

# NORTHEAST NIGERIA

## Food security and nutrition

### Key findings

Food security, food production, nutrition, and livelihoods have been enormously compromised by the conflict. Displaced populations and host communities in the northeast face particularly severe food insecurity resulting from poor production and loss of livelihoods. A marked increase in the food insecure population has been noted in addition to a loss of livelihoods.

Malnutrition rates remain high and children under five are most vulnerable. 244,000 children suffer from severe acute malnutrition; 49,000 are at risk of death. The number of children suffering from SAM could rise to 400,000 in the coming year.

66% of IDPs report food as their most unmet need. 14,368 IDPs have left Gwoza for Maiduguri in search of food.

### Overview

A resurgence in Boko Haram violence and the military's counterinsurgency since November continue to displace populations and hamper food security (UNICEF 07/12/2016). The opening up of previously inaccessible areas have revealed dire food security, nutrition and livelihood needs. Limited market functioning, high seed prices, or prioritising seed consumption over sowing means many households in affected areas are not planting as much as usual, or at all. This limits food production and access to agriculture-related wage labour. The most heavily conflict-affected livelihood area is soy and maize farming.

It has been projected that the situation will deteriorate further between June and August 2017 as IDPs continue to move in search of food or to restart farming and back to their LGAs due to increased security. IDPs returning to their LGA of origin are frequently

referred to as returnees by humanitarian actors, even though the vast majority are not returning to their villages or towns of origin, but rather to the LGA headquarters, creating a situation of secondary displacement (IOM 19/12/2016; Cadre Harmonise 11/01/2016).

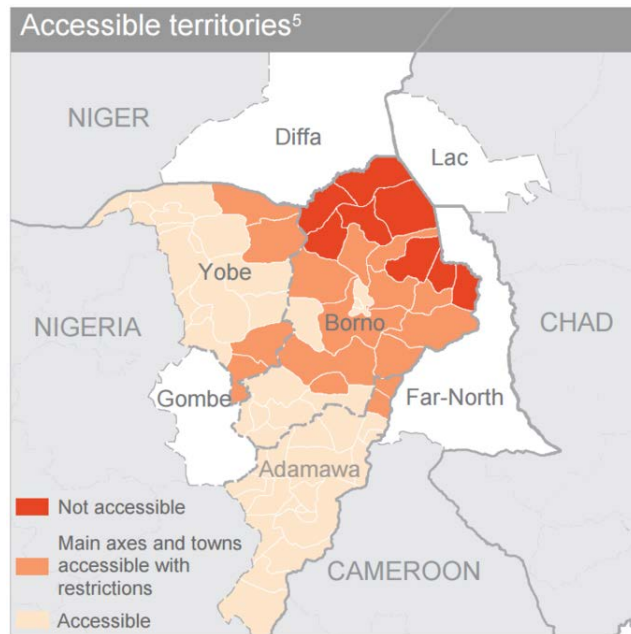
### Severely food insecure population (IPC Phases 3–5), northeast Nigeria

| State   | Current   | Projected<br>(August–June 2017) |
|---------|-----------|---------------------------------|
| Borno   | 3,266,337 | 3,641,297                       |
| Adamawa | 257,427   | 204,794                         |
| Yobe    | 1,149,074 | 1,272,705                       |

Source: FAO Cadre Harmonise, October 2016

While the Nigerian Army and allied forces have gained significant territory against Boko Haram, humanitarian access remains a considerable challenge. Thirteen of 27 LGAs in Borno, four of 17 in Yobe and one of 21 in Adamawa are still only partially accessible through military secured main routes and at the LGA headquarters. The level of the food and nutrition needs become more apparent as more areas become accessible. LGAs like Ngala, Dikwa, Munguno and Chibok saw an increase in the number of IDPs by between 24,333 and 7,694. Gubio, Mafa and Nganzai also had an increase in their IDP population. that saw an increase. The number of people facing acute food insecurity has risen to 5.1 million, a more than 50% since March 2016. A total of 3, 266,337 people are said to be between Phase 3-5 famine crisis levels in Borno, 1, 149, 074 in Yobe and 257, 427 in Adamawa (UN 24/11/2016).

Latest IOM DTM reports show that food is still the most unmet need among 66% of IDPs, even within camps. In terms of frequency of distribution, while 25 camps still do not receive any food rations, it has been irregular in as many as 109. Current assistance programmes from the government and humanitarian actors mainly target camps which hold only 24.34% of the total IDP population of 1.3 million people. Acute food insecurity and malnutrition are expected to increase in the coming year (FAO 11/1/2016; OCHA 11/2016 IOM 19/12/2016).



Source: OCHA 01/11/2016

## Pre-crisis situation

Prior to the conflict, northeast Nigeria suffered from higher poverty rates and underdevelopment than the rest of the country. According to 2012 estimates by the National Bureau of Statistics, 61% of people in Borno state were living below absolute poverty lines in 2010, 78% in Adamawa, and 82% in Yobe (3 million, 2.8 million and 2.2 million people, respectively). Agricultural wage labour activities provided characteristic levels of income for poor households during the cultivation season in the northeast, like in most parts of the country (NDHS 2013).

Additionally, while national infant and under-five mortality rates for 2008–2013 were 69 and 128 deaths per 1,000 live births, respectively, those of the northeast were 77 and 160 (NDHS 2013).

Malnutrition was of high concern before the escalation of Boko Haram activity in the northeast. In 2013, Nigeria had the world's thirteenth highest GAM rates, at 14%. In the northeast, SAM prevalences of 3.8% were recorded in 2003, 11.4% in 2008, and 9.3% in 2013 (ACF 03/2015). At 5.3%, Borno had the lowest GAM rates of eight northern states surveyed in 2012, while Yobe had 11.5%. SAM rates were poor, at 1% and 1.6%, respectively for both states (NBS/Federal Ministry of Health/EU/UNICEF 12/2010; NBS, 2012).

## Food security

### Food availability

While there has been marked improvement in food availability across other states in the northeast as a result of production increase this year, difficulties persist in Borno, Yobe and Adamawa where the crisis has heavily affected crop production in the last three years. Staple food and cash crop production remain below average in Borno and Yobe. According to the Cadre Harmonisé, 50,000–100,000 people in both states may experience Phase 5 Famine from June to August next year. Cultivation is still significantly limited in many LGAs like Damboa as cultivation and cropping of tall crops (like maize, millet and guinea corn, which are staple foods) is only allowed within a 3km radius of the town due to security concern (FAO 1/11/2016; Food Security Sector Bulletin 2/11/2016).

### Food accessibility

Although major markets in urban areas within the three states are open, they function below normal levels still due to limited demand from people, disrupted trade routes and low local production. The Baga–Maiduguri road, for instance, has been closed since 2014 after series of attacks on markets and traders. Baga, which borders Niger, Chad and Cameroon, was the largest producer of fish in sub-Saharan Africa until the insurgency. The disruption of access roads from the Damboa and Aloa dams, River Yobe, and Chad stopped the supply of fish to Borno state, which supplies Onitsha, Lagos and other parts of the country. This year, over 4 million Naira (USD \$12,700) worth of fish was left to perish in Baga as it could not be transported to Maiduguri.

Prices of staple foods remain high due to inflation of the Naira, difficulties transporting goods and increased cost of fuel. This, in conjunction with the reduction in household purchasing power, has severely limited food access. In Borno and Yobe states, where most of the population affected by the crisis has lost livelihood assets, high food access gaps have been recorded. In Damboa Town, for instance, only 51% of households have an acceptable diet, according to food consumption scores. 438,585 people are yet to be reached, according to the Food Security Cluster.

While WFP noted a decrease in the price of staple food in some monitored markets, the lack of livelihoods continues to hamper access. Indications are that market supply conditions (the factors affecting the relationship between the price and quantity supplied) could further limit household access to food in the coming months. Many major roads remain closed, limiting the transportation of food to markets. In many areas like Burimari, IDPs have no access to food and there are no markets where they can purchase food items (Oxfam 10/2016; WFP 10/2016; FAO 1/11/2016; Vanguard 6/12/2016; FS Cluster 27/11/2016; Vanguard 8/12/2016; IOM 29/11/2016).

## Food usage

Food usage across the northeastern states is at Crisis (IPC Phase 3) in Yobe and Emergency (IPC Phase 4) in Borno as many households are facing extreme food deficits. Half of the households in both states have poor diet quality. Reduced income has constrained diet variety and limited the types of food that people are able to grow or produce for themselves. Starchy staple foods are the most frequently consumed. Consumption of beans, groundnut and micronutrient rich foods such as fruits, vegetables, and animal protein is low.

Less than 50% of households use an improved drinking water source and even fewer try to make their drinking water safe (Oxfam 10/2016; NBS/FAO 1/12/2016).

## Livelihoods

The crisis forced farmers to leave their lands, prevented fishing, and destroyed livestock trade routes. It has severely limited food production, with 23% of households producing crops in Borno, 59.8% in Adamawa, and 70.4% in Yobe.

Despite humanitarian assistance to Borno state, livelihoods remain in an emergency phase as households both within IDP and host populations have limited to no access to their typical livelihoods. 20% report not having access to any livelihood in Borno. In Adamawa and Yobe, livelihoods are in a crisis phase. It is projected that insurgency spill-over will continue to negatively impact livelihood in the coming year. 80% of the rural population depends on crop or livestock farming. High inflation, including rates of 18.17% in October, has further impacted livelihoods and food security (Daily Trust 14/11/2016; FAO 1/11/2016; FAO 24/11/2016; FAO 30/11/2016).

## Northeast Nigeria livelihood zones



Source: FEWSNET 05/2014

## Nutrition

Malnutrition rates remain high in the three states worst hit by the crisis. An estimated 244,000 children suffer from severe acute malnutrition and up to 49,000 children are at risk of death (WFP 1/12/2016). Number of children suffering from SAM could rise to 400,000 over the next year. It is likely that malnutrition figures are vastly underreported, as the worst affected areas remain inaccessible (UN 14/12/2016).

The unavailability of safe and adequate food, poor care, and limited knowledge about breastfeeding practices have disrupted appropriate complementary feeding practices. Many women report being ill, malnourished, physically exhausted and traumatized and thus unable to care for their infants and young children (HRW 31/10/2016).

The cause of death for malnourished children is most often infection and other health complications, such as diarrhoea, sepsis, pneumonia, and malaria (MSF 09/12/2016). Case fatality rates of concomitant malaria and SAM have reportedly reached an exceeding high of 50%, as compared to uncomplicated malaria. An estimated 18% of children under 5 are at a high risk of dying from malaria before the end of 2016 (WHO 30/11/2016).

## Malnutrition prevalence by sub-state level

| State | Sub-State level           | Nutrition Levels | Information Date |
|-------|---------------------------|------------------|------------------|
| Borno | Kaga LGA                  | GAM 15% (MUAC)   | 23/10/2016       |
| Borno | Konduga (ward)            | GAM 23.3% (MUAC) | 23/10/2016       |
| Borno | Ngala (IDP Camp)          | GAM 28.1% (MUAC) | 23/10/2016       |
| Borno | Ngere (IDP Camp)          | GAM 59.9% (MUAC) | 23/10/2016       |
| Borno | Banki (in Bama LGA)       | GAM 51.9% (MUAC) | 23/10/2016       |
| Borno | Gambaru LGA               | SAM 15%          | 28/09/2016       |
| Borno | Bama LGA                  | SAM 19%          | 28/09/2016       |
| Borno | Ngala LGA                 | SAM 10%          | 28/09/2016       |
| Borno | Muna IDP Camp (Maiduguri) | SAM 15%, GAM 45% | 31/08/2016       |
| Yobe  | Tarmuwa LGA               | GAM 26.5%        | 23/10/2016       |
| Yobe  | Nungere LGA               | GAM 7.1%         | 23/10/2016       |
| Yobe  | Gujba LGA                 | GAM 22.4%        | 23/10/2016       |

Sources: FEWSNET 23/10/2016, MSF 28/09/2016

## Coping mechanisms

Displaced households rely heavily on community assistance and distributions to meet their food needs as 76.66% of IDPs live in host communities (IOM 19/12/2016; OCHA 01/12/2016).

Lack of access to livelihoods and resources is leading to the adoption of negative coping mechanisms. In Gamboru, for instance, those who cannot work as labourers or do not own donkeys to enable transportation are without livelihoods and left to beg. Survival sex has been on the rise, leading to abuse and exploitation of women and girls in camps. Many households have reported borrowing to supplement their incomes and selling their food rations in the market (HRW 31/10/2016; Oxfam 10/2016; IOM IOM/WFP/UNICEF/WHO/MSF 30/11/2016).

Depending on the severity of coping mechanism involved, households can be placed according to whether they employ stressed, crisis, or emergency coping mechanisms. The severity can be based on, for example, how often meals are skipped or what portion livelihood assets need to be sold to cope.

### Households by coping mechanism type

| State   | Households using Stressed coping strategies | Households using Crisis coping strategies | Households using Emergency coping strategies |
|---------|---|---|--|
| Adamawa | 15%   | 16.3%                                     | 14.1%  |
| Borno   | 9.2%  | 11.9%                                     | 59.2%  |
| Yobe    | 15.5%                                       | 17.2%                                     | 15.5%  |

Source: FAO 30/11/2016

## Information gaps and data limitations

- The current total population in inaccessible areas remain unknown, as does any sectoral data on them.
- Limited comprehensive information is available on needs of host communities, and IDPs living in host communities as there is no method of monitoring movement into and out of communities.
- Better assessment methodologies are needed along with more specialised training for data collectors, especially for infant and young child feeding in emergencies.
- Comprehensive data on how infant and young child feeding has changed since the crisis is lacking.
- Recent data not available for malnutrition rates at LGA level.
- There is a lack of comprehensive nutrition assessments beyond rapid MUAC (mid upper-arm circumference) screenings in camps and informal settlements. MUAC screenings are often not reliable.
- IDPs returning to their LGA of origin are frequently referred to as returnees by humanitarian actors, even though the vast majority are not returning to their villages or towns of origin, but rather to the LGA headquarters, creating a situation of secondary displacement. They are thus classified as returnees, not IDPs and are not considered in needs assessment for displaced populations.
- Unavailability of mapping data (GIS) makes comprehensive assessments and analyses difficult, however, many humanitarian agencies are making provision for these