

NIGERIA EMERGENCY OPERATIONS

INTERNATIONAL ORGANIZATION FOR MIGRATION



- Displacement Tracking Matrix Round XI was conducted. As of 31 August, 2,093,030 IDPs were identified across 13 states. Biometric registration continued Adamawa, Borno and Yobe, where 333,936 IDPs have already been registered.
- IOM has built 1,000 emergency shelters in Bama and Gwoza, to ensure that the affected populations have access to shelter, which will reduce their exposure to the environment and contribute to their increased security and dignity.
- IOM has conducted Mental Health and Psychosocial Support needs assessment in Benishek, Minok and Gwoza. In addition, IOM continued providing psychosocial support and activities to beneficiaries in Yola, Chibok and Maiduguri.

Situation Overview

Since the beginning of 2014, the North-East of Nigeria has witnessed an increase in violence conducted by the insurgency, causing a major humanitarian crisis. The intensification of attacks as well as the counter-insurgency activities have resulted in chronic and widespread insecurity and violations of human rights, exacerbating the plight of vulnerable civilians and triggering waves of forced displacement. There are seven million people in need of humanitarian assistance in Nigeria, including 1.9 million people displaced by the insurgency. Ninety-two per cent of the IDPs are hosted by lowincome host communities, bringing already-stretched services and resources under increased pressure. The armed conflict has directly affected four states in the North East: Borno, Adamawa, Yobe and Gombe, with Borno State being the most severely affected and the epicentre of military operations and displacement of civilians. While the current humanitarian response covers all four states, the access to large territories in Borno State remain very limited. This together with low funding has created a strain for humanitarian actors to meet minimum standards.

The last few months have witnessed the Nigerian security forces enabling access to the main towns and many of the villages of 22 of the 27 Borno Local Government Areas (LGAs), revealing the humanitarian needs of civilians previously inaccessible under the control of the insurgency, where more than 700,000 people are in need of urgent humanitarian assistance.

CONTACTS

Chief of Mission, Enira Krdzalic DTM Project Officer, Henry Kwenin Project Development Officer, Paula Martinez Gestoso http://www.nigeria.iom.int/

ekrdzalic@iom.int

hkwenin@iom.int

pgestoso@iom.int

IOM RESPONSE

₩.

Displacement Tracking and Registration

IOM conducted the eleventh round of Displacement Tracking Matrix (DTM) assessment from 18 July to 15 August. The DTM teams, which are composed of representatives of the National Emergency Management Agency (NEMA), the respective State Emergency Management Agencies (SEMA), the Nigerian Red Cross and IOM, have been collecting information on the locations of displaced people and their needs in camps, camp-like sites and host communities.

As the <u>DTM report</u> indicates, 2,093,030 IDPs (370,389 households) were identified in Abuja, Adamawa, Bauchi, Benue, Borno, Gombe, Kaduna, Kano, Nasarawa, Plateau, Taraba ,Yobe and Zamfara as of the end of August. 81.3 per cent of IDPs live in host communities and 89.4 per cent of the total number of IDPs identified (1,878,205 individuals) have been displaced because of the insurgency. The majority of the IDPs are identified in Borno (1,446,829), followed by Adamawa (163,559) and Yobe (135,442). A total of 155 camps and camp-like sites were identified and assessed in the field.

IOM carried out biometric registration of displaced people in close collaboration with NEMA and SEMAs in Adamawa and Borno and Yobe States. As of 15 September, 333,936 individuals (89,475 households) have been biometrically registered, including 78,322 individuals (30,421 households) in Adamawa, 219,652 individuals (55,021 households) in Borno and 21,201 (4,026 households) in Yobe. The vast majority of IDPs who have been registered live in host communities where little or no assistance has been provided.





Shelter, Non-food Items and CCCM

IOM co-leads the Shelter, Non-Food-Items (NFI) and Camp Coordination and Camp Management (CCCM)
Sector Working Groups with NEMA, UNHCR and Norwegian Refugee Council (NRC).



During the month of August, IOM finished the construction of 319 reinforced emergency shelters at Gubio, Farm Centre, Fariye and Muna Garage Camps for around 2,073 individuals in order to meet shelter gaps and replace damaged shelters in Borno State. In parallel, 1,000 emergency shelters have been constructed in Bama and Gwoza—two of the newly accessible areas to ensure that the affected population have access to shelter to reduce exposure to the environment and contribute to increase security and dignity.

IOM also distributed mosquito nets for 1,500 households in Banki on 16 August. Additionally, on 23-24 August IOM Nigeria in coordination with IOM Cameroon conducted a cross border operation to distribute 3,000 non-food items kits to 2,432 households in Banki (Borno State) only accessible via Cameroon.

As part of the capacity building support to government authorities and local partners, throughout August 2016, IOM conducted one training session on Sphere, three sessions of Protection Mainstreaming on CCCM, and three sessions on Emergency Shelter. 21 participants who excelled during the Emergency Shelter training session were invited to engage in a Training of Trainer (ToT) on Emergency Shelter. A total of 180 participants representing NEMA HQ, NEMA Zonal and Operations Offices, SEMA, Red Cross as well as local partners in 13 states took part in the training. Training sessions on Protection Mainstreaming on CCCM reached out to 68 actors mostly working as camp management staff or camp service providers. IOM organized the training sessions in collaboration with United Nations High Commissioner for Refugees (UNHCR), United Nations Populations Fund (UNFPA), and United Nations Children's Fund (UNICEF).

On 6-7 September, IOM organized two workshops in Maiduguri on lessons learned, where 19 participants attended. The workshop aimed at finding out how training participants are able to apply the knowledge obtained from the training



attended and whether they were able to extend the knowledge to their colleagues or broader audiences. Two more workshops will be carried out in September in Yola and Kaduna.

Since the beginning of the capacity building activities, IOM has contributed to increase the knowledge of 466 representatives of NEMA, SEMA, relevant government institutions, Red Cross as well as other humanitarian partners. Among those participants, 32 are trained as trainers on CCCM while 21 are trained as trainers on Emergency Shelter. These trainers will be linked to a 'pool of trainer' of NEMA HQ, where they will be engaged to cascade relevant training sessions in various areas in the country.



Mental Health and Psychosocial Support

From 1 August to 15 September, IOM's psychosocial teams reached 10,016 displaced people with lay counselling to provide basic emotional support, recreational activities, SGBV sensitization and identification of such cases. IOM also organized health talks—these included topics such as sanitation and environment, and personal hygiene, among others. Finally, IOM held focused group discussions, organized integrated psychosocial livelihoods activities with the aim of peer to peer support, and was engaged in the identification and referral of mental health cases to specialized services and follow up in Yola and Maiduguri. During 2016, IOM referred 33 beneficiaries to a neuropsychiatric hospital in Maiduguri to ensure effective recovery.

A mobile team of psychosocial experts was deployed on 7 September to Gwoza LGA to begin providing psychosocial assistance to beneficiaries. In addition to its usual activities, IOM mobile psychosocial team held a one day training on Psychological First Aid. Moreover, the team has conducted a

mental health and psychosocial needs assessment in Benishek and Minok.

On the 15th of September, a new child and adolescent therapy room was inaugurated at the Neuropsychiatric hospital in Maiduguri. IOM supported the Neuropsychiatric Hospital, by refurbishing the facility in order to support and encourage the use of play psychotherapies. Toys, creative tools and psychological assessment tools to help the child psychologists in their service delivery were also provided. The facility comprises a family therapy room, two counseling rooms and a play therapy room. The inauguration was attended by representatives from the Ministry of Health, Ministry of Women Affairs and Social Development, representatives from UN agencies and NGOs.

Livelihood component

Under the Psychosocial Program, IOM is working on livelihood activities as a form of community support in order to promote positive coping mechanisms

and resilience skills among displaced persons. As a response towards improving the psychosocial well-being of displaced persons, 884 IDPs in Yola (322) and Maiduguri (562) are currently involved in activities such as tailoring, bag and cap knitting, or barbering. Most of them are in a vulnerable situation—adolescents out of school, young widows with small children. Morever, IOM has provided five groups of young vulnerable IDPs living in formal and informal camps in Maiduguri with livelihood support and recreational activities.

During the reporting period, the mobile teams have also been supervising and monitoring the livelihood support items given to groups of vulnerable IDPs and identifying new materials for targeted groups of IDPs in both Yola and Maiduguri. Similar support is being planned to take place in Chibok in September.



