

Briefing Note – 12 April 2017

NORTHEAST NIGERIA

Food Security and Nutrition Crisis



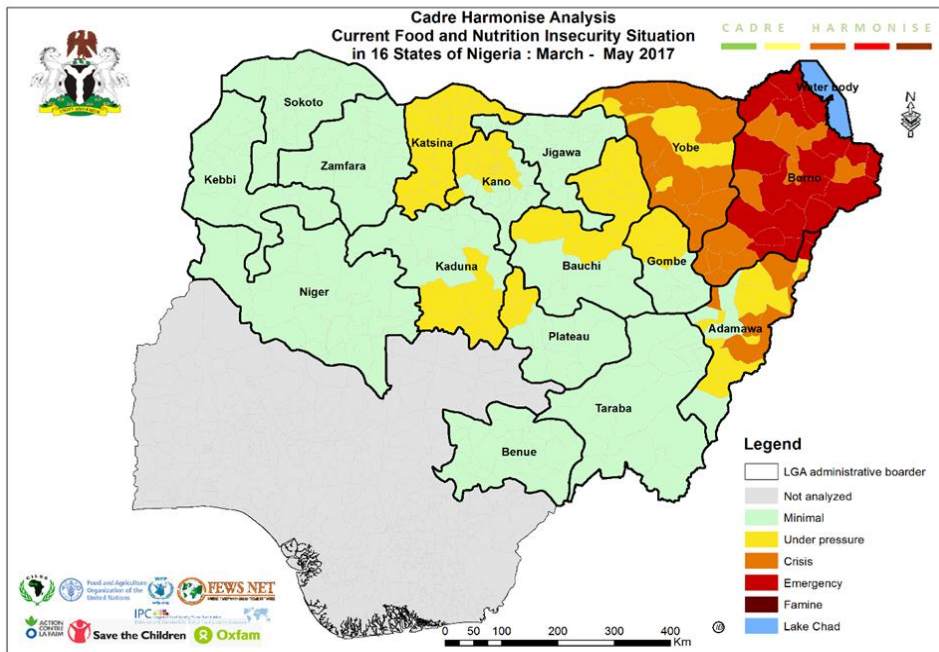
Need for international assistance	Not required	Low	Moderate	Significant	Major
Expected impact	Very low	Low	Moderate	Significant	Major

(IPC Phase 3) to Famine (IPC Phase 5) food security conditions, according to the Cadre Harmonisé (Cadre Harmonisé 10/03/2017).

Agricultural production has fallen, and raids and suicide bombings have destroyed vital infrastructure. Security measures impacting food security include a ban on the cultivation of tall crops, road closures, controls on fertiliser and fuels, and curfews.

The scale of population movement is worsening food security: returning refugees and IDPs are adding to the strain on both camps and host communities.

Crisis overview



Years of insurgency and counterinsurgency operations have resulted in the displacement of approximately 1.9 million people and created a food and nutrition crisis in Nigeria's northeast. The worst-affected local government areas of northeast Nigeria are facing Emergency (IPC Phase 4) food security conditions and GAM levels above emergency threshold. Areas of Borno with limited access, such as Konduga, Bama, Kala-Balge, Mafa, Ngala, Dikwa, and Marte, have between 39,000 and 250,000 people in Crisis

Key findings

Anticipated scope and scale

The crisis is expected to worsen – 50,000 people will be in Famine from June to August if the situation is not remedied. The lean season is predicted to start earlier in April-May instead of in July, therefore lasting longer than usual, and farmers would still be unable to cultivate land.

With the rainy season expected to begin in May/June, many access roads will be cut off due to flooding.

Priorities for humanitarian intervention

Food: 1,099,000 people, or 19% of the population in Borno state, are in Emergency (IPC Phase 4) and 38,000 in Famine (IPC Phase 5) levels of food insecurity. In Adamawa 197,000 people are in Emergency food insecurity and 5,800 in Famine. In Yobe 88,000 are in Emergency.

Nutrition: GAM prevalence is 11.4%, 11.3%, and 5.6% in Yobe, Borno, and Adamawa states, respectively. The situation is thought to be worse in inaccessible areas.

Livelihoods: Many livelihoods have been disrupted by the crisis. Farming has particularly been affected as farmers are unable to access and cultivate their farmlands due to security threats.

Protection: Extreme negative coping strategies have been adopted. The risk of forced/early marriage is high. Women and girls trade sex for food and other essential needs.

Humanitarian constraints

Over 80% of Borno is considered high or very high risk for international humanitarian partners to operate in. Movement is

usually restricted to LGA headquarters, as military clearance operations are still ongoing in many communities.

Administrative restrictions on visas and customs clearance for humanitarian personnel and supplies are delaying response.

Crisis impact

The Boko Haram insurgency has depleted people's resources and exhausted their coping mechanisms (ECC 24/02/2017). Over 4.8 million people are experiencing Crisis, Emergency, and Famine (IPC Phases 3–5) food security conditions in the six northeastern states, according to the March Cadre Harmonisé. More than 43,000 have reached Famine level food insecurity (Cadre Harmonisé 10/03/2017).

1.8 million people are currently displaced, with 79% spread across eight of Borno state's 27 LGAs: Maiduguri Metropolitan Council, Jere, Damboa, Konduga, Monguno, Ngala and Dikwa. One million IDPs have returned to their LGA of origin but many are in secondary displacement (IOM 28/02/2017). 80% of the displaced reside in host communities, placing additional burden on already impoverished people (OCHA 30/01/2017).

The displacement means that agricultural livelihoods have been abandoned: for the fourth consecutive year, conflict has prevented many people from farming (OCHA 28/11/2016). Before the insurgency, 80% of the population relied on agriculture for their livelihoods (ECC 24/2/2017).

Boko Haram continues to carry out attacks, ambushing vehicles along major market routes and attacking communities and markets. These are the most salient threats to market access and functioning in both Borno and Yobe states (WFP 16/02/2017).

Rations are limited, both due to the military's strategy of starving the enemy and the humanitarian 'do no harm' principle intending to avoid putting aid recipients at risk of a raid by Boko Haram.

Food

Food remains the most unmet need among IDPs (IOM 16/02/2017). At least 780,000, 3.3 million, and 626 000 are said to be in IPC Phases 3–5 in Adamawa, Borno, and Yobe states, respectively, until May (Cadre Harmonisé 10/03/2017). In 2016, a number of previously inaccessible areas were reached, revealing severe and widespread food insecurity and even areas where famine likely occurred (OCHA 24/02/2017; FEWS NET 13/12/2016).

At least 30,000 metric tons of food is required monthly to feed IDPs in northeast Nigeria (The Guardian 30/10/2017). IDPs have alleged food distributions are being made along tribal lines by community leaders, who often demand cash payments (PI 08/03/2017). Aid has been and continues to be diverted by government officials (Channels TV 14/12/2016; Vanguard 20/03/2017). Additionally, members of the Civilian Joint Task Force (CJTF) are allocated aid meant for IDPs (ICG 23/02/2017).

While staple food commodities are widely available in markets in Borno and Yobe states, limited availability of staple food has been reported in Gubio and Magumeri while import restrictions and the closure of borders limits the availability of rice. Access to Gujba Bumsa and Geidam markets in Yobe, as well as Gubio and Magumeri in Borno is limited due to insecurity (WFP 03/2017).

Extremely high staple food prices limit the purchasing power of vulnerable households. The hike in prices is due to the economic recession, depreciation in the value of the naira, and the increased cost of transportation. Availability of food is unstable (WFP 03/2017). Rice imports have also been limited due to import restrictions and closure of borders (WFP 03/2017). Prices of cereals in northeastern markets were 70%–124% higher in January 2017 than the year before (FEWSNET 16/02/2017).

Market access is hampered by insecurity – markets are Boko Haram targets, and military operations are constraining access to markets in Gubio, Magumeri, Monguno and around the Sambisa Forest in Borno, and Gujba, Gulani, Geidam, and Yunusari in Yobe state. At least seven suicide bomb attacks have targeted markets since 2016. High transportation costs also impact access.

Current population in Phases 3–5 food insecurity in northeastern states

State	Total Population	In IPC Phase 3	In IPC Phase 4	In IPC Phase 5	IPC Phases 3-5
Adamawa	4,248,000	583,000	197,000	5,800	785,800
Bauchi	6,953,000	108,000	-	-	108,000
Borno	5,860,000	2,118,000	1,099,000	38,000	3,255,000
Gombe	3,227,000	38,000	-	-	38,000
Taraba	3,143,000	31,000	-	-	31,000
Yobe	3,294,000	538,000	88,000	-	626,000
	26,725,000				
TOTAL		3,416,000	1,384,000	43,800	4,843,800

Source: Cadre Harmonisé

Livelihoods

Limited access to livelihood opportunities reduces purchasing power and access to food. Before the insurgency, 80% of the population relied on agriculture for their livelihoods (ECC 24/2/2017). Farmers have been forced to leave their lands and livestock has been killed and stolen. The displaced population of Borno and Yobe have been unable to pursue agriculture, as most host communities have restricted agricultural activities to land close to IDP settlements, for fear of being killed or kidnapped by Boko Haram (WFP 03/2017). In Borno state, only 24% and 35% of households produced crops and livestock respectively in 2016 (CA 12/2016).

As of January, in 29% of IDP sites farming is the major occupation, followed by daily labour (27%), and collecting firewood (12%). In host communities, 62% of locations rely on farming as the main occupation (IOM 31/01/2017).

Other obstacles to livelihood opportunities include lack of valid means of identification and multiple displacement. Means of legal identification is often a requirement for movement, and for employment and access to services. There are reports of men being killed while fetching firewood. Travelling in groups may protect people from insurgents,

but can raise suspicions among the military (OCHA 31/01/2017, PSWG 23/03/2017). Traders are constrained by lack of capital, insecurity, and high transport costs (WFP 16/03/2017).

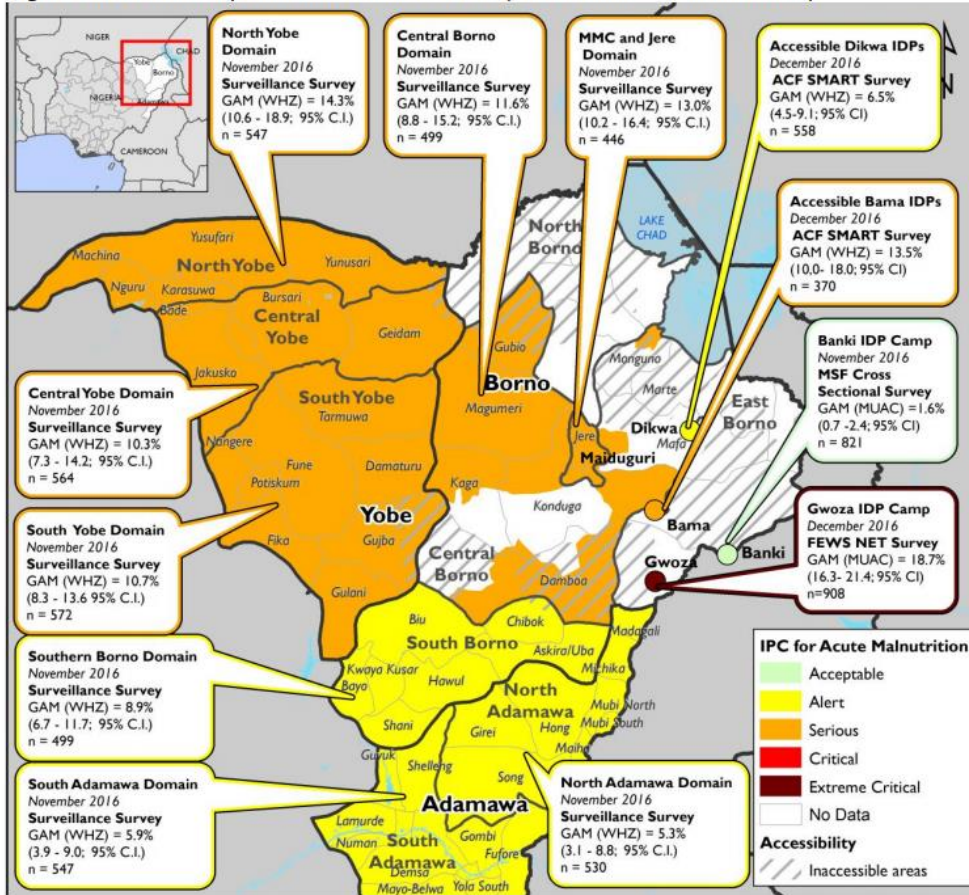
Nutrition

Almost one in five children is estimated to be suffering from severe acute malnutrition (SAM). The number of children with severe acute malnutrition is expected to reach 450,000 in Borno, Adamawa and Yobe states (UNICEF 21/02/2017). In November 2016, the prevalence of GAM was 11.4%, 11.3%, and 5.6% in Yobe, Borno and Adamawa states, respectively. In Maiduguri Metropolitan Council (MMC), Jere, northern, central and southern Yobe, it exceeded the WHO's 10% classification threshold for "serious", one step before the highest level 'Critical' (NIEWG 06/02/2017).

6.7 million people have nutritional needs, according to the 2017 Humanitarian Needs Overview (HNO). A lack of service delivery points for malnourished children with medical complications has been reported (OCHA 24/02/2017). Screening for malnutrition does not take place in many host communities and targeted supplementary feeding for breastfeeding women happens in very few displacement sites (IOM 28/02/2017).

Nutrition in Northeast Nigeria

Figure 2. Nutrition survey results with call outs for data published from October to January



Source: FEWSNET 06/03/2017

Health

The health situation remains alarming with several millions of people without access to health assistance (OCHA 24/02/2017). Malnutrition aggravates the impact of a number of communicable diseases, such as malaria and measles. Outbreaks of cholera and meningitis have been recorded, and are likely to increase due to the living conditions in some camps and host communities (Health Sector 17/03/2017).

283 Lassa fever cases have been recorded across the country between December 2016 and 19 March, although few cases have been recorded the northeast (WHO 24/03/2017).

In 2016, there were approximately 25,000 cases of measles among children in Nigeria; 97% of the cases were in children under the age of ten and at least 100 children died. With access and security still a problem in the northeast, vaccination is limited (UNICEF 26/01/2017). In Borno state, an outbreak has been reported by the Early Warning and Response System (EWARS) in Jere, Maiduguri, Konduga and Biu LGAs this year, while the Integrated Disease Surveillance and Response (IDSR) reported an outbreak in Bama.

164,144 suspected malaria cases were reported between mid-August 2016 and the beginning of March 2017 in the northeast. 97,676 of these cases have been confirmed (Health Sector 17/03/2017). 7 million cases of malaria were reported in the country in 2014. 550,000 and 480,000 were reported in 2010 and 2009 respectively (WHO 11/2/2015). While reported cases of malaria have reduced since 2014, the ongoing humanitarian crisis is threatening to undo this downward trend.

Access to healthcare is poor. The lack of qualified health personnel and essential medicines hinders the proper treatment of illnesses. Expired drugs are reportedly being donated to IDPs (The Sun 20/03/2017). As of February 2017, one-third of the 749 known health facilities in Borno state have been completely or partially destroyed by the insurgency (WHO 23/02/2017; Health Sector 17/03/2017).

Protection

The limited and irregular distribution of food and other essentials have resulted in tension and at times demonstrations (OCHA 24/02/2017)

The dependence on increasingly severe coping mechanisms leads to protection concerns. The widespread insecurity and the adoption of severe coping mechanisms is likely to put more women and girls at risk of gender-based violence. Migration is a common coping mechanism. Those moving in search of income opportunities are at high risk of exploitation and trafficking.

More than 30,000 children have been orphaned or separated from their parents, with over 10,000 forced to fend for themselves, leaving them particularly vulnerable to forced/early marriage, sexual abuse and forced labour (Reuters Foundation 30/01/2017).

Landmines and explosive remnants of war pose a challenge to safety and return, and hamper the resumption of agricultural activity.

Vulnerable groups affected

Women and children are the most affected vulnerable groups. Female- and child-headed households are more vulnerable, and their numbers have increased (UNHCR 11/2016). A higher coping strategy index was found among female-headed households in Gubio, for instance, indicating more severe food insecurity and the likelihood of more severe coping strategies being applied by them (WFP 10/12/2016, IOM 20/20/2017).

Humanitarian and operational constraints

The volatile security situation and military operations make it difficult to organise the movement of cargo and personnel (OCHA 24/02/2017). Over 80% of Borno is considered high or very high risk for international humanitarian partners to operate. Many areas remain accessible only through military escorts or by helicopter (OCHA 24/02/2017). Several communities around the Sambisa Forest and in the northern parts of Borno, Adamawa, and Yobe states remain hard to reach.

Three LGAs – Abadam, Marte and Guzamala in Borno state remain completely inaccessible.

Delivery of humanitarian assistance to Kaga LGA has been restricted due to repeated attempts by Boko Haram to block the road from Maiduguri to Damaturu (Coopi 11/2016).

Curfews in many areas limit when humanitarians can carry out their activities.

Restrictions on visas, and delays in customs clearance for humanitarian personnel and supplies persist (OCHA 24/02/2017).

Outlook

With the lean season expected to begin in April this year and a total of about 5.2 million people in Adamawa, Borno and Yobe states are projected to experience IPC Phase 3–5 food insecurity situations from June to August (3.68 million in Borno, 888,000 in Yobe and 670,000 in Adamawa) (USAID 31/03/2017). 50,000 people will be in Famine (IPC Phase 5) conditions if no adequate remedial measures are provided on time ([Cadre Harmonise](#) 10/03/2017).

The Nigerian Meteorological Agency (NiMet) has predicted an early cessation of rainfall in 2017, especially in the northern part of the country (Channels TV 14/03/2017). This will reduce the growing season and likely impact agricultural production. The onset date of the growing season was predicted to be from 16 June while cessation dates of the rains are predicted to start from 4 October (Vanguard 14/03/2017).

Aggravating factors

Pre-existing vulnerability and poor infrastructure

Northeast Nigeria has high underlying vulnerability, with poor access to basic services even before the escalation of violence by Boko Haram.

75% of water and sanitation infrastructure has been damaged. 3.8 million people are unable to access safe water, according to UNICEF's Director of Emergency Program (OCHA 29/03/2017; The Guardian 29/03/2017).

Inaccessible areas

The military takeover of previously inaccessible territories controlled by Boko Haram has revealed high needs among the population that was previously inaccessible. At least 800,000 food insecure people have been become reachable since the armed forces began its clearance operations in these areas, according to the former UN Deputy Humanitarian Coordinator in Nigeria (Premium Times 30/11/2016). In Bama and Banki, Famine (IPC Phase 5) was said to have been reached, and at least 2,000 people may have died between January and September 2016. Given the severity of food insecurity observed in areas that humanitarians can reach, it is possible that Famine (IPC Phase 5) is ongoing in areas that remain inaccessible (FEWS NET 13/12/2017).

Economic crisis

High inflation – 17.8% as of February 2017, as against the 11.4% of February 2016 and 7.7% of the same month in 2014 – and the economic recession are affecting all food sub-indexes around the country. The main inflationary pressures include foreign exchange shortages, the devaluation of the naira and the increase in fuel prices (Trading Economics; Central Bank of Nigeria; Financial Nigeria 15/02/2017). The presidency set up a task force to address the high food prices across the country (NTA 01/02/2017).

Returns from other locations

2,600 refugees have been forcibly returned from Cameroon this year and 22,463 from Niger Republic to Damasak, Borno state. With the agreement signed between Nigeria, Cameroon and Niger for the safe return of the displaced persons, more returnees are expected through Bama and Ngala LGAs (UNHCR 21/03/2017; Premium Times 09/03/2017;

Vanguard 03/03/2017). This is likely to place an increased burden on already deprived camps and host communities.

Michika in Adamawa State is a community of 36,000 returnees. As of December 2016, 16,000 people had returned to Madagali while Askira-Uba in Borno State has 2700 returnees. All three LGAs, like many others, have no established camp for the IDPs. With critical infrastructure destroyed by the insurgency yet to be rehabilitated and persisting security challenges in some areas, many IDPs remain in a state of secondary displacement.

Contextual information

Stakeholders

Boko Haram: Boko Haram (“Western education is forbidden”) is leading an insurgency to create an Islamic state in the predominantly Muslim regions of northeastern Nigeria. It originally acted as a reactionary Wahhabi-Islamic, anti-government preaching group in 2002 when it was founded by Mohammed Yusuf. The group started by opposing underdevelopment, poverty, and western education. It launched military operations to create an Islamic state in Nigeria in 2009 (BBC 24/11/2016).

Boko Haram divided into two, with Abu Musab al Barnawi named leader of the Islamic State affiliated wing in 2016. The former leader Abubakar Shekau maintained control of the other part of the group, said to be operating from the Sambisa Forest. Al Barnawi has since been arrested and is facing charges at the Federal High Court (Vanguard 14/03/2017). The group is said to have an extensive network of sleeper cells and continues to carry out attacks (Daily Post 14/01/2017; Premium Times 22/08/2016).

Nigerian Army: The Nigerian government declared a state of emergency in Adamawa, Borno and Yobe states in 2015. Since then, the military operation, Lafiya Dole (Peace by Force) has regained control of territories in the northeast (Vanguard 21/07/2015; Nigerian Army 07/03/2017). Amnesty International has accused the military of human rights abuses in its operations (Amnesty International 16/05/2016). The army, which also leads the Multinational Joint Task Force (MNJTF), has denied these allegations and set up a committee to investigate them (This Day 23/02/2017; Premium Times 03/08/2017).

Civilian Joint Task Force (CJTF): The Nigerian Army works closely with the CJTF, made up of local hunters and volunteer vigilantes with a reported strength of 25,000–36,000 (Insight on Conflict 20/03/2017). While not holding any official rank within the armed forces, the CJTF and its local knowledge has been used to apprehend Boko Haram members and foil attacks (This Day 25/01/2017, Insight on Conflict 20/03/2017). The group has been accused of using children and other human rights abuses (The Guardian 08/02/2017; Crisis Group 05/12/2016).

Multinational Joint Task Force (MNJTF): Made up of troops from Cameroon, Niger, Nigeria, Chad, and Benin, the joint military response was initially fighting banditry and smuggling in the Lake Chad border, but were mandated by the African Union in 2015 to fight against Boko Haram. It is currently led by the Nigerian Army and operates around border towns (ISS 13/01/2017; Global Security).

Response capacity

Local and national response capacity

The National Emergency Management Agency (NEMA) and the State Emergency Management Agency (SEMA) are responsible for disaster management at the federal and state level. They work in collaboration with national and international NGOs. All sectoral working groups are headed by the government through relevant state ministries.

International response capacity

Various international NGOs are present, many of whom have scaled up their response since 2016 despite challenges with funding. The UNHCR’s USD 169.9 million requirements for the Nigeria situation in 2017 is only 13% funded (UNHCR 31/03/2017).

Almost USD 458 million has been pledged against the required USD 1.054 billion to fund the Humanitarian Response Plan (HRP) for 2017 (OCHA 24/02/2017). At least 12 humanitarian hubs are to be set up at different locations in Borno state to better connect agencies, improve coordination, and ensure more effective delivery of aid (IOM 12/9/2016).

Population coping mechanisms

Transactional sex, human trafficking, early/forced marriage and drug abuse have been reported among IDPs. In Kaga LGA, Borno State, many households rely on less expensive food, limiting portion sizes, help from relatives or friends, gathering wild food, and begging (Coopi 11/2016). A large number of children have become street beggars. Lack of livelihood opportunities for young people makes them vulnerable to recruitment by groups like Boko Haram. There have been reports of an increase in violent crime and drug abuse (PSWG 23/04/2017).

Information gaps and needs

- There is no knowledge of the needs of populations in inaccessible areas.

- Constant movement of IDPs makes it difficult to have reliable population data. In addition, the last national census was conducted in 2006. This means population data is out of date and projections and estimates may not be reliable.
- Limited comprehensive information is available on the needs of host communities and IDPs living in host communities, as there is no system to monitor movement into and out of communities.
- Assessments and results are not harmonised, resulting in huge variance in malnutrition and population figures. The figures available on malnutrition and population size vary broadly from one report to another.
- The vulnerability of women and girls remains a grave concern: more assessment on gender-sensitive needs is required to inform scale-up efforts.

Lessons learned

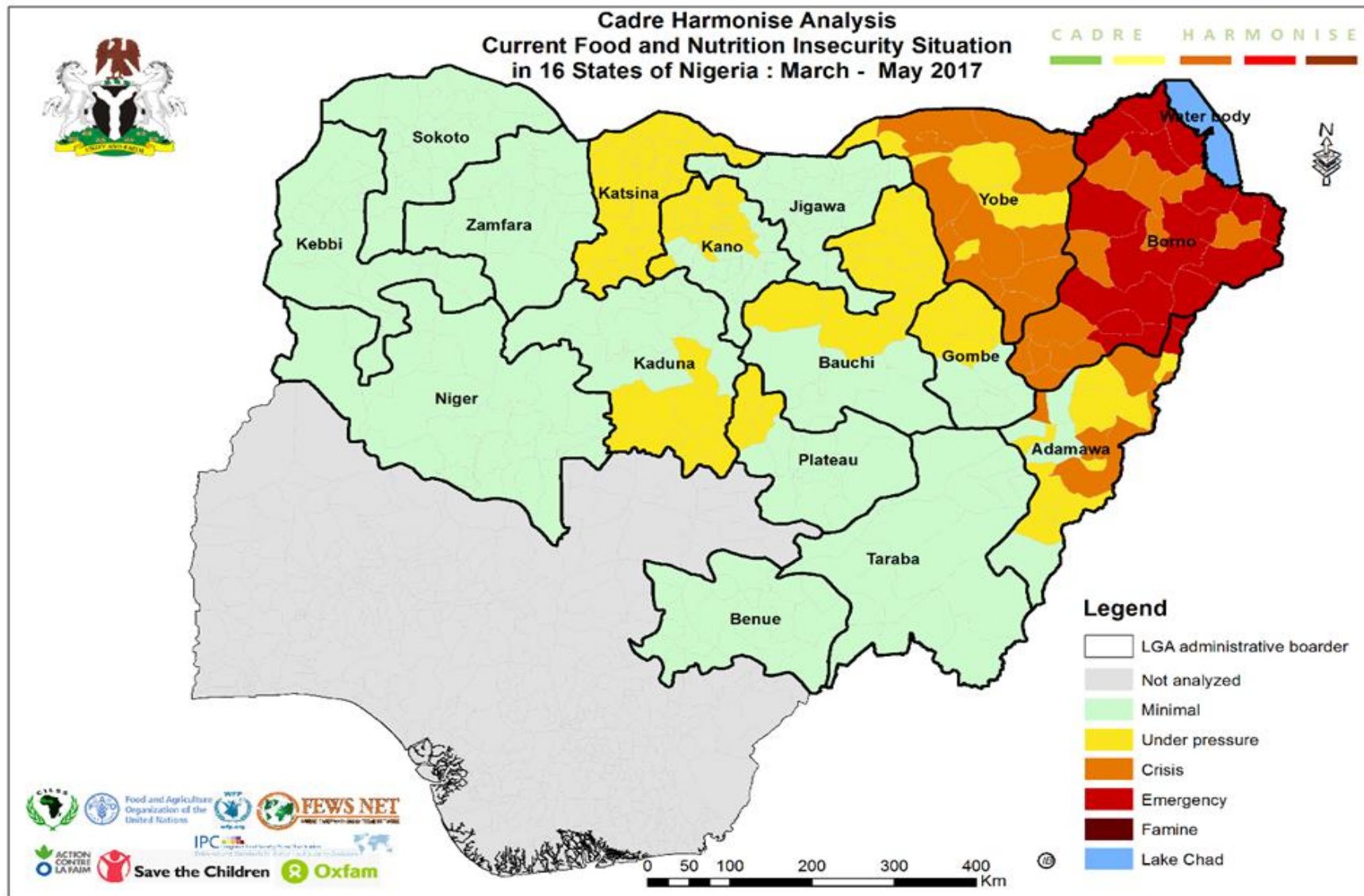
- The trend of food aid being sold by IDPs is an indication that cash based interventions may be more beneficial in the long run as it empowers beneficiaries and gives them options.
- Sociocultural factors and practices associated with women's food consumption patterns should be considered in providing aid (COOPI 11/2016). When food supply is inadequate women often have to sacrifice their portion for the men and children.
- There is an increased need to conduct risk and viability assessment before implementing projects to ensure their usefulness to beneficiaries
- Scaling up routine screening for the early detection of acute malnutrition and referral for treatment is necessary, especially in newly accessible areas (OCHA 24/02/2017).

Key characteristics of Borno, Adamawa, Yobe

Key Indicators	Borno	Adamawa	Yobe	
Percentage population under 15 (2010)		45.7%	41.6%	43.8%
Population (2011)		4,994,033	3,674,992	2,765,286
State Capital	Maiduguri	Yola	Damaturu	
Percentage unemployment (2010)		26.7%	24.6%	26.2%
Percentage households with protected watersources		35.4%	22.2%	29.6%
Malnutrition, weight-for-age (wasting), percentage below 3 standard deviations (2008)		4%	11.8%	9.2%
Percentage low birth weight infants (2007)		17.3%	24.4%	16.6%
Adequately fed infants (2007)		5.3%	8.5%	3.8%
Maternal mortality ratio (2016)		190	456	113
Literacy rates, adult (2008)		37%	58.4%	39.6%
Shelter, percentage homes with cement or brick walls (2009)		24.8%	22.5%	11.5%
Lighting sources (2009)	Kerosene 53.9% Firewood 21.5% Maine electricity 9.3%	Kerosene 63.9% Firewood 1.9% Mains electricity 16.6%	Kerosene 57.9% Firewood 8.1% Mains electricity 14.9%	

Source: Nigeria Data Portal

Map: Food and nutrition insecurity, March–May 2017



Source: Cadre Harmonise