforms. These interventions helped children to gain a sense of stability and normalcy which plays a vital role in children's psychosocial well-being and development.

Improved learning

Teachers were trained (3,584 teachers) on psychosocial support (PSS) which enabled them to better provide psychosocial support to more than 351,550 (170,959 girls) conflict-affected children.

The Teaching at the Right Level (TaRL) approach restructures the education system to focus on all children learning well. TaRL learning materials developed and piloted with SUBEB and NGO partners in 12 schools in Borno. An assessment of TaRL revealed tangible learning gains in a short span of time. The training involved 38 (9 females) master trainers from teacher training institutions and curriculum desk officers from SMOE and SUBEB with an outreach of 304 (196 females).

System strengthening

UNICEF supported the SMOE/SUBEB in the development of an evidence-based policy for the education system, rolling out in-service teacher training and development of an EMIS to effectively monitor inclusive quality basic education and effective response to

vulnerable children in conflict-affected areas. Sixty-five trainers and 400 quality assurance officers were trained on conducting of 2018 annual school census. They extended the training to 3,730 head teachers (869 females) in Borno and Yobe states. Data for the census has been collected and validated in all three conflict affected states. Accurate school-based data are available for the first time since the conflict began. Despite the challenges and humanitarian situation, Borno state was the first state to complete the 2017/2018 Annual School Census.

412 SBMCs/CBMCs were trained on C/DRR planning 2,653 (793 females) SBMC members] and prepared C/DRR plans for their respective schools. In addition, a total of 125 SBMCs were trained on whole school improvement plan benefiting 635 SBMC members (164 females). A total of 45 officers (13 females) benefitted from the training on monitoring of effectiveness of SBMCs using tablets.

Sector coordination

The Education in Emergencies Working Group (EiEWG)/Education Cluster is established and functioning at state and national level, coordinating the response of 25 partners to narrow the gaps in the delivery of education in emergencies to conflict-affected children.

	Overall needs	UNICEF and IPs		Sector Response	
		2018 Target	Total Results*	2018 Target	Total Results*
EDUCATION					
Number of children accessing learning through rehabilitated classrooms/ established temporary learning spaces	1,239,820	562,250	55,985	626,200	67,185
Number of girls and boys receiving education supplies and/or teaching/learning materials	2,847,464	1,458,000	491,918	1,871,424	600,236

Results

Delivering on UNICEF's Core Commitments To Children in Humanitarian Action

Child Protection

The physical safety and psychosocial well-being of 2.5 million girls and boys in Northeast Nigeria remains greatly compromised due to the protracted exposure to extensive protection threats and brutal violence. Family separation, heightened abuses, severe psychosocial distress, sexual violence and other grave child rights violations are among the major concerns requiring immediate intervention.

The crisis has not only affected children, but also their caregivers and communities. Multiple displacement, loss of property and livelihoods, gender-based violence (GBV) and disruption of community support have all deeply undermined the well-being of caregivers and their capacity to cater to children under their care. While attending to the needs of children and adolescents it is imperative for the Child Protection sub-sector, to ensure support extends to caregivers to achieve long-lasting benefits in terms of the child's safety and positive development.

The cumulative impact of violence and stress has weakened the coping capacities of communities and left more than 2 million girls and boys in need of psychosocial support. Sexual violence - including rape, sexual exploitation, forced and early marriage, survival sex and domestic violence, physical assault, denial of resources, and psychological and emotional abuse - are among the most frequently reported violations. Adolescent girls in particular are exposed to sexual abuse and forced marriage.

Based on reports by the Monitoring and Reporting Mechanism (MRM), the use and recruitment of children by non-state armed groups (NSAGs) constituted over 35 per cent of the incidences of grave violations reported in 2018. Children used by and associated with armed groups are exposed to severe abuse and violations, including emotional, physical

and sexual violence. Analysis of data on gender-based violence (GBV) show that of GBV survivors seeking assistance, 44 per cent were children (98 per cent girls), of whom 46 per cent reported having suffered sexual violence.

In 2018, UNICEF, with government and implementing partners, reached 520,311 children with lifesaving child protection services, including at least 9,595 unaccompanied and/or separated children (UASC) receiving integrated case management services and 732 UASC reuniting with caregivers. Humanitarian access in several LGAs limited the provision of family tracing, reunifications and social and economic reintegration services.



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1,670 children formerly associated with non-state armed groups were provided with social and economic reintegration support. 312,331 children received psychosocial support services, while 195,095 children received mine risk education awareness. In Dapchi, of 113 children abducted by NSAGs in February, 106 girls and one boy were released and reunited with their families by the Yobe State government. UNICEF, with the Yobe Ministry of Youth, Social and Community Development, provided parenting sessions at the community level with social workers assigned to monitor psychosocial support provided to girls.

UNICEF contributed to the Call to Action on Protection from GBViE as part of a global multi-stakeholder initiative to transform and ensure that GBV services and programmes are in place for survivors and actions to mitigate the risks of GBV are integrated and mainstreamed.



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In addition to conducting training workshops with 520 community members and 55 national security agencies on humanitarian principles and GBV, with an emphasis on protection from sexual exploitation and abuse (PSEA), UNICEF also conducted two safety audits in 12 LGAs to map protection and GBV risks and helped develop an inter-agency coordination mechanism for PSEA to respond to complaints and scale-up sensitization efforts on PSEA and referral pathways. While UNICEF offers GBV survivors access to medical, psychosocial and livelihood services

to support their social and economic reintegration, survivors tend to decline accessing legal aid or other security protection services due to fear of reprisals.

The Nigeria Country Task Force on Monitoring and Reporting (CTFMR) was re-established in 2018 and focused on advocacy, including the immediate release of children detained by the Nigerian armed forces. An MRM mainstreaming strategy was drafted and circulated throughout UNICEF and MRM trainings were conducted with the education and protection sectors and the Child Protection Sub-Sector Working Group (CPSWG). In 2018, the CTFMR verified seven incidents of attacks on schools and eleven attacks on health facilities, mostly by NSAG.

Of the 3,708 children reported to be with the Civilian Joint Task Force (CJTF), the CTFMR interviewed 2,850, with 870 verified as being directly associated with the CJTF. Of the children verified, UNICEF supported the formal separation of 833 children, all of whom accessed social and economic reintegration services.

	Overall needs	UNICEF and IPs		Sector Response	
		2018 Target	Total Results*	2018 Target	Total Results*
CHILD PROTECTION					
Number of children and adolescents benefiting from PSS services and life skills	785,000	380,000	323,721	540,000	455,114
Number of children facing protection risks (violence, neglect, abuse, family separation) who received case management services	34,000	10,500	11,230	15,000	21,028
Number of children and adolescents who have suffered from grave child rights violations including those formerly associated with armed groups or those returning from captivity who benefit from socio-economic assistance to successfully reintegrate into their communities	15,000	5,000	3,089	7,000	4,878
Number of children, adolescents and caregivers benefiting from mine risk education	800,000	175,000	211,418	250,000	450,102

Results

Delivering on UNICEF's Core Commitments To Children in Humanitarian Action

Health and Nutrition

Women and children continue to bear the brunt of malnutrition in Northeast Nigeria, where the conflict has acted as an important driver of hunger. Recent assessments have identified pockets of high malnutrition, with a very high level of global acute malnutrition (GAM) above the 15 per cent emergency threshold in two LGAs in northern Yobe (Karasuwa and Nguru). GAM rates between 10-14 per cent have also reported in five LGAs in northern Borno (Abadam, Mobbar, Guzamala, Kukawa and Nganzai), ten LGAs in central Borno (Maiduguri Metropolitan City, Jere, Damboa, Gubio, Kaga, Konduga, Mafa, Magumeri, Marte and Monguno) and 15 LGAs in Yobe (Machina, Yunusari, Yusufari, Damaturu, Fika, Fune, Gujba, Gulani, Nangere, Potiskum, Tarmuwa, Bade, Borsari, Geidam, and Jakusko).

The Nutrition sector estimates that 2.8 million women and children are in need of nutrition interventions. The majority of these (1.6 million) live in host communities, while a remaining 500,000 are internally displaced persons and 400,000 are returnees. This includes 367,000 children in need of treatment for severe acute malnutrition (SAM) and 727,000 children who suffer from moderate acute malnutrition (MAM).



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Historically, Northeast Nigeria has also consistently failed to meet the minimum targets for health indicators. This has been worsened in the last few years by insurgency

and armed conflict. While the national maternal mortality ratio (MMR) is 576 per 100,000 live births, in the Northeast, the MMR is as high as 1,500-2,000 per 100,000 live births – at least three times as high. The under-five mortality rate of 160/1,000 live births in the Northeast (DHS 2013) is also above the national average of 126/1,000 live births.

Health facilities have been systematically targeted by insurgent attacks, leading to destruction and damage incompatible with the provision of quality health services. Use of health services remains below one contact per inhabitant per year. As a result of the insurgency distorting the normal living conditions of the population and disrupting the already weak health system, there has been a rise in the frequency of outbreaks of preventable communicable diseases, limited access to essential medicines and care for non-communicable diseases and an almost complete lack of services for pregnant and lactating women and under-five children.

Emergency nutrition

In 2018, UNICEF led a massive scale up of the nutrition program to ensure access to appropriate nutrition services in Borno and Yobe states in collaboration with government counterparts and through partnerships with 16 international non-governmental organization (INGOs) and three national non-governmental organization (NGOs).

Comprehensive nutrition services, namely detection and treatment of acute malnutrition, IYCF counselling and multiple micronutrient powder (MNP) supplementation, were integrated into 515 fixed health facilities. In collaboration with the government, UNICEF also deployed 49 mobile nutrition teams in hard to reach areas and 49 outreach teams in densely populated areas and IDP camps for the provision of life-saving nutrition services. UNICEF also strengthened the capacity of 3,508 community nutrition mobilizers (CNMs) at settlement level for active nutrition

screening, referral and follow up of malnourished children and facilitated 5,627 mother support group (MSG) monthly meetings to discuss on optimal IYCF practices and the use of nutrition supplies, namely ready to use therapeutic food (RUTF) and MNPs at household level.

UNICEF used a third-party contractor (Deloitte) to deploy 34 senior nutrition facilitators based at LGA level to provide regular on-site coaching and supportive supervision to nutrition service providers at service delivery sites and ensure functional coordination mechanism at LGA level among partners in the ground. In partnership with a local NGO, 121 nutrition supervisors were deployed at ward level to support CNMs and strengthen community mobilization and sensitization.

On average, 1.6 million children were screened for malnutrition in each month. 368,935 children with SAM were admitted in outpatient therapeutic programs (OTPs), over 100 per cent of the annual target. The cure rate was 94.3 per cent, the death rate 0.2 per cent, the defaulter rate 4.1 per cent and the non-responder rate 1.4 percent, all above Sphere minimum standards. IYCF counselling was provided to 266,097 pregnant and lactating women (PLW), for 35.8 per cent achievement of the annual target. MNPs were provided to 298,561 children aged 6-23 month, or 71.4 per cent achievement of the annual target.

In addition, a quarterly nutrition surveillance system was established to monitor the

nutrition situation and address needs immediately.

Emergency health

Since January 2018, a total of 3,321,767 IDPs (including 1,594,448 children under 5 years) were reached with integrated primary health care services in health facilities in IDP camps and host communities in Adamawa, Borno and Yobe states. With regard to measles vaccination, UNICEF reached 310,126 children, as there were no outbreaks and no reactive measles campaigns were triggered. Malaria remains the main cause of morbidity from the 1,636,037 consultations conducted by UNICEF and partners in 2018.

In addition to consultations, health workers carried out 1,879,299 preventive services for women and children. This included 310,126 children 6 months to 15 years who were vaccinated against measles; 618,334 children and pregnant women who were reached with various other antigens, including Vitamin A supplementation and Albendazole tablets for deworming; 203,785 pregnant women who were reached with ante-natal care and 34,860 women who received post-natal care; and 31,524 women who were supported with safe deliveries.

	Overall needs	UNICEF and IPs		Sector Response	
		2018 Target	Total Results*	2018 Target	Total Results*
NUTRITION					
Number of children aged 6-59 months with SAM admitted to therapeutic care for specified period of time	439,523	215,292	233,966	307,660	368,935
Proportion of children 6-59 months with severe acute malnutrition recovered		>75%	94.3	>75%	93
Number of caregivers of children 0-23 months with access to IYCF counselling for appropriate feeding		519,641	206,547	743,007	266,097

Number of new children 6-23 months in the affected areas receiving multiple micronutrient powder		292,446	232,463	418,141	298,561
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	Overall needs	UNICEF and IPs	
		2018 Target	Total Results*
HEALTH			
Number of children 6 months - 15 years vaccinated against measles	2,892,925	2,025,048	310,126
Number of consultations for IDPs and affected host communities	3,900,000	2,340,000	3,321,767
Number of pregnant women and children under 5 years given and sleeping under mosquito nets		1,732,938	205,774

Results

Delivering on UNICEF's Core Commitments To Children in Humanitarian Action

Cross cutting priorities

Communication for Development

Addressing harmful cultural practices and social norms at the community level is an integral change strategy for UNICEF. In 2018, in collaboration with the National Orientation Agency, partnerships with traditional and religious leaders were reinforced to work on polio eradication, full immunization, handwashing, antenatal care, delivery by skilled attendants, exclusive breastfeeding, adequate/appropriate complimentary feeding and the propagation of the Facts for Life and Faith for Life documents. 52 Facts for Life radio programmes, produced on essential family practices, aired in four states, reaching a population of more than 4,000,000.

With funding from the Regional Disease Surveillance Systems Enhancement and support from UNICEF, the Nigerian CDC developed a communications plan with weekly health radio programmes, weekly advisories in three national dailies, and production of TV and radio programmes. 26 episodes of a safe schools' radio programme were broadcast repeatedly in Maiduguri. 5,578 pregnant women received regular voice messages on maternal health through their mobile phones (mHealth). In addition, 3,229,480 leaflets on polio and routine immunization were printed and distributed in high-risk states.

219 Mama2Mama Groups in Adamawa State worked for nutrition promotion, supported maternal health initiatives and convened 98,677 women in their respective communities to provide knowledge on essential household practices; 45,303 new pregnant mothers were identified and referred. Follow-up visits at home were made with 41,241 pregnant mothers to support them to complete four to eight ANC visits; and 30,892 pregnant mothers in labor were tracked and linked to health facilities for

delivery. 950 women's groups from five states used their platforms to transmit critical messages for child and maternal care and health. Three NGOs, working in active collaboration with UNICEF, were able to reach 20,000 women with critical messages on maternal and child care.



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Work with Voluntary Community Mobilisers (VCMs) was expanded to include the promotion of birth registration, antenatal care and exclusive breastfeeding. UNICEF supported the expansion and training of 120,000 community influencers around the VCMNet, resulting in the tracking of 100 per cent of newborns in VCM settlements for zero dose vaccination and the reduction of missed children due to non-compliance to less than 1 per cent. Birth registration campaigns were launched in 18 states with communications materials provided in six languages, resulting in the registration of 5,880,802 children under five. Intense mobilization by VCMs in 11 northern states during World Breastfeeding Week 2018 resulted in the provision of knowledge on exclusive breastfeeding to 93,113 and the affirmation by 174,225 lactating mothers to exclusively breastfeed their babies.

Challenges and Constraints

During 2018, across all programme areas, the volatile security situation continued to deny affected communities life-saving assistance and hamper project implementation. An estimated 820,000 people remain in areas where humanitarian actors cannot provide any services or assistance, due to a lack of security assurances from conflict parties. The humanitarian situation of women and children fleeing from these areas is dire, with one in two children under five suffering from moderate acute malnutrition and one in four suffering from severe acute malnutrition.



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Hostilities between Nigerian security forces and non-state armed groups escalated sharply during the second half of the year, particularly after December 2018, resulting in the further reduction of humanitarian access in Kukawa and Kale Balge LGAs in Borno State.

Delivering assistance in a highly insecure environment has driven up operational and administrative costs, for example through a heavy reliance on air rather than road travel and the increased need to contract services

from (and invest into building the capacities of) third-party contractors who can provide life-saving services in some hard-to-reach areas that UNICEF staff cannot sustainably access.

2018 also saw election-related violence and a high turnover of government counterparts at the state level in the run up to the 2019 governorship elections federal elections. In some states and sectors, this contributed to also caused significant constraints to UNICEF programming in 2018.

For instance, in WASH, UNICEF was not able to provide sufficient NFI kits, nor the required level of coverage for safe water and sanitation in IDPs in camps. In education, where UNICEF received 49 per cent of the financial requirement, only an average of 50 per cent of the Humanitarian Access for Children (HAC) targets were reached. Only 4 per cent of children accessed learning through rehabilitated classrooms/temporary learning spaces, and only 12 per cent of children received educational supplies and teaching and learning materials. This might negatively impact on new enrolment, retention and contribute to dropout due to parents' inability to support schooling of their children.

Assessment, Monitoring and Evaluation

In 2018, UNICEF continued to use the Humanitarian Performance Monitoring (HPM) system established in Northeast Nigeria. HPM indicators were identified and reported against the Humanitarian Action for Children (HAC) monthly Situation Reports (SitReps). The indicators were aligned with 2018 Humanitarian Response Plan (HRP) to ensure that UNICEF's contribution to the overall intersectoral humanitarian response could be measured and tracked. As sector lead for WASH, Nutrition, Education and the Child Protection sub-sector, UNICEF contributed to intersectoral humanitarian response plan monitoring through participation in all coordination mechanisms and participated in joint field monitoring missions with OCHA and other sectoral partners on the ground.

At the start of 2018, an evaluation of the coverage and quality of UNICEF humanitarian response in the Northeast was conducted by an independent organization with a focus on UNICEF's humanitarian programme in Borno State between 2015 and 2018. The evaluation study looked at results that have been produced by UNICEF across the different programme sections and explored the internal and external factors that have enabled or hindered success and identified good practices and innovations to build lessons learned.

During 2018, UNICEF humanitarian response in the Northeast were conducted through the HPM system, through both short daily and weekly field monitoring trips, and by more detailed HPM monthly rounds in all the hotspots in Borno, Yobe and Adamawa States. The HPM assessed humanitarian programme implementation and produced analysis on the status of activities carried out by sections in line with acceptable standards (Core Commitments for Children and Sphere indicators) and raised alerts and recommendations for the effectiveness of UNICEF humanitarian response. HPM data collection is through adapted tools such as Service Points Monitoring (SPM), Focus Group Discussion (FGD) and Supply End User Monitoring.

In 2018, UNICEF established U-report 24/7, an SMS based system to support UNICEF's emergency response with a focus on Accountability to Affected Population (AAP). The system collects real-time data including reports and complaints from affected populations. The U-Report 24/7 tool was also used to send messages in real-time to populations, providing information and soliciting feedback, and has enhanced awareness and preparedness among at-risk populations including for disease outbreaks.



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UNICEF programme specialists contributed to monitoring and documentation of the emergency, performing programme monitoring and supportive supervision as required. Field-based third-party consultants were also deployed to perform permanent services provision, monitoring support and reporting on the progress of results for children on a regular basis.

In addition to field monitoring, children's nutritional status was regularly monitored through a strong UNICEF-led nutrition surveillance system. SMART surveys as well as coverage assessments were conducted during 2018, with results applied for humanitarian response monitoring during the reporting year and for the 2019 HNO/HRP planning cycle.

Financial Analysis

UNICEF appealed for US\$ 142.4 million for 2018, reflecting the continued deterioration in the situation of children in Northeast Nigeria and the overwhelming humanitarian needs. At the end of 2018, US\$ 95.1 million had been made available, resulting in a funding gap of 36 per cent.

In line with the country's inter-agency 2019 Strategic Response Plan, UNICEF is requesting US\$ 120 million to meet the humanitarian needs of children in Northeast Nigeria in 2019.

Table 1: 2018 Funding Status against the Appeal by Sector (in USD)

Sector	Requirements	Funds Available Against Appeal as of 31 December 2018*	% Funded
WASH	19,448,000	10,284,383	47%
Education	34,723,000	21,282,116	39%
Health	19,740,000	9,769,983	51%
Nutrition	38,754,000	42,667,706	0%
Child Protection	25,743,000	8,969,549	65%
EPR	4,065,000	2,131,362	48%
Total	142,473,000	95,105,099	36%

*Funds available includes funds received against current appeal and carry-forward from 2017.

Table 2: Funding Received and Available by 31 December 2018 by Donor and Funding type (in USD)

Donor Name/Type of funding	Programme Budget Allotment reference	Overall Amount*
I. Humanitarian funds received in 2018		
a) Thematic Humanitarian Funds (Paste Programmable Amount from Table 3)		
See details in Table 3	SM/18/9910	765,056
b) Non-Thematic Humanitarian Funds (List individually all non-thematic emergency funding received in 2017 per donor in descending order)		
The United Kingdom	SM/17/0615	12,417,258
The United Kingdom	SM/17/0449	11,296,472
Sweden/SIDA	SM/18/0171	4,745,823
European Commission (ECHO)	SM/18/0382	3,008,424
USA (OFDA)	SM/18/0357	3,421,249
Norway	SM/16/0587	2,767,706
Germany	SM/18/0002	2,268,486
Canada	SM/18/0161	1,864,802
Norway	SM/16/0541	1,116,817
Kuwait	SM/17/0683	833,333
Mexico	SM/18/0219	225,000
UNICEF Spain	SM/18/0318	277,717
Total Non-Thematic Humanitarian Funds		44,243,087
c) Pooled Funding		
(i) CERF Grants (Put one figure representing total CERF contributions received in 2018 through OCHA and list the grants below)		
(ii) Other Pooled funds - including Common Humanitarian Fund (CHF), Humanitarian Response Funds, Emergency Response Funds, UN Trust Fund for Human Security etc. (Put the figure representing total contributions received in 2018 through these various pooled funding mechanisms.)		
UNOCHA	SM/18/0014	331,060
UNOCHA	SM/18/0015	610,153
UNOCHA	SM/18/0016	769,078
UNOCHA	SM/18/0042	470,774
UNOCHA	SM/18/0096	121,830
UNOCHA	SM/18/0110	396,865
UNOCHA	SM/18/0255	639,631
UNOCHA	SM/18/0349	478,031
UNOCHA	SM/18/0352	603,936
UNOCHA	SM/18/0403	500,653
UNOCHA	SM/18/0483	292,368
UNOCHA	SM/18/0484	1,059,082
Total pooled funding		6,273,461

d) Other types of humanitarian funds		
		0
Total humanitarian funds received in 2016 (a+b+c+d)		51,281,604
II. Carry-over of humanitarian funds available in 2017		
e) Carry over Thematic Humanitarian Funds		
Thematic Humanitarian Funds	SM/14/9910	5,968,849
f) Carry-over of non-thematic humanitarian funds (List by donor, grant and programmable amount being carried forward from prior year(s) if applicable)		
USAID/Food for Peace	SM/16/0486	130,937
ECHO	SM /16/0421	69,005
Belgium	SM/17/0329	171,891
Japan	SM/17/0064	376,432
Norway	SM/16/0541	6,783,409
Norway	SM/16/0587	1,407,555
DFID	SM/17/0521	7,611,576
DFID	SM/17/0615	12,090,755
USA (USAID) OFDA	SM/17/0481	233,508
UNOCHA	SM/17/0370	5,697
UNOCHA	SM/17/0371	6,851
UNOCHA	SM/17/0374	151,017
UNOCHA	SM/17/0432	258,614
Netherlands Committee for UNICEF	SM/17/0202	170,819
USAID/FFP	KM/16/0061	501,704
USAID/FFP	SM/17/0261	22,662
USAID/FFP	KM/17/0011	884,696
USAID	SM/17/0013	219,607
USAID/FFP	KM/17/0013	7,321
Norway	SM/17/0254	54,531
Korea	SM/17/0273	10,825
Italy	SM/17/0304	977,546
Belgium	SM/17/0356	1,902,163
France	SM/17/0333	465,315
ECHO	SM/17/0348	1,053,065
Switzerland	SM/17/0664	1,415,513
UNOCHA	SM/17/0579	980,411
Total carry-over non-thematic humanitarian funds		37,963,426
Total carry-over humanitarian funds (e + f)		43,932,275
III. Other sources (Regular Resources set -aside, diversion of RR - if applicable)		
WASH	NON-GRANT	143,779.57
WASH	NON-GRANT	95,869.75

WASH	NON-GRANT	136,994.73
The United Kingdom	SC140236	160,522.59
The United Kingdom	SC140236	343,204.42
Global - Water Sanitation & Hygiene THEMATIC FUND	SC149903	33,651.46
UNICEF (FOR GR ALLOCATIONS ONLY)	GS170005	194,272.70
French Committee for UNICEF	SC160403	452,764.21
European Commission	SC170825	4,616,929.63
End Violence Fund	SC180342	252,500.93
Health	NON-GRANT	1,433,201.84
Health	SC180810	143,280.67
Total other resources		-

* Programmable amounts of donor contributions, excluding recovery cost.

** 2018 loans have not been waived; COs are liable to reimburse in 2019 as donor funds become available.

Table 3: Thematic Humanitarian Contributions Received in 2018

Thematic Humanitarian Contributions Received in 2018 (in USD): Donor	Grant Number ¹	Contribution Amount (in USD)
Japan Committee for UNICEF	SM/18/9910/0054	412,473
Danish Committee for UNICEF	SM/18/9910/0046	166,615
Finnish Committee for UNICEF	SM/18/9910/0358	66,240
German Committee for UNICEF	SM/18/9910/0156	55,364
UNICEF-China	SM/18/9910/0408	29,938
Australian Committee for UNICEF	SM/18/9910/0184	21,824
Total		761,206
UNICEF-Croatia	SM/14/9910/1444	3,850
Total		765,056

*Global thematic humanitarian funding contributions are pooled and then allocated to country and regional offices. For a detailed list of grants, please see the 2018 Annual Results Reports.

¹ International Aid Transparency Initiative (IATI) requires all grants to be listed in reporting. <http://iatistandard.org/>

Future Work Plan

In 2019, UNICEF will continue to address persistent structural issues as well as the acute humanitarian challenges hindering the realisation of child rights in Northeast Nigeria. In line with its new Country Programme (2018-2022), the Country Office will maintain humanitarian activities as needed with a sharper focus on programmatic convergence, leveraging partnerships and harnessing innovation strategically to achieve results. Appealing for US\$ 29 million in WASH, UNICEF will continue to ensure that children and their families access timely sufficient and safe WASH services in humanitarian situations through new construction and rehabilitation of water systems and chlorination of water supply systems in camps and host communities. UNICEF aims to provide IDPs in camps with access to gender segregated sanitation facilities and support the construction of household latrines and sustained environmental sanitation services. UNICEF will also continue to provide community tailored hygiene messages aimed at hygienic behaviors and practices. UNICEF will establish and strengthen the EPR coordination mechanism at the national and sub-national levels for effective emergency response as well as strengthen the institutional capacity of WASH partners on emergency preparedness and response, disaster risk reduction and building resilience.

UNICEF will continue to invest in rebuilding the Education sector in Nigeria, appealing for US\$ 24 million for 2019 to focus on guaranteeing that children in humanitarian situations have timely and sustained access to quality education services. This will include provision of teaching and learning materials, teacher training, and ensuring that school aged children have psychosocial support in their schools and learning spaces.

With a further appeal of US\$ 18.2 million in Child Protection, UNICEF will continue to work to ensure that children in humanitarian situations have timely and sustained access to quality preventive and responsive child protection services. This will include provision of mental health, psychosocial support and life

skill services, provision of case management support to unaccompanied and separated children and other vulnerable children including children formerly associated with armed groups and armed forces and provision of responsive and preventive services to child survivors of GBV and sexual exploitation and abuse. UNICEF also aims to strengthen MRM, Child Protection Information Management and CPSWG coordination at state and LGA levels.

Appealing for US\$ 16.7 million in Health, UNICEF will continue to ensure the procurement and distribution of emergency drugs, basic medical equipment, supplies, vaccines to supported health facilities in IDP camps and host communities. UNICEF will continue to support the states' capacities for health service delivery by provision of high impact integrated basic primary health care services, as well as support the states to build institutional and human resource capacity to deliver quality maternal, newborn and child health services along the continuum of care. UNICEF will strengthen the capacities of states and LGAs for evidence-based primary health care programming through improved data collection, management and utilization and training on data management and reporting.

Appealing for US\$ 31 million in Nutrition in 2019, UNICEF will ensure that children and women in humanitarian situations have timely and sustained access to quality preventive and rehabilitative nutrition services and support. UNICEF will procure therapeutic supplies for treatment of children with SAM and will conduct active case finding and referrals of children with SAM. UNICEF will support federal government quality assurance monitoring supportive supervision to all health facilities providing CMAM services and will develop and implement a structured checklist for an integrated nutrition package in all nutrition sites across the emergency states. UNICEF will strengthen community support groups to deliver quality nutrition counselling service through frequent supportive supervision.

Expression of thanks

On behalf of the children of Northeast Nigeria, UNICEF is deeply grateful for the strong show of support and for the tremendously generous contributions received from different donors, including UNICEF National Committees, as well as numerous government donors, multilateral partners and intergovernmental organisations, alongside funds that were also raised by sister UNICEF Country and Regional Offices around the globe.



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We are in debt for this incredible and global wave of solidarity which came not only from institutional partners but also from people who responded and sent contributions as individuals to be part of the effort and to help us help the children and women of Northeast Nigeria in the face of the protracted crisis. Humbled by this support – which testifies to the strong confidence UNICEF inspires through its mission for children – we also recognize the duty we have in ensuring these resources are directed towards those children and women that need it most. UNICEF is thus deeply thankful of its donors who also chose to contribute their funds flexibly and thematically. Un-earmarked contributions were tremendously helpful in ensuring UNICEF's response could always be quick, effective and nimble to adapt to changing circumstances. However, in 2019 and moving forward, given the decades of underdevelopment in Northeast Nigeria and unprecedented levels of violence and destruction during the crisis, needs in the areas of Child Protection, WASH, Nutrition, Health and Education remain enormous.