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for every child

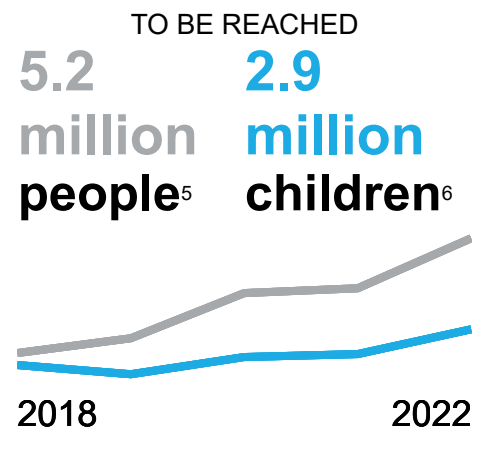
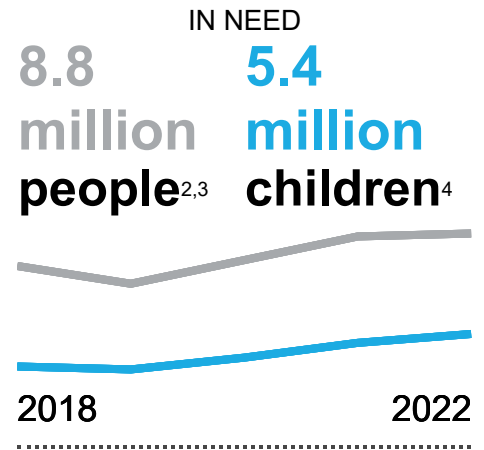
Humanitarian Action for Children

After losing two children to malnutrition, Hadiza is one of the caregivers in northeast Nigeria trained by UNICEF on the use of the mid-upper arm circumference tape for screening

Nigeria

HIGHLIGHTS¹

- An estimated 8.8 million people, including 5.4 million children and 3.4 million adults are affected by conflict in Northeast and armed violence in Northwest Nigeria. Of these numbers, over 2.6 million are displaced across the Northeast and Northwest, while 1 million are living in inaccessible areas in the Northeast. Alarming levels of food insecurity and malnutrition from protracted conflict in the Northeast and growing hostilities in the Northwest, compounded by epidemic outbreaks such as cholera, measles and yellow fever continue to exacerbate an already dire situation.
- UNICEF will provide an integrated and multi-sectoral response, focusing on conflict and violent affected populations. The Rapid Response Mechanism will provide speedy and coordinated support to emerging crises. UNICEF will promote programmatic convergence while strengthening quality of the response, the humanitarian-development nexus and UNICEF's added value. A systematic gender lens will be applied to analysis and programme designs.
- UNICEF requires US\$234.4 million to deliver an integrated package of assistance with a focus on nutrition, education, WASH, health and child protection services to address the needs of vulnerable and crisis-affected children.



KEY PLANNED TARGETS



541,547

children admitted for treatment for severe acute malnutrition



1.6 million

people accessing a sufficient quantity of safe water



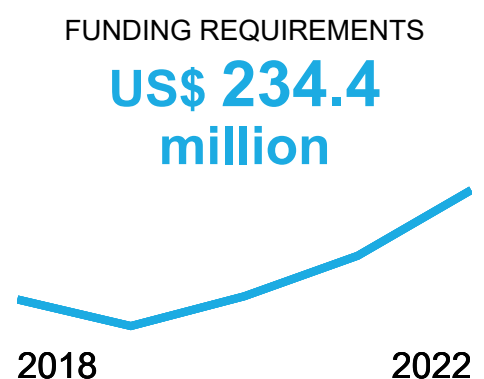
371,000

children/caregivers accessing mental health and psychosocial support



994,091

children accessing educational services



Figures are based on the Nigeria 2022 Humanitarian Response Plan for Northeast and IOM Displacement Tracking Matrix March 2022 for Northwest

HUMANITARIAN SITUATION AND NEEDS

Humanitarian needs in Nigeria continue to increase, with conflicts and violence in Northeast and Northwest geopolitical zones affecting approximately 8.8 million people, with 2.6 million displaced.

In the Northeast, 80 per cent of internally displaced people (IDPs) are in Borno state, 60 per cent in host communities, while more than 1 million are in inaccessible areas where services and assistance do not reach them. The protracted conflict and influx of IDPs from fresh fighting have exacerbated existing needs. More than 5.1 million people are experiencing worsening food insecurity and approximately 1 million children under five and 150,000 pregnant and lactating women (PLW) are expected to suffer from acute malnutrition. The global acute malnutrition (GAM) rate is over the critical threshold of 14 per cent. Poor health and WASH infrastructure in the context of COVID-19 is intensifying existing high levels of epidemics and illnesses like measles, cholera, yellow fever and malaria. A total of 3 million people are in critical need of sustained, equitable access to clean water and dignified hygiene and sanitation services.

In the Northwest, children face the threat of attacks by armed bandits and abduction. Nearly 360,000 people have been internally displaced, 89 per cent in host communities. Around 1.7 million are projected to be food insecure, complicating existing high malnutrition with an average GAM rate of 7 per cent, and further exacerbating deprivation in an area with the lowest development indicators in Nigeria. Only 35 per cent of the population have access to basic water supply and sanitation facilities. In host communities and camps, 41 per cent have access to less than 15 liters per day, 71 per cent have unimproved water facilities, 99 per cent have latrines that are either unhygienic or unusable, and up to half of these sites show evidence of open defecation. This is significant exposure to waterborne diseases, with a countrywide cholera outbreak further deepening the already dire situation.

Nearly 2 million children require access to school due to disruption and destruction of school facilities in the north-east and north west. Around 2 million children require protection from child marriage, family separation, physical and sexual violence, psychosocial distress and use and recruitment by non-state armed groups.

Threats against aid workers by parties to the conflict, including politicization, is affecting humanitarian access, with many areas at high risk. Increasing numbers of illegal checkpoints on roads affect cargo and personnel movement, worsened by threats of attacks, improvised explosive devices or unexploded ordnances and impassable routes.

SECTOR NEEDS⁷



3 million people in need of nutrition assistance



3 million people lack access to safe water and hygiene



2 million children in need of protection services



1.9 million children in need of education support

STORY FROM THE FIELD



Asmau Isa sits in a classroom to learn in Damaturu, Yobe State in north-east Nigeria. Along with her five siblings, Asmau, 13, has just been enrolled in school for the first time after a UNICEF-supported community mobiliser convinced her father of the benefits of formal education.

[Read more about this story here](#)

Asmau Isa 13, in a classroom to learn for the first time in Damaturu Yobe State, Northeast Nigeria

HUMANITARIAN STRATEGY⁸

UNICEF will work in close partnership with the Government, United Nations agencies, and international and non-governmental organizations (NGOs) to reach people affected by the ongoing crises. Where possible, UNICEF will work through nexus programming. This will be achieved through strengthening risk communication and community engagement for social and behavioral changes. UNICEF's response will be integrated and multi-sectoral, focusing on conflict-affected populations, ensuring adequate COVID-19 preparedness and response measures are in place. UNICEF co-leads the nutrition, WASH, education sectors and child protection sub-sector with the Government. UNICEF's response will focus on quality through improved sector coordination and leadership. A Rapid Response Mechanism by UNICEF and partners will provide immediate and coordinated support to affected populations in the event of rapid escalation of crises.

UNICEF will focus on improving the quality of its humanitarian programming, ensuring strong linkages between humanitarian and development, and mainstreaming prevention of sexual exploitation and abuse (PSEA). UNICEF will provide services that will ensure malnourished children and women are identified for early admission to life-saving severe acute malnutrition (SAM) treatment.

While providing an effective and timely response to disease outbreaks, the integrated primary health care system will be strengthened to provide services to internally displaced people (IDPs), returnees and hosts. UNICEF will ensure sustained access to clean water, sanitation and hygiene services in camps and host communities. Conflict-affected IDPs and host communities will be provided with improved, sustainable access and increased use of adequate emergency WASH services.

The protection of children and women will be increased through community-based actions to mitigate risks, prevent and respond to violence, exploitation and abuse. These will be achieved through access to essential child protection services and socioeconomic reintegration of children formerly associated with organized armed groups. UNICEF will ensure access to quality education opportunities to children in humanitarian situations while strengthening the education system to address transition to regular schools.

UNICEF will continue to integrate multi-sectoral humanitarian cash assistance for the most vulnerable households within crisis-affected areas. In all responses, UNICEF will pay attention to sensitive high-impact interventions and accountability to affected persons.

UNICEF will strengthen the use of data and evidence to enhance risk monitoring and preparedness for anticipatory action, when possible. Across all programmatic sectors, UNICEF will strengthen gender-based violence risk mitigation to improve support for the most vulnerable women and children.

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/nigeria/situation-reports>

2022 PROGRAMME TARGETS^{9,10,11}



Nutrition¹²

- **541,547** children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- **858,572** primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- **941,298** children aged 6 to 59 months receiving multiple micronutrient powders¹³



Health

- **707,661** children aged 6 to 59 months vaccinated against measles
- **4,462,911** Internally displaced persons and host communities, including children and women accessing primary health care in UNICEF-supported facilities



Water, sanitation and hygiene

- **1,577,308** people accessing a sufficient quantity of safe water for drinking and domestic needs
- **779,140** people use safe and appropriate sanitation facilities
- **1,591,308** people reached with critical WASH supplies
- **1,591,308** people reached with key hygiene messages



Child protection and GBVie

- **371,000** children and parents/caregivers accessing mental health and psychosocial support¹⁴
- **262,500** children and community members benefit from information on child care and child protection including on grave child rights violations
- **360,000** people with safe and accessible channels to report sexual exploitation and abuse by aid workers¹⁵
- **60,000** women, girls and boys provided with risk mitigation, prevention or response interventions to address gender-based violence



Education

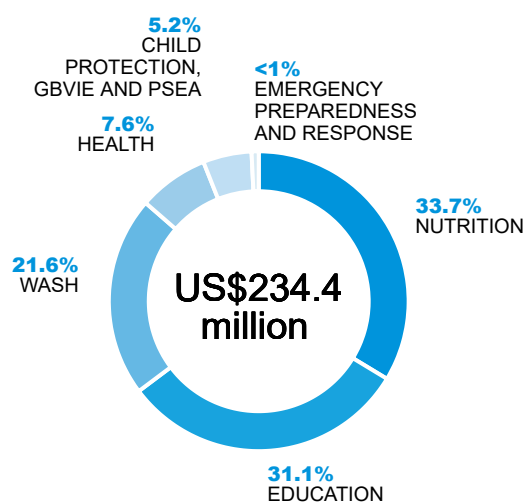
- **994,091** children accessing formal or non-formal education, including early learning
- **994,091** children receiving individual learning materials
- **10,730** teachers trained on psychosocial support and positive discipline

FUNDING REQUIREMENTS IN 2022

An estimated 8.8 million people – including 5.4 million children and over one million people living in inaccessible areas – are in need of humanitarian assistance in Northeast and Northwest Nigeria. Increased conflict and insecurity from incessant attacks from non-state armed groups (NSAGs) and security forces (SF) have resulted in an increase in the number of people to be reached in 2022 compared to 2021, especially with the worsening humanitarian situation in the Northwest.

In 2022, UNICEF requires US\$234.4 million to deliver an integrated package of nutrition, WASH and child protection services to address the needs of nearly 5.2 million people, including women and children. The crisis in Nigeria is multifaceted and protracted, given the worsening insecurity, the influx of new arrivals and unplanned returns, and the deteriorating food security situation accompanied by increased malnutrition. Therefore, there is a significant need for increased funding to support WASH, Health and child protection to provide life-saving services to more children and families.

This appeal has been revised to align with the finalized 2022 Nigeria Humanitarian Response Plan (HRP). The increased funding requirement for education reflects the increased costs per child based on current inflation analysis and sector-level planning. Following the rise of defectors from armed groups in the Northeast, the child protection sector fund requirements are increasing in response to the upsurge of reintegration needs, including Psychosocial services (PSS) services and capacity of partners. In addition, nutrition targets and funding requirements have been revised based on the recent SMART survey undertaken in Northwest Nigeria. Without sufficient and timely funding, UNICEF will be unable to support the national response to the country's continuing crises.



Appeal sector	Revised 2022 HAC requirement (US\$)
Nutrition	78,900,000
Health	17,800,000
WASH	50,700,000
Child protection, GBViE and PSEA	12,300,000
Education	72,900,000
Emergency Preparedness and Response	1,800,000
Total	234,400,000

Appeal sector	Original 2022 HAC requirement (US\$)	Revised 2022 HAC requirement (US\$)	Funds available (US\$)	Funding gap (US\$)	2022 funding gap (%)
Nutrition	79,000,000	78,900,000	16,466,246	62,433,754	79.1%
Health	17,800,000	17,800,000	2,946,513	14,853,487	83.4%
WASH	53,800,000	50,700,000	5,675,251	45,024,749	88.8%
Child protection, GBViE and PSEA	12,900,000	12,300,000	2,536,022	9,763,978	79.4%
Education	65,400,000	72,900,000	11,409,807	61,490,193	84.3%
Emergency Preparedness and Response	1,800,000	1,800,000	1,986,465	-186,465	-10.4%
Total	230,700,000	234,400,000	41,020,304	193,379,696	82.5%

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ENDNOTES

1. UNICEF's public health and socio-economic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
2. UN OCHA Humanitarian Response Plan 2022 (published); IOM Displacement Report Nigeria-North Central North West Round 9 (March 2022).
3. PiN for HAC: Northeast: PiN 8.4 million; CiN (62 per cent) 5.2 million of PiN; 2.2M IDPs (Nigeria HRP Feb 2022) Northwest: IDPs (Sokoto, Katsina and Zamfara) 360,000, children 198,000 (55 per cent) (IOM Displacement Report Nigeria-North Central North West Round 9 (March 2022) Therefore, Total PiN for HAC is 8.8 million (8.4 million Northeast and .4 million Northwest), CiN is 5.4 (5.2 million Northeast and .2 million northwest), IDPs 2.6M (2.2 million Northeast and .4 million Northwest)
4. UN OCHA Humanitarian Response Plan 2022 (published); IOM Displacement Report Nigeria-North Central North West Round 9 (March 2022).
5. Total persons to be reached is 5,170,572. This figure was calculated based on UNICEF's target on adults to be reached with primary health care in UNICEF-supported facilities (1,908,187 or 37%); children to be reached with primary health care (3,016,167 or 58%); and under five years children to be reached with measles vaccination (707,661). The total figure includes 2,708,395 women/girls (52 per cent) and an estimated 246,217 people with disabilities (0.5 per cent). UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has sector coordination responsibilities.
6. This figure was calculated based on the highest coverage programme target for children to be reached with primary health care (3,016,167 or 58%); and under five years children to be reached with measles vaccination (707,661). This includes 1,600,415 girls (55 per cent), 1,415,752 boys (45 per cent) and 14,472 children with disabilities (.5 per cent).
7. UN OCHA Humanitarian Response Plan 2022 (published); and UNICEF's planned reach for north-west.
8. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.
9. Section targets are average 40 to 55 per cent of the sector targets. This is to allow UNICEF focus on coordination and quality of response.
10. Humanitarian cash transfer assistance is integrated across HAC 2022. WASH and nutrition have planned HCT and integrated this into their response. WASH is targeting 72,000 person with US\$696,000. While nutrition is targeting 85,000 persons to be provided with 12-months cash support for US\$6 million.
11. Risk communication and community engagement (RCCE) for social and behavioral changes activities will cut across all sections actions. RCCE through communication for development will target 5 million persons for US\$2 million.
12. UNICEF is planning to provide all required sector nutrition supplies for SAM and programming for 50%, 70% for MNP and 40% for IYCF.
13. Micronutrients deficiency is also known as hidden hunger and it is a major form of malnutrition leading to morbidity and mortality in Northeast and Northwest Nigeria. Available evidence in NDHS 2018, shows high level of anemia among children and women in Nigeria. We presently have suboptimal minimum dietary diversity and minimum acceptable diet among children under five years, which are vital in ensuring adequate micronutrients intake despite ongoing behavioral change interventions. With the humanitarian situation in these areas, the situation of hidden hunger in children would be worst, if this is not focused on alongside the planned response. To address the hidden hunger, UNICEF plans to improve consumption of micronutrients among children 6-59 months, through the provision of multiple micronutrient powders (MNP), which have been found to be very helpful when introduced to complementary foods. Hence, the new target for MNP has been added in the 2022 HAC.
14. This target 371,000 is the sum of Northeast (350,000) and Northwest components (21,000), and it has increased due to the increase in the Northeast component. The target increased for the Northeast to ensure higher coverage against low capacity of partners as well as to address PSS needs triggered by continued numbers of people exiting armed groups.
15. UNICEF is committing US\$1,850,000 to various PSEA activities.