This document complements the 2019 Country Operational Plan and reflects IFRC support to the Nigerian Red Cross Society (NRCS) in the agreed areas of focus.

Main challenges in the country

Despite the wealth and strength of the country, Nigeria faces high levels of poverty, illiteracy and unemployment and remains vulnerable to both disasters and crises. Nigeria’s Human Development Index stands at 152 out of 188. It has one of the fastest growing populations globally with 5.5 live births per woman, a population growth rate of 3.2 percent annually (USAID, 2018) and a total population of around 197 million.

The country’s health needs are immense. Nigeria has the highest rate of unimmunized children worldwide (WHO, 2017), the second largest number of people living with HIV globally and accounts for nine percent of the global HIV. It also has the highest burden of malaria globally which remains the top cause of child illness and death (USAID, 2018) and is one of the three countries world-wide to still have...
cases of polio. Cholera, meningitis and Lassa fever are a continual challenge, while non-communicable diseases are a growing concern. With the rise of unplanned urbanization throughout Nigeria, health and water and sanitation situation is acute in growing urban slums.

Since 2009, the northeast part of Nigeria (a part of Lake Chad region together with Niger, Cameroon and Chad) has been plagued by armed conflict characterized by extreme violence against the population. The conflict has caused widespread displacement and left millions of vulnerable people in need of food, health services, shelter, and water and sanitation. In June 2018, IOM’s Displacement Tracking Matrix (DTM) identified 1.9 million internally displaced persons (IDPs) in the six northeastern states of Borno, Adamawa, Yobe, Bauchi, Gombe and Taraba. Due to the military operations, the movement patterns remain unpredictable and resources overstretched. According to the 2018 Humanitarian Needs Assessment Overview, an estimated 431,840 houses were destroyed in the above six states as well as 94% of 700 impacted public buildings. In addition, the ongoing conflict in Cameroon resulted in the constant flow of refugees into the Nigeria’s Cross River state, followed by Benue, Akwa -ibom and Taraba. According to the UNHCR, many of the refugees (21,000 registered as of March 2018) found support within host communities in small border villages that have since been sharing their scarce resources. Nigeria has also experienced recurrent clashes between herdsmen and farmers in Nigeria’s middle belt. Following the increased desertification in the north due to climate change, nomadic herdsmen have journeyed further south with their cattle for more fertile grazing land in the rich agricultural areas. However, grazing on farmlands destroyed livelihoods of farmers, disrupted communities and led to displacement of thousands of people, causing a steep drop in food production.

During the rainy season (April to October), rainfall is usually high and floods occur. Nigeria suffered its worst flooding in 2012, affecting 7.7 million people. In 2018, the continuous rainfall between July and September, caused two major rivers—the Niger and the Benue—to overflow into the surrounding communities, leaving approximately 80% of the country flooded, with unprecedented high-water levels. At that point, the government of Nigeria declared a state of emergency in four states, namely in Kogi, Niger, Anambra and the Delta. In October, the state of emergency expanded to a further five states, including Adamawa, Taraba, Bayelsa, Rivers and Kebi.

IFRC identifies six main risk factors, all of them with high impact, influencing the humanitarian access and capabilities to intervene in Nigeria. Lack of safety and security as well as proximity of 2019 general elections are at the top of the list, followed by the probability of deteriorating socio-economic situation, fluctuation of prices for relief items, inadequate funding and high staff turnover.
The National Society role and profile

The Nigerian Red Cross Society is recognized as the first responder that has earned the trust of the people in Nigeria. It has 37 branches, around 400 paid staff, more than 500,000 volunteers, over 60 per cent of which are youth. Based on both its 2016–2020 Strategic Development Plan and its 2018–2019 Road Map for Sustained Institutional Growth, the National Society pursues an ambitious organizational reform and programmatic growth. The National Society strives towards strengthening disaster management, health services, public perception, governance and management, systems and procedures and quality of services. Critical in the National Society’s development is sustainability of financing and a growing domestic financing base.

The National Society has a mandate to respond to emergencies and crises and a long-standing experience in responding to the situations of violence, natural disasters as well as health emergencies, including cholera, polio, meningitis, malaria, Ebola virus disease (EVD), Lassa fever and measles outbreak. In 2017, the National Society responded to the latest meningitis outbreak in Zamfara, Sokoto and Katsina states. In the first half of 2018, NRCS responded to the Lassa fever outbreak in the states of Edo, Ondo, Ebonyi, Oyo, Bauchi and Taraba. Within the framework of the One International Appeal (OIA) launched by ICRC and IFRC on 24 April 2017, NRCS has been responding to the complex emergency and the needs of the affected communities in Adamawa and Yobe (about 300,000 individuals), focusing on disaster risk reduction, WASH³, shelter, health, food security and livelihoods. Since July 2018, the National Society has been also responding to floods in the states of Katsina, Bauchi, Ondo, Ogun, Niger and Abuja, focusing on shelter, livelihoods (including cash-based interventions and direct food assistance), health, WASH and protection, gender and inclusion (GPI).

The National Society works closely with the IFRC West Coast cluster office in Abuja and Red Cross and Red Crescent Movement (the Movement) partners. Auxiliary to the government, the NRCS has a good working relationship with the National Emergency Management Agency (NEMA) at the federal level and the State Emergency Management Agencies (SEMAs)⁴ at state level, providing the National Society an equitable humanitarian space to operate. The National Society also cooperates with the Federal Ministry of Health, Ministry of Women Affairs, State Primary Health Care Centres and Nigerian Bureau of Statistics. The NRCS also works closely with UNFPA in the southeast. Together with IFRC, the National Society is working with UNICEF to provide nutrition support in the northeast. The National Society cooperates and collaborates with a number of other international organizations, including UN agencies (WHO, UNHCR, IOM, UNOCHA, FAO, WFP and UNDSS⁵) as well as non-governmental and inter-governmental organizations (MSF, Save the Children, ACF, NRC, IRC, CRS, ECOWAS⁶, CILSS-Cadre Harmonisé⁷ and FEWS NET⁸).
The role of IFRC in support of the National Society

IFRC in Nigeria is represented by the West Coast cluster office in Abuja that provides direct support to the Nigerian Red Cross Society in the implementation of its 2016–2020 Strategic Development Plan and 2018–2019 Road Map for Sustained Institutional Growth. IFRC has supported the National Society in partnership building and emergency fundraising, human resource development and capacity building particularly in health. Within the context of the National Society 2018–2019 Road Map for Sustained Institutional Growth, IFRC continue this support as well as focus on domestic resource mobilization development and strengthening the Society key systems and processes as well as volunteer management.

Coordination of the Movement partners has always been and remains a key priority, including further strengthening of the SMCC\(^2\) initiative that translated into the 2017 One International Appeal launched by ICRC and IFRC for the complex emergency in the northeast of Nigeria. Within that context, IFRC takes part in a Movement platform (decision-making level) and ensures coordinated planning and implementation of responses.

IFRC also supports National Society interventions outside the response to the abovementioned complex emergency. In 2018 alone, IFRC supported the National Society in planning and implementation of two major emergencies, namely Lassa fever outbreak and Nigeria floods.

Within the context of the 2018–2019 Road Map for the NRCS Sustained Institutional Growth, IFRC will continue to maintain the support it has provided to date, focusing on domestic resource mobilization development, National Society key systems and processes as well as volunteer management. Additional areas of focus in 2019 will include urban health, WASH, disaster risk reduction and effective preparedness for floods and droughts as well as community-based health support and outreach across the country. Furthermore, by seeking and establishing partnerships, IFRC will continue to contribute to the promotion of the One Billion Coalition for Resilience (1BC) initiative\(^3\).

IFRC aligns its activities in Nigeria to its Strategy 2020, 2017–2020 Africa Road Map\(^4\) and Africa Regional Operational Plan and Monitoring and Evaluation Framework and contributes to the realization of the Nigeria’s set targets for the Sustainable Development Goals (SDGs) 2, 3, 6, 11 and 13.
500,000
People living in high risk areas will be prepared for and able to respond to disasters.

11,000
People in disaster and crisis affected areas will restore and strengthen their safety, well-being and longer term recovery.

18,000
People will restore and strengthen their livelihoods.

73,500
People will benefit through increased access to appropriate health services.

73,500
People will increase their access to clean water, sanitation and hygiene promotion.

2,000
People will contribute to more peaceful, safe and inclusive communities.
STRENGTHEN NATIONAL SOCIETY CAPACITIES
ENSURE EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS
AREA OF FOCUS

DISASTER RISK REDUCTION

Nigeria is experiencing adverse climate conditions with negative impacts on the welfare of millions of people. It is especially vulnerable to extreme weather events, such as floods, storms, fires, droughts followed by desertification and erosion and further aggravated by population growth, urbanization, acute poverty, social marginalization, poor governance, weak rule of law and conflict. Persistent droughts and flooding, off-season rains and dry spells have strongly influenced the growing seasons in the country dependent on a rain-fed agriculture. Arid and semi-arid areas in northern Nigeria are becoming drier, while the southern parts of the country are getting wetter. In the northeast and middle belt in particular, climate change and conflict affect those relying on farming, livestock and forestry products, causing population displacement and further environmental degradation. Destruction of infrastructure and insecurity disrupt markets and prevent access to farmland, resulting in loss of livelihoods and increased competition over available resources between internally displaced people (IDPs), host communities and returnees, and herdsmen and pastoralists.

Within its mandate to respond to emergencies and crises, the National Society actively builds on its past experiences by strengthening its ability to plan for and respond to emergency needs. In coordination with the National Emergency Management Agency as well as with its state branches, the National Society saves lives, protects livelihoods and prepares for recovery from natural hazards and man-made disasters. Within the framework of 2017 One International Appeal, the National Society has been providing support to 300,000 people affected by the northeast complex emergency by mobilizing branch capacities, addressing people’s recovery needs and contributing to disaster preparedness of communities. In 2018, with the support of the IFRC, the National Society has additionally assisted people affected and displaced by floods in western Nigeria, in the states of Kogi, Delta, Niger, Anambra, Katsina, Bauchi, Ondo, Ogun, and Abuja and responded to a Lassa fever outbreak, targeting 36,000 households in the states of Edo, Ondo, Ebonyi, Bauchi, Oyo and Taraba.
In 2019, the National Society supported by IFRC will focus on further development of community resilience in the communities particularly at risk of floods, drought and health epidemics, including in urban slums. IFRC will actively engage in:

1. NRCS capacity building in preparedness for response, including the disaster risk management policy, contingency plans, prepositioning plans and simulation exercises i.e. training of staff and volunteers,

2. Development of community-based DRR initiatives, including contingency plans and replenishment

3. Creation or strengthening of community-based early warning system (CEWS)

4. Livelihoods stabilization (cash transfers) and economic recovery

5. Local and state government capacity development

6. Forecast-based financing especially for floods

7. Development of needs assessment tools and methodology

8. Promotion of climate change mitigation and adaptation through green solutions, better farming practices, protection of environment and education of communities
These activities will bring several benefits, such as the creation of a robust early warning mechanism and a more inclusive and participatory governance that supports more resilient communities and their capacity to mitigate and adapt in the face of present and future challenges. In addition, the planned activities will further strengthen the National Society capacity to be able to prepare and respond to future disasters. The above activities are in line with the 2017–2020 Africa Road Map and they will contribute to the realization of Nigeria’s set targets for SDG 13 related to climate change and its impacts.

<table>
<thead>
<tr>
<th>People Reached by Public Awareness and Education Campaigns Related to DRR, Climate Change Mitigation and Environmental Sustainability</th>
<th>500,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contingency Plans Are in Place</td>
<td>12</td>
</tr>
<tr>
<td>Community Early Warning Systems Are in Place and Linked with Local or National Meteorological Systems</td>
<td>12</td>
</tr>
<tr>
<td>Local Governments Supported in Implementing DRR Initiatives</td>
<td>24</td>
</tr>
<tr>
<td>Local Governments Supported in Development of Climate Mitigation Plans</td>
<td>24</td>
</tr>
<tr>
<td>Stocks Prepositioned in At Least 2 National Society Branches</td>
<td></td>
</tr>
<tr>
<td>Staff and Volunteers Trained in Resilience Approach</td>
<td>720</td>
</tr>
<tr>
<td>People Are Supported with Climate Tolerant Crops Through Cash-Based Interventions</td>
<td>5,000</td>
</tr>
</tbody>
</table>

**Outcome**

Communities in high risk areas are prepared for and able to respond to disasters with environmentally responsible values and practices.
AREA OF FOCUS

SHELTER

Since 2009, the northeast of Nigeria has been plagued by armed conflict characterized by extreme violence against the population. In June 2018, IOM's Displacement Tracking Matrix (DTM) identified 1.9 million internally displaced persons in six northeastern states of Borno, Adamawa, Yobe, Bauchi, Gombe and Taraba. This number represented a 2 per cent increase from previous assessment in April 2018 and indicated continued population movements, largely triggered by the ongoing conflict, poor living conditions, and the anticipation of conflict in some areas of the northeast. The movement patterns remain unpredictable and present a major humanitarian challenge as resources are often overstretched in the locations in which these civilians arrive. According to the 2018 Humanitarian Needs Assessment Overview, an estimated 431,840 houses were destroyed in the above six states. Approximately 700 public buildings were damaged by the conflict, 94 per cent of which were completely destroyed. Floods and storms have also contributed to the destruction of shelter. According to August 2018 assessment results, rain and windstorms destroyed 3,877 houses across 18 states of Nigeria. About 23 per cent of all internally displaced persons live in collective shelters (such as schools, government buildings, community centres). The availability of adequate shelter solutions is a concern. Over 70,000 IDP households settled in camps live in either inadequate or self-made shelters and/or in sites prone to flooding. For internally displaced persons living outside of camp settings tarpaulins are the most needed shelter material (88 %), along with materials to repair housing. Nearly one quarter of them (270,000 individuals) live in inadequate shelters, mostly in partially damaged housing or self-made structures. Due to the flooding and increased numbers, the scope of the support remains insufficient.

620,000 SWISS FRANCS SOUGHT

PEOPLE ARE PROVIDED WITH SAFE AND ADEQUATE EMERGENCY SHELTER AND SETTLEMENT ASSISTANCE 11,000

PEOPLE ARE PROVIDED WITH HOUSEHOLD ITEMS ASSISTANCE 11,000
The National Society considers that shelter is crucial in support to the vulnerable people and communities in the northeast and in the flood prone areas. Within the framework of 2017 One International Appeal related to the complex emergency in the northeast, the NRCS has been active in recovery of targeted households, mainly with provision of the construction material and construction of houses. The National Society has been also engaged in raising awareness of volunteers and communities regarding participatory approach for safe shelter (PASSA) as well as in distribution of non-food items (NFIs). In 2019, IFRC plans to support the National Society and the affected communities in their longer-term recovery through:

1. Building back better (safe, adequate and durable) shelter and settlement solutions, medium term and longer-term
2. Multi-purpose cash based interventions
3. Technical support, guidance and awareness raising in safe shelter design, settlement planning and improved building techniques
4. Training in participatory safe shelter approach for community members, volunteers and National Society staff, to ensure sustainability and better understanding of safe shelter

IFRC also plans to assist the National Society in their efforts to ensure its preparedness to respond to immediate shelter needs by prepositioning stocks, namely tarpaulins and shelter kits and its adherence to IFRC gender and protection guidelines and SPHERE standards. Inclusive, safe, resilient and sustainable settlements will contribute to the realization of Nigeria’s set targets for SDG 11.

| PEOPLE ARE PROVIDED WITH RECOVERY SHELTER AND SETTLEMENT ASSISTANCE | 1,500 |
| HOUSEHOLDS ARE PROVIDED WITH LONGER-TERM SHELTER AND SETTLEMENT ASSISTANCE | 250 |
| HOUSEHOLDS ARE PROVIDED WITH TECHNICAL SUPPORT AND GUIDANCE | 250 |

OUTCOME

COMMUNITIES IN DISASTER AND CRISIS AFFECTED AREAS RESTORE AND STRENGTHEN THEIR SAFETY, WELL-BEING AND LONGER-TERM RECOVERY.
Livelihoods and basic needs remain a critical issue in Nigeria. Displacement, lack of access to land, the closure of habitual trade routes and bans on traditional livelihood activities (e.g. the ban on the fish trade), critically disrupted the markets and resulted in a loss of income opportunities and significant food insecurity. In the northeast alone, more than 80 per cent of internally displaced persons identify agriculture or livestock as the main sources of livelihoods before the crisis, making a high dependence on external assistance inevitable in the short term. Households face a strong erosion of their livelihoods and high food prices, with staple food prices approximately 60 per cent higher than the year before and up to 120 per cent above the five-year average. Large-scale displacements were also triggered by floods during the 2018 rainy season, seeing over 80,000 persons forced to move to ad hoc camps or host families with massive destruction of harvests. Clashes with herdsmen i.e. pastoralists in the summer of 2018 again saw thousands of people displaced with the ensuing consequences. According to the 2018 Humanitarian Needs Assessment Overview, up to 3 million people are currently facing crisis or critical food and nutrition insecurity (IPC12 levels 3 and 4). An estimated 400,000 children suffer from severe acute malnutrition. Furthermore, country wide, over 60 per cent of the population lives on less than 1 dollar a day. Unemployment rates are over 18 per cent in general and 33 per cent among youth, fueling youth violence and high levels of poverty.

The Nigerian Red Cross Society has been active in responding to the livelihoods and basic needs in Nigeria through various operations. Within the framework of the 2017 One International Appeal, the National Society provided emergency assistance through cash programming for 5,539 families in the northeast. Additional 1,500 households received assistance in 2018. In order to revive their livelihoods and improve their income, the NRCS provided livelihoods and skills training to the assisted families. The National Society also provided seeds and other inputs for the 2018 farming season. Cash approach was again used when addressing the basic needs of people affected in 2018 floods. In 2019, the National Society plans to continue assisting vulnerable communities (mostly internally displaced persons and returnees) in the northeast of Nigeria, focusing mostly on resilient livelihoods, including cash and food production that can stand the impact of conflict and other disasters. The Nigerian Red Cross Society also plans to develop livelihoods support in Kanu and Lagos slums. It will seek to attain two milestones of the 2017–2020 Africa Road Map, i.e. to increase the number of women and men acquiring relevant vocational skills in order to decrease their vulnerability to conflict and increase their contribution to their local communities.
In line with the National Society objectives for 2019, IFRC will provide support in immediate provision of food and strengthening livelihoods as well as in promotion of climate resilient livelihoods and vocational training. Specifically, IFRC will assist the National Society in:

1. Relevant training for National Society staff and volunteers
2. Provision of in-kind assets, cash or vouchers for recovery and initiation of income-generating activities
3. Organization of vocational training, especially for young people
4. Technical support to and monitoring of income-generating activities
5. Training of households in climate smart agriculture, including application of climate information for planning and implementation of climate-resilient agricultural practices
6. Risk management in both planning and financing
7. Information-gathering on community engagement and accountability to improve future planning

The above activities will contribute to the overall food security intervention that is coordinated from Abuja, based on the analysis of food and nutrition situation at local level. The above activities will also contribute to the realization of Nigeria’s set targets for SDG 2 related to ending hunger, achieving food security and improved nutrition and promoting sustainable agriculture.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communities in disaster and crisis affected areas restore and strengthen their livelihoods.</td>
<td></td>
</tr>
</tbody>
</table>
Nigeria faces numerous health challenges and disease outbreaks, resulting in the loss of lives. Major public health challenges originate in poverty, poor access to health services due to damaged infrastructure and lack of human resources to run the facilities. Health challenges are countrywide, with acute needs in the conflict-affected places and urban slums. People remain at significant risk of epidemics like cholera, measles, meningitis or viral hemorrhagic fevers like Ebola, Lassa fever or yellow fever. According to the 2018 Humanitarian Needs Assessment Overview, around 7.9 million conflict-affected people are in need of primary and secondary health interventions across six states, of whom 5.4 million are located in the three worst crisis-affected states of Adamawa, Borno and Yobe. In the northeast, malaria, acute respiratory infections and watery diarrhea are the top three leading causes of illness among internally displaced persons, along with high levels of severe acute malnutrition. More than 40,000 children are at risk of dying from malnutrition with medical complications. Nigeria also struggles with immunization of children. According to the 2017 WHO assessments, Nigeria tops the list of countries with unvaccinated children from measles, with 3.3 million children. A 2017 UNICEF survey revealed that measles among children under the age of five increased more than two-fold in northern Nigeria between 2014 and 2016. Polio is also a challenge and despite vaccination campaigns, the number of unvaccinated children remains high. The Nigerian health system is underfunded. The lack of financial resources creates a brain drain of doctors and nurses. Experienced health professionals are mainly concentrated in the cities, leaving rural areas under-served. The situation has deteriorated further by the destruction of health facilities in the conflict in the northeast. According to the Health Resources Availability Monitoring System (HeRAMS), out of 755 health facilities in Borno state, 292 are destroyed, 205 are partially damaged and 253 are not damaged. Out of the total, half of them are not functional.
In 2015, the Nigerian Red Cross Society, supported by IFRC, provided assistance to 900,000 people through the Ebola response. That same year, a response to cholera reached out to 31,800 individuals through hygiene promotion, referrals and distribution of cholera kits. The 2016 meningitis response reached out to a total number of 1,332,419 and the 2017 Lassa fever response provided support to 447,249 individuals. In 2018, the National Society continued with health interventions related to disease outbreaks (Lassa fever and floods-related health issues) as well as with the recovery health activities in the northeast (mostly in Adamawa state). Within the 2017 One International Appeal, the National Society focused on the renovation of health facilities, school health promotion, community-based health and first aid, creation of mothers groups, procurement and distribution of bed nets, dignity kits for pregnant women and further training of traditional birth attendants. With support of the Movement partners, NRCS engaged in the measles and polio vaccination campaigns, including nutrition.

CONTINGENCY PLANS DEVELOPED TO RESPOND TO EPIDEMICS AND PANDEMICS

6

NATIONAL SOCIETY VOLUNTEERS TRAINED IN CBHFA, DISEASE PREVENTION AND EPIDEMIC CONTROL

720

HEALTH FACILITIES REHABILITATED, INCLUDING EQUIPMENT AND SUPPLIES

36

PEOPLE TRAINED IN FIRST AID

120

OUTBREAKS DETECTED AND RESPONDED TO

6
In order to support the National Society in 2019, IFRC plans to ensure continued provision of health services to the targeted communities, including health promotion. Specifically, IFRC plans to focus on:

1. Mobilization of volunteers
2. Training of volunteers in community-based health and first aid, disease prevention and epidemic control
3. Further development of the community-based health and first aid plans and approach
4. Social mobilization and immunization campaigns, especially against polio and measles
5. Further rehabilitation of health facilities
6. Nutritional support to communities through mothers groups
7. Strengthening traditional birth attendance referrals
8. Development of contingency plans to respond to epidemics and pandemics
9. Management of disease surveillance system
10. Health promotion in schools

Additionally, the needs of communities in urban slums in Lagos will be addressed. These slums suffer from the lack of access to safe water and sanitation facilities, poor services as well as from drugs and alcohol abuse, especially among the youth, resulting in major public health problems.

The above activities will contribute to the realization of Nigeria’s set targets for the SDG 3 related to healthy lives and promotion of well-being for all at all ages. They are aligned with the 2017–2020 Africa Road Map commitments related to the community based health and first aid and capacity building and training of the National Society staff and volunteers.
Nigeria has made substantial progress in developing policies and strategies for water supply and sanitation service delivery, but faces major challenges in translating these into action. According to 2013 data, about 70 million people (in the population of over 180 million), had no access to safe drinking water and over 110 million had no access to improved sanitation. Open defecation at 28.5 per cent represent a grave public health risk. According to UNICEF (2013), an estimated 124,000 children under the age of 5 die because of diarrhea, mainly caused by unsafe water, sanitation and hygiene. Lack of adequate water and sanitation also causes respiratory infections and undernourishment. In its recent WASH\textsuperscript{13} assessment, OCHA has identified a vicious cycle, in which unsafe water, inadequate hygiene and poor sanitation result in vulnerable individuals (particularly children under five and pregnant or breastfeeding women) that become acutely malnourished after suffering repeatedly from diarrheal diseases. The overview further highlighted that congestion, poor infrastructure and poor water and sanitation conditions were the main cause of the 2017 cholera outbreak in the northeast Nigeria that affected more than 5,000 people, resulting in more than 60 deaths.
With support from IFRC, the Nigerian Red Cross Society has been able to provide WASH services to communities affected by multiple disasters. In 2014, response to a complex emergency reached out to a total number of 31,560 individuals with assistance that included WASH messages and access to water and sanitation. In 2015, through cholera response, the National Society was able to provide support to 15,000 individuals through WASH interventions. With the 2017 One International Appeal related to the complex emergency in the northeast and with the 2018 response to floods, NRCS continued to make strides in providing access to safe water, sanitation facilities and education. However, a great need for WASH remains in the northeast and in the urban slums. In 2019, the National Society plans to continue ensuring safe access to water and sanitation facilities and to increase hygiene promotion amongst targeted people. In line with the initiative of the World Health Organization to end cholera, it will be also focusing on waste water management and on raising awareness against cholera. In coordination with the existing WASH partners, the National Society will adopt the community-led total sanitation and participatory hygiene and sanitation transformation (PHAST) approach and the so-called hardware support. In urban areas, the National Society will adopt urban WASH activities, including awareness-raising.

**HOUSEHOLDS PROVIDED WITH SAFE WATER** 6,250

**VOLUNTEERS TRAINED IN HYGIENE PROMOTION** 312

**VOLUNTEERS TRAINED IN LATRINE CONSTRUCTION** 312

**HOUSEHOLDS REACHED WITH MESSAGES PROMOTING PERSONAL AND COMMUNITY HYGIENE** 6,250

**PEOPLE PROVIDED WITH KNOWLEDGE ON AND ACCESS TO IMPROVED EXCRETA DISPOSAL** 73,500
Within that context, IFRC will provide support to the National Society with the following activities:

1. Training of volunteers i.e. hygiene promoters
2. Community engagement through mass media, mobile cinema, community meetings and door-to-door sensitization
3. Development and dissemination of information, education and communication materials related to hygiene
4. Awareness-raising campaigns in schools and school sanitation clubs
5. Water quality testing
6. Drilling of boreholes
7. Borehole rehabilitation
8. Organization of community-based management committees for all water points
9. Training in water points maintenance and local resource mobilization
10. Construction of latrines with hand washing facilities at homesteads and in public places, hospitals and schools

The above activities will contribute to the realization of Nigeria’s set targets for SDG 6 related to ensuring availability and sustainable management of water and sanitation for all.
AREA OF FOCUS

PROTECTION, GENDER AND INCLUSION

According to the 2018 Humanitarian Needs Overview, about 2.9 million people are at risk of gender-based violence. Female-headed households, widows, women with disabilities and adolescent girls remain the most at-risk groups. At least 30 per cent of internally displaced persons are currently separated from their families, and 57 per cent of these have no contact with family members. In addition to the distress this has caused, family separation has a negative impact on livelihoods, as separated family members (especially men and children) were providers to the households before the crisis. On average, 30 per cent of households are now headed by women, in some locations this number is much higher. The overview further highlights that there are around 6,000 unaccompanied minors, 5,500 separated children and 15,000 orphans among other groups of children at risk or affected by protection concerns. According to UNFPA, sexual violence, including rape, is a defining characteristic of the ongoing conflict, with 6 out of 10 women in the northeast having experienced one or more forms of gender-based violence. Women, boys and girls are at particular risk, with many reports of survival sex in exchange for food, money and freedom of movement.

The Nigerian Red Cross Society does not have much experience in protection programming. However, they have been mainstreaming gender within other activities, for example, by considering mostly women as beneficiaries in their programmes. In the forthcoming period, the National Society will focus on protection as a key component of its response in the northeast and will pay attention to the sexual and gender-based violence (SGBV), sexual and reproductive health, maternal death and disability, early and forced marriage, rape, trafficking and sexual exploitation and abuse. In support of the National Society, IFRC plans to engage in:

1. Training of staff and volunteers in sexual and gender based violence
2. Training of women and girls in livelihoods
3. Peer training of youth as agents of behavioural change
4. Provision of dignity kits and sanitary wear for women and girls
5. Educational programmes
IFRC also recommends a National Society gender focal person with the task to ensure gender as an integral part of disaster response and other programming in the future. The task of the gender focal person would also include organization of safe spaces for women, provision of dignity kits and community dialogue on SGBV.

The above activities will contribute to the realization of Nigeria’s set targets for SDG 5 related to gender equality. They will also contribute to the fulfilment of the commitments of the 2017–2020 Africa Road Map.

**National Society Staff and Volunteers Trained on Sexual and Gender-Based Violence**: 200

**Girls and Women Trained in Livelihoods**: 400

**Girls and Women Regularly Provided with Dignity Kits and Sanitary Wear**: 400

**1 Peer Training Organized in YABC/ABC**: 1

**Educational Programmes Implemented**: 2

**Outcome**: Communities become more peaceful, safe and inclusive.
In 2017, the National Society formed a new management team. The new secretary-general, supported by the governance, pursues an ambitious agenda of organizational reform and programmatic growth. For example, the National Society has ensured government financial and in-kind support as well as annual auditing and financial statements. It has accepted a Movement recognized self-assessment process, annual reporting using the Federation-wide reporting system and developed youth policies and programmes. Based on the multiple assessments conducted over the past 6 years, the National Society has developed and adopted a 2018–2019 Road Map for Sustained Institutional Growth. Focused on “People, Participation and Performance”, the road map looks to holistically address the organization’s institutional weaknesses in leadership and management, systems and procedures, quality of service, credibility and integrity as well as resource mobilization. In addition to improving financing, human resources and procurement systems, the National Society focuses its efforts on diversification and sustainability of its funding streams. Currently, the National Society generates income by offering commercial first aid, through membership fees and corporate donations and partnerships. IFRC seeks to mobilize support and technical expertise for these efforts and will provide guidance and support in:

1. Strengthening domestic fundraising in particular through assets and services such as commercial first aid
2. Volunteer management and training
3. NRCS finance, human resources and logistics systems
4. International and external communications
5. Roll-out of organizational capacity assessments in at least 12 branches
6. Implementation of youth policies and programmes
7. Updating the National Society statutes
8. Governance and management on-boarding and training
9. Development of the National Society strategic plans for 2020
10. Development of the risk management framework
11. Ensuring compliance with the Compliance and Mediation Committee dashboard

**OUTCOME**

THE NATIONAL SOCIETY HAS THE NECESSARY COMPETENCES AND CAPACITIES TO PLAN AND PERFORM.
STRATEGY FOR IMPLEMENTATION

ENSURE EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT

Strong surge capacity is a key component of effective disaster management. To develop further this capacity of the Nigerian Red Cross Society, IFRC will organize trainings for the National Society response teams at national and district levels in various key areas, including cash based interventions, community engagement and accountability, WASH, health and general disaster management. Additionally, IFRC will support the National Society in developing a database to include all trained members of the national disaster response team (NDRT), deployable throughout the country. To ensure improvements in response capacity based on lessons learned in actual interventions, IFRC will also assist the National Society in setting up a data management system at headquarters and branch levels. While NRCS system of data collection and assessment in times of disasters and crisis already has strong foundations, it will be further strengthened in the area of data analysis and reporting.

To ensure coordination, complementarity and sharing, IFRC and other Movement partners will hold learning meetings with the National Society. In support of learning and improved implementation, they will also couple these meetings with joint assessments and evaluations. To maintain effective technical cooperation, IFRC will be actively involved in further refining of the existing Movement coordination framework.

OUTCOME

THE NATIONAL SOCIETY HAS THE NECESSARY COMPETENCES AND CAPACITIES TO PLAN AND PERFORM.
STRATEGY FOR IMPLEMENTATION

INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS

The National Society and IFRC will continue to contribute to regional and global forums such as the Economic Community of West African States and those discussing the issues of climate change or internally displaced persons. At the same time, the Nigerian Red Cross Society is primarily donor dependent, has limited resources and enjoys limited recognition in the country. In order to further develop its external image and diversify and develop its funding base, the National Society needs support in the areas of communication and resource mobilization, including development of the resource mobilization strategy. Within that context, the National Society will explore the Islamic financing possibilities, the potential of commercial first aid in revenue generating as well as the potential of the new National Society web site in crowdsourced financing. IFRC will support the National Society in content development.

In addition, IFRC and other Movement partners will support further research into the potential of Nigerian diaspora in the United States and Great Britain and assist the National Society in the process of gathering data and information related to humanitarian risks in the country for potential donors. IFRC will also assist the National Society in further partnership development with domestic private partners as well as international partners such as mPharma®, Ecobank or Mempower.

OUTCOME

IFRC AND THE NATIONAL SOCIETY USE THEIR POSITIONS TO INFLUENCE DECISION-MAKING AT ALL LEVELS AND EXPAND THEIR REACH.
ENDNOTES

1. 2019 Country Operational Plan outlines the results that IFRC wants to achieve in collaboration with the Nigerian Red Cross Society;
2. HIV — Human immunodeficiency virus;
3. WASH – water, sanitation, hygiene;
4. Other national coordination platforms are the Inter-Agency Emergency Preparedness Working Group (IA-EPRWG), Humanitarian Country Forum (HCF) and various sector working groups;
5. UNDSS – UN Department of safety and security;
6. ECOWAS – Economic Community of West African States;
7. CILSS — Cadre Harmonisé – Harmonized framework for the analysis and identification of areas at risk and vulnerable groups in the Sahel, Permanent Interstate Committee for Drought Control in the Sahel;
8. FEWS NET – Famine Early Warning Systems Network;
9. SMCC – Strengthening Movement Coordination and Collaboration;
10. The goal of 1 Billion Coalition for Resilience initiative — 1 billion people, at least one person in every household, every school or business, and every community taking action to enhance their own and their community’s resilience;
11. The purpose of the Road Map is to demonstrate the commitment of IFRC in Africa to realizing its ambitious plans to accompany National Societies in their development and delivery of services. The Road Map is not a strategic or operational plan. It summarizes the rationale for its strategic and operational plans and provides key milestones on the way to success. The Road Map complements the IFRC’s Global Strategy 2020 and aligns its contributions in Africa to the SDGs;
12. IPC scale or the Integrated Food Security Phase Classification: phase 3 — acute food and livelihoods crisis; phase 4 — humanitarian emergency;
13. CBHFA – community-based health and first aid;
14. WASH – water, sanitation and hygiene;
15. Global Road Map to 2030;
16. YABC/ABC – Youth as agents of behavioural change;
17. A data and cost management platform connecting African consumers to accessible and affordable high-quality medications;

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