

Nigeria



Malnutrition and food insecurity in Borno and Yobe states

Need for international assistance	Not required	Low	Moderate	Significant	Major
					X
Expected impact	Very low	Low	Moderate	Significant	Major
					X

Crisis overview

Newly accessible areas of Borno and Yobe states are revealing extremely high rates of severe acute malnutrition, especially among 275,000 IDPs reported to live in 15 camps in Borno state (OCHA 11/07/2016). Information from recent rapid assessments, although limited, raises the possibility of Famine (IPC Phase 5) in the worst affected and least accessible areas of Borno. The Minister of Health has declared a nutrition emergency in Borno state. 613,000 children have been reported with SAM (OCHA 27/06/2016).

Poor quality and lack of food, inadequate WASH, as well as the insurgency, are among the main causes. Most affected areas are those adjacent to Sambisa Forest and those in northern Borno. Although only limited information is available, there are concerns that conditions among other IDP populations in the area could be similarly dire. The crude mortality rate (CMR) may have surpassed 2/10,000/day in June (FEWSNET 07/07/2016).

IDP numbers and severe acute malnutrition in the northeast

Affected areas	IDPs	SAM	
		Rate	Caseload
Bama Town, Bama LGA, Borno	25,000	15%	-
Banki, Bama LGA, Borno	15,000	-	At least 80
Monguno LGA, Borno	not available	13%	-
Dikwa LGA, Borno	56,260	High	-
Muna IDP camp, Maiduguri LGA, Borno	16,000	6%	-
Jakusko LGA, Yobe	1,404	8.9%	-

Sources: FEWSNET 07/07/2016; AFP 05/07/2016; MSF 22/06/2016; IOM DTM X 310/06/2016

Key findings

Anticipated scope and scale Extreme malnutrition and food insecurity have been reported in pockets of Borno and Yobe states. Most affected areas in Borno are near the Sambisa forest, including Bama, Damboa, and Gwoza LGAs, and parts of Kaga and Konduga in eastern Borno. Additional areas of concern include greater Maiduguri and southern Yobe state. In Yobe, households in more remote areas are likely to be in urgent need of food and nutrition assistance.

Priorities for humanitarian intervention **Nutrition:** A large number of SAM cases have been reported in pockets of Borno and Yobe states.

Food: Famine (IPC Phase 5) is likely to be occurring in the worst affected and less accessible pockets of Borno state

Health: An unknown number of cases of measles, malaria, diarrhoea, and vomiting have been reported across Borno.

Protection: The blurring of the lines between civilian and insurgent, and between humanitarian intervention and security surveillance, allows for abuse of IDPs and host communities to go unreported.

Humanitarian constraints

- **Northern Borno:** Abadam, Gubio, Guzamala, Kukawa, Mobbar, Nganzai, and parts of Dikwa, Marte, Mafa, Ngala, and Kala/Balge LGAs remain largely inaccessible to humanitarian agencies.
- **Yobe:** Limited access to parts of Gujba, Gulani, Yunusari and Geidam LGAs.
- BH attacks and battles between the military and BH are causing insecurity and disrupting aid convoys.
- Theft and looting of aid from the military have been reported.
- Military escort is imposed for humanitarian actors seeking to reach certain areas.

Limitations

No information is available for inaccessible areas in the north of Borno. Only limited information regarding sectoral needs is available for large parts of Borno and Yobe states.

Crisis impact

As Nigeria's military recaptures territory from Boko Haram (BH) militants in remote regions of Borno and Yobe states, and more locations become accessible, the full effects of the conflict are being revealed. The conflict, military restrictions on food delivery to the north of Borno state, the poor quality and lack of food, and inadequate WASH have caused severe food insecurity and malnutrition among IDPs and host populations.

Based on the DTM Round X, 1,676,599 people are believed to be displaced in northeast Nigeria: Borno has 1,404,483 IDPs, Adamawa 159,445, and Yobe 112,671 (WFP, FAO and Food Security Cluster 10/07/2016; IOM 01/07/2016).

Nutrition: In Bama town, Borno, 15% of children were found to have severe acute malnutrition (SAM). High levels of mortality – at least 188 deaths in June, mostly from malnutrition or diarrhoea – have also been reported (FEWSNET 07/07/2016; AFP 05/07/2016; MSF 22/06/2016).

In Banki, Bama LGA, deaths due to starvation or malnutrition have been reported, mainly among children and the elderly. Three/four people are dying every day. At least 80 children have been reported with SAM (OCHA 28/06/2016).

In Monguno LGA, GAM was found to be 32% and SAM 13%. In nearby Dikwa LGA, high levels of acute malnutrition were identified in April.

As of 15 June, in Muna IDP camp, near Maiduguri, GAM was at 29% and SAM 6% (FEWSNET 07/07/2016). SAM has been reported among IDPs arriving in Maiduguri from Mafa LGA, Borno (AFP 05/07/2016).

In Jakusko LGA, Yobe state, 20.3% GAM and 8.9% SAM were reported (FEWSNET 07/07/2016; ECHO 27/06/2016). Although only limited information is available, there are concerns that conditions among other IDP populations in the area, such as Pulka camp in Gwoza, could be similarly dire (FEWSNET 07/07/2016).

Food: In Banki, Bama LGA, Borno, the vast majority of food reserves and seeds have been burned. IDPs reported that all of their food reserves, products bought at markets, and livestock, were either burned or looted (OCHA 28/06/2016). None of the main livelihood activities are possible in Bama LGA (OCHA 28/06/2016).

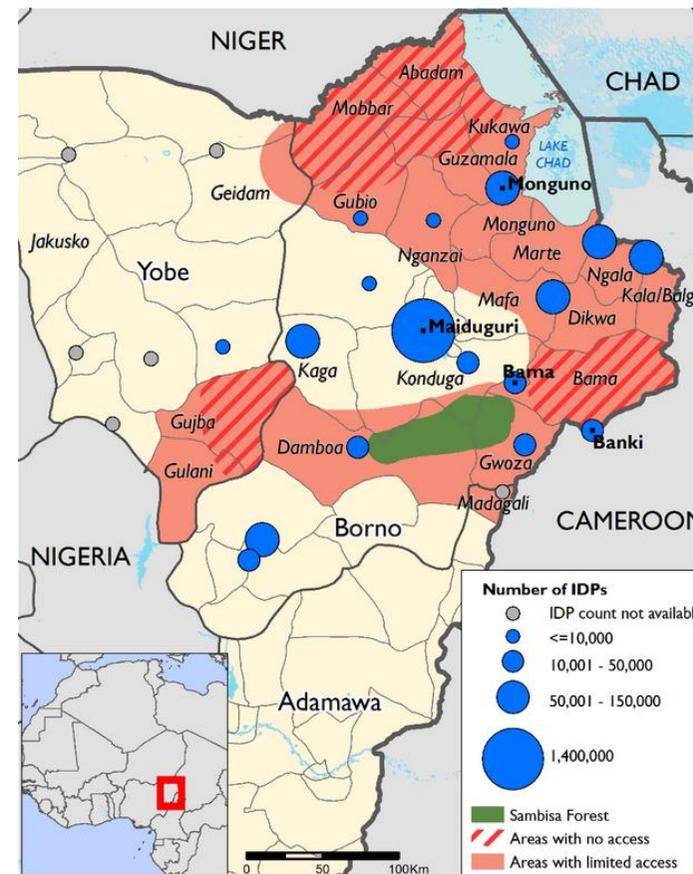
The severity of food insecurity in inaccessible areas is unknown, but Famine (IPC Phase 5) could be occurring in the worst affected and less accessible pockets of Borno state given the impact of movement restrictions and ongoing conflict, and the conditions found among populations in newly accessible areas (FEWSNET 07/07/2016). The onset of the lean season has also seen a large increase in people in need of food assistance.

In Adamawa, Borno, and Yobe, at least 3 million people are in Crisis food security outcomes, with 800,000 people in urgent need of food support in Yobe and Borno (OCHA

24/06/2016). In Borno 36% of the population is at Crisis or above. In Yobe, 24% of the population are in Crisis or Emergency (WFP, FAO and Food Security Cluster 10/07/2016). As of April 2016, over 500,000 people required immediate food assistance in and around Maiduguri. Roughly 60% of IDPs were in Crisis (IPC Phase 3) or worse (FEWSNET 07/07/2016).

Food prices have seen a sharp rise since April, because the lean season has begun. Food prices are predicted to continue to rise markedly until September. In Adamawa, Borno and Yobe, food prices have increased, on average, by 8.24%, with Borno seeing the largest increase, of 14.1% (WFP, FAO and Food Security Cluster 10/07/2016).

IDP concentrations and humanitarian access in northeast Nigeria



Source: FEWSNET 07/07/2016

Health: In Banki, Bama LGA, an undetermined number of cases of diarrhoea and vomiting have been reported, and 20–50 cases of measles. Malaria is also considered a health risk, especially because the rainy season is starting and mosquito nets are lacking (OCHA 28/06/2016). In Monguno LGA, a measles outbreak is ongoing (FEWSNET 07/07/2016). In Muna

IDP camp, Maiduguri, seven children were reported dead due to measles in June (AFP 05/07/2016).

Education: In Banki, Bama LGA, Borno, no educational system has been functioning for the past two years due to BH's opposition to education. School infrastructure has been destroyed (OCHA 28/06/2016).

Protection: In Borno, IDP sites are effectively under military control. Armed soldiers, police, and the Civilian Joint Task Force (CJTF) – paramilitary vigilantes – guard the camps, and the military provides the final authorisation on who is allowed to enter. Soldiers and vigilantes have reportedly sexually harassed women who want to leave or enter the camps, want access to food, or need help. BH is capitalising on those abuses to warn people against the military (IRIN 05/07/2016). The militarisation of IDP camps also means they are potential BH targets (IRIN 05/07/2016).

The military's role is also problematic as it goes beyond securing camps from external threats: soldiers are frequently tasked with relief distribution, particularly in remote areas where conflict is ongoing, and they are restricting food distribution in these areas (IRIN 05/07/2016).

The Nigerian Army transfers people suspected of belonging to BH to authorities in Maiduguri for investigation. Individuals may be falsely accused if they lack documentation (OCHA 28/06/2016).

Children: In Banki, Bama LGA, nearly 80 separated and unaccompanied children are staying in an orphanage (OCHA 28/06/2016).

Displacement: IDP returns to villages in Bama LGA, Borno are not possible due to the army's ongoing operations to secure the region (OCHA 28/06/2016).

6,000 people forcibly repatriated from Cameroon have arrived in Banki, via the Amchide border crossing point. Some are at the IDP site in Banki and the remaining have continued on to Bama and Maiduguri.

The expulsion of Cameroonian nationals from Nigeria back to Cameroon has also been reported (OCHA 28/06/2016).

Shelter and NFIs: Due to the level of destruction in Banki, the IDP camp has been set up near the military base. There is an urgent need for NFIs, mainly for clothes and shoes (OCHA 28/06/2016).

WASH: In IDP camps, access to safe drinking water is limited and sanitation is poor (AFP 05/07/2016). In Banki, Bama LGA, IDPs use five wells. Although repaired by the Nigerian army, these do not meet the water needs of the population. People have to wait almost a

day to collect water. The wells are connected to electric pumps but there is no electricity, so a generator has been provided by the army (OCHA 28/06/2016).

Residents live in close proximity to their livestock, and human excrement (AFP 05/07/2016).

Vulnerable groups affected

In Banki, Bama LGA, children, women and the elderly are in more severe need (OCHA 28/06/2016).

Men are suspected of being Boko Haram militants, and vulnerable to being targeted by the military, or being excluded from assistance

Humanitarian and operational constraints

In northern Borno, Abadam, Gubio, Guzamala, Kukawa, Mobbar, Nganzai, and parts of Dikwa, Marte, Mafa, Ngala, and Kala/Balge LGAs remain largely inaccessible to humanitarian agencies, despite improvements to access in the state (FEWSNET 07/07/2016). In Yobe, conflict has limited access to parts of Gujba, Gulani, and Geidam LGAs (FEWSNET 07/07/2016).

Military escort is compulsory to access many of the accessible areas within Borno, including between Maiduguri and Damboa and Maiduguri and Dikwa, while the presence of IEDs and mines in Dikwa LGA prevents travel outside Dikwa town (UN Joint Multi-sector Assessment 14/04/2016). Military control over humanitarian aid in a large part of Borno causes access and protection concerns.

Theft and looting of aid from the military has been reported, for example in Dalori LGA, Borno. In another case in an unreported location ambulances filled with goods for IDPs were allegedly taken away by soldiers and vigilantes (IRIN 05/07/2016).

Limited availability and inadequate supply of goods has been due to breaks in the supply chain because of insecurity for the convoys travelling by road from Maiduguri (OCHA 28/06/2016). Attacks following food distribution have been reported in Bama LGA (OCHA 28/06/2016).

Aggravating factors

Naira and inflation

The Nigerian economy is officially in recession, with further shrinking of GDP expected in the second quarter of 2016. Inflation now stands at close to 16%, and oil revenues continue to fall sharply, even as the price of oil has stabilised at around USD 50 per barrel. On 20 June, the naira was allowed to float freely on the currency market after being

subject to capital controls since middle 2015 and interventions by the central bank. The lower value of the naira will mean large increases in the price of imported essential foodstuffs, putting further pressure on the most vulnerable populations. Overall, however, the loosening of capital controls will likely have a positive impact on the economy, providing manufacturers and resellers with sufficient access to imports, thereby avoiding shortages (WFP, FAO and Food security cluster 10/07/2016).

Rainy season

The 2016 is predicted to start late, end early, be unstable and have lower than normal precipitation, especially in the northern parts of Nigeria. Crop failure is expected, which would further exacerbate the food security situation (WFP, FAO and Food security cluster 10/07/2016).

Key characteristics

Demographic profile:

Borno: population 5,800,000 (2016 projection) and 1,600,000 IDPs (OCHA 24/06/2016).
Yobe: 3,200,000 (2016 projection OCHA) and 113,000 IDPs (IOM DTM X 310/06/2016)

Food and livelihoods: Throughout Borno staple crops are: millet, cowpeas and sesame. Northern Borno (Sahel): cereals and livestock (FEWSNET 05/2015). In Banki, the staple diet is rice and tubers (OCHA 28/06/2016). The main livelihood activities in Bama LGA are trade, livestock and agriculture production (OCHA 28/06/2016). Large parts of Yobe state cultivate millet, cowpeas and sesame. The floodplains in Yobe are important areas for rice production, vegetables, and wheat. Northern Yobe is part of the Sahel, where people live from cereal cultivation and livestock (FEWSNET, 05/2015).

Nutrition: Global acute malnutrition (2011): Borno: 18.7% Yobe: 14.9%.

Health: Rural Borno: less than 20% of the population lives within 30 minutes of a health facility; only 2% are more than two hours away. (Adedayo and Yusuf, 20/09/2012). Malaria is endemic to Nigeria. Measles vaccination coverage for infants: Borno 23.5% Yobe 31.3%.

WASH: Main source of water (2010): 48% unprotected well/spring in Borno; 45% unprotected well/spring in Yobe. Main type of toilet facility (2010): Borno 54% uncovered pit latrine; Yobe 27% covered pit latrine. NEDS, 2010; NBS, 2012; MICS 2011

(NEDS, 2010; NBS, 2012; MICS 2011).

Lighting and cooking. Borno: 85% collected firewood; Yobe: 68% collected firewood

Literacy: Rural Borno: 17% male, 10% female; Urban Borno: 44% male, 36% female (NEDS, 2010). Rural Yobe: 15% male and 14% female; Urban Yobe: 46% male, 25% female (NEDS, 2010).

Education: Borno: 73% of children aged 5–16 had never attended school in 2010 for reasons of poor school quality, cost, and distance (NEDS, 2010). Yobe: 60% of children aged 5–16 had never attended school for reasons of labour needed, distance to school, and journey to school considered unsafe (NEDS 2010).

Response capacity

Local and national response capacity

NEMA (National Emergency Management Agency) is the governmental organisation that coordinates the response between ministries and OCHA (IRC 24/06/2016). On a state level, the corresponding governmental body, SEMA (State Emergency Management Agency), is in charge of coordinating the humanitarian response in the respective states (PUI 23/02/2016). However, in Borno, especially in the north and east of the state, humanitarian assistance is mainly carried out by the military (IRIN 05/07/2016).

In Banki, assistance provided to IDPs covers the bare minimum and has been delivered by the Nigerian military. The provision of food to IDPs is a heavy burden on the military. They are sharing their food resources but there is not enough. Borno state began sending assistance through the military in February 2016, although IDPs were already present in Banki in October 2015 (OCHA 28/06/2016).

International response capacity

There are shortfalls in assistance and funding to the displaced (AFP 05/07/2016). No humanitarian actors are present in Banki, with the exception of a small volunteer medical team (OCHA 28/06/2016). Few international agencies and organisations are present due to the volatile security situation and the remoteness of the affected areas (ECHO 20/04/2016).

Information gaps and needs

No information is available for inaccessible areas in the north of Borno. Only limited information regarding sectoral needs are available for large parts of Borno and Yobe state. The majority of the assessments are fragmented and do not provide an overall picture of needs in the northeast.

Lessons learned

The armed forces have widespread impunity for excesses against civilians (IRIN 05/07/2016).

The militarisation of the relief effort poses a threat to its humanitarian character, and the quality of the care provided (IRIN 05/07/2016).

Immunization against measles, usually focus on young children, however in conflict context with high malnutrition rates and big concentrations of populations expansion should be considered on adults up to 30 years of age (UNHCR 05/07/2016).

As the vast majority of refugees at the camp may be unfamiliar with western medicine training and sensitisation is important. When therapeutic foods and general food rations are available, these products may be new to the population (UNHCR 05/07/2016).