



# EMERGENCY APPEAL

## North West and North Central Nigeria | Hunger Crisis 2021

Appeal №: MDRNG032	People to be assisted: 200,000 (33,000 households)	Appeal launched: 28/06/2021
	DREF allocated: Loan to appeal 500,000 CHF	18 months duration
Glide №:	IFRC Funding requirements: 4,130,372 Swiss francs	Appeal ends: 31/12/2022

This Emergency Appeal seeks a total of **4.1 million Swiss francs** to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to support the Nigeria Red Cross Society (NRCS) to deliver humanitarian assistance to **200,000 people (33,000 households) over 18 months** to address the current hunger crisis in the North West and North Central states of Nigeria. The operation will focus on: Livelihoods & Basic Needs, Health and Nutrition, Psychosocial Support, Water, Sanitation and Hygiene (WASH), Disaster Risk Reduction (DRR), Protection, Gender & Inclusion (PGI) and National Society Development. A DREF loan to this Appeal is requested for a total of 500,000 CHF. The planned response reflects the current situation and information available at this point of the evolving operation and will be adjusted based on further developments and more detailed assessments.

This Emergency Appeal will contribute to **IFRC's Pan-Africa Zero Hunger Initiative**. It will contribute towards lifting vulnerable people in Africa from poverty and eradicate dependence on food assistance, by investing in food production and developing low cost, effective, innovative, and smart livelihood alternatives that guarantee long-term food security. The Pan-Africa Zero Hunger Initiative is aligned with SDG#2, the African Union Regional Initiative on 'Africa's Commitment to End Hunger by 2025' and Agenda 2063, Governmental plans, and other agencies' programmes.

## A. THE DISASTER AND THE RED CROSS RED CRESCENT RESPONSE

### Situation overview

Food security is a basic human need, and fighting hunger is one of the greatest challenges of this century not least in Nigeria. According to an analysis done in October 2020, about 9.8 million people were estimated to be in need of external food assistance from October to December 2020 in the country. This is a significant increase from the estimated 4 million people during the same months in 2019. This number is projected to dramatically increase further to 12.8 million during the lean season from June to August 2021.

The North East of the country has a high level of food insecurity affected by long running armed conflict and violence. Nigeria's North West region – particularly states of Zamfara, Sokoto, and Katsina – has in recent years seen a deterioration in the security situation, marked by an increase in banditry and violence. The crisis has accelerated during the past years because of the intensification of attacks and has resulted in widespread displacement across the region. Reportedly, nearly 280,000 people are displaced in the three states as of January 2021. Disrupted livelihoods and reduced market access have lessened households' capacity to meet their essential needs.

It is reported<sup>1</sup> that in North West Nigeria, 2.53 million people are projected to face acute food insecurity (Phase 3 and above) in June – August 2021 lean period. An estimated five percent of the total food insecure population (138,476 individuals) are internally displaced persons (IDPs), of which 26,000 are in the emergency acute food insecurity phase (CH phase 4). Zamfara North, Katsina Central and Katsina South are projected to be in Crisis phase between June and August 2021. The higher prevalence of acute food insecurity mainly reflects the adverse effects of measures to contain the COVID-19 pandemic on the supply chain, the escalation of armed and community conflicts, some localized cereal production shortfalls, the unfavourable macro-economic conditions, and high food prices.

<sup>1</sup> [WFP Essential Needs and Nutrition Analysis - Northwest Nigeria \(Zamfara, Sokoto, Katsina\) February 2021 Assessment Report](#)

## Summary of Red Cross Red Crescent response to date

NRCS has a strong presence and capacity in implementing relief activities in the North West and North Central states. Activities conducted by the National Society (NS) during the COVID-19 countrywide response in 2020 - 2021 are the latest that covered the North West and North Central states.

The IFRC supported NRCS's COVID-19 response activities in states affected by lockdown in North West, Central and East to reduce food insecurity. In 2020 and 2021 a total of 4,992 households (29,952 people) were supported through cash assistance. The cash-based intervention was unrestricted so they could use it as per their priorities, including food, health and hygiene related issues, and children education.

The NRCS response to COVID-19 is supported through the [IFRC global appeal](#), which is facilitating and supporting the NS to maintain critical service provision, while adapting to the COVID-19 operating environment. IFRC continuously assesses how emergency operations in response to disasters and crises should adapt while in parallel provides necessary guidance to the NS operations and leadership. NRCS will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of NS volunteers and staff. For more information, please consult the [COVID-19 operation page IFRC Go platform](#).

The IFRC has also supported NRCS in North West and North Central states affected by floods from October 2020 until March 2021 through a [DREF](#) allocation with focus on Livelihoods and the provision of unrestricted and unconditional cash to 2,000 most vulnerable flood-affected households (approximately 12,000 people) to support their basic food and household needs. From November 2020 until April 2021 another [DREF](#) allocation supported the operationalization of the NRCS Yellow Fever response, targeting 900,000 people.

The International Committee of the Red Cross (ICRC) supports people affected by armed conflict, in the North East, the North Central and the South states. In 2020, NRCS with support from ICRC provided support in North-eastern Nigeria with food distribution. In secure areas with functional markets, they supported vulnerable population with cash for food, distribution of essential household items, seeds and tools. ICRC also supported NRCS COVID-19 activities with hygiene promotion activities and improved access to water and sanitation.

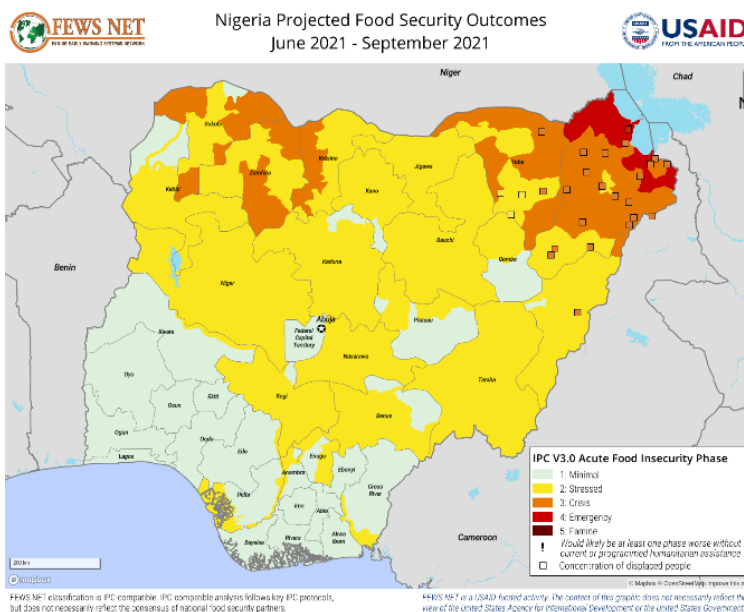
In complementarity with the support to victims of crises and internally displaced persons in the North East and North Central region, IFRC will support the NRCS in addressing food insecurity and its effects in the most affected parts of the North West and North Central states of Nigeria.

## B. THE OPERATIONAL STRATEGY

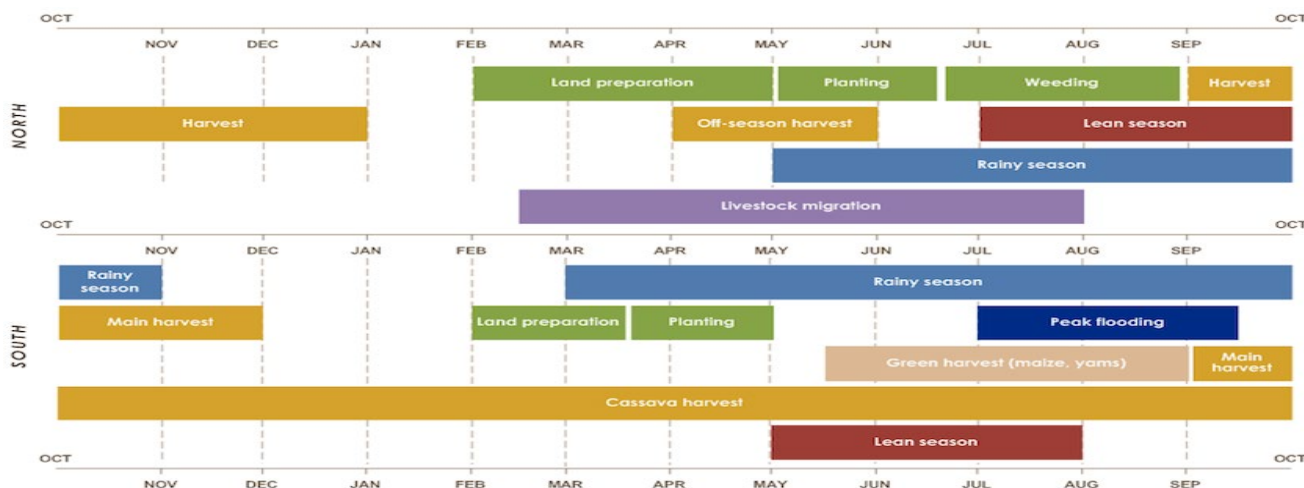
### Needs assessment

The IFRC and the NRCS have identified needs and gaps in the supply of humanitarian assistance across the North West and North Central states. The following section identifies the basic needs in target states of Katsina, Kebbi, Sokoto and Zamfara in the North West and Benue, Nasarawa and Niger in the North Central region. The joint needs analysis of NRCS and IFRC is based on secondary data gathered from different sources and primary data gathered from preliminary assessments. Key external references are [UNHCR protection monitoring assessment report for the North-Western Nigeria \(Jan 2021\)](#) that provides data on the protection concerns of the IDPs inside the camps, camp like settings and host community in North West states of Sokoto, Zamfara and Katsina. Also referenced is the WFP [Essential Needs and Nutrition Analysis - Northwest Nigeria \(Zamfara, Sokoto, Katsina\) February 2021 Assessment Report](#) and latest [OCHA Situation Report](#).

The [Cadre Harmonize analysis](#): The prevalence of food insecurity and hunger in Nigeria is largely present in the North East, North Central and North West states. In North West Nigeria, 2.53 million people are projected to face acute food insecurity (Phase 3 and above) during the lean season (Jun to August 2021), according to the March 2021 Cadre Harmonize analysis. It is reported<sup>2</sup> an estimated five percent of the total food insecure population (138,476 individuals) are internally displaced persons (IDPs), of which 26,000 are in emergency phase (Cadre Harmonize phase 4). Conflict/insecurity, high food prices and abduction are listed as main shocks faced by both IDPs and general population in the North West. Data imagery analysis has revealed that since 2017, conflict has caused widespread settlement damage and severe cropland loss in Sokoto North and Zamfara North.

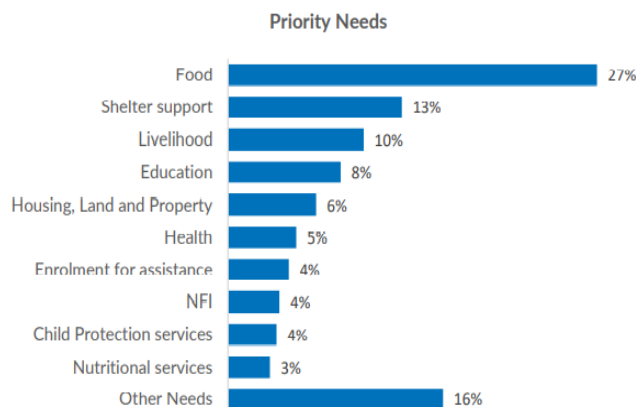


IPC 3 Food Insecurity situations in North West and Central states and seasonal calendar



**Insufficient Food:** According to WFP four out of five IDPs have inadequate food consumption as opposed to only 29 percent of the general population. UNHCR reports that 94% of the key informant interviews (KIIs) mentioned not having sufficient food in Katsina State, Sokoto 88%, and Zamfara 78%; reasons for their response include inability to access their farms due to banditry. People have resorted to negative coping strategies like begging, transactional sex, cutting of food rations, etc. Food availability, access and improved utilization are the top priority needs identified by the KIIs in all the states.

**Livelihoods:** In the North West, the majority of the IDPs are predominantly farmers engaged in agriculture and livestock. They are not currently engaged in any major livelihood activities due to lack of access to farmlands for fear of attacks and rustled livestock. There are opportunities for the affected population to be re-engaged in farming as the rains have begun. The Government is doing a lot in brokering peace with the communities and people are returning to their homes. IDP's can equally be supported to rent farmlands or work during the dry season where farmlands are available.



Priority needs as highlighted from the KII reported by UNHCR assessment

<sup>2</sup> Essential Needs and Nutrition Analysis - Northwest Nigeria (Zamfara, Sokoto, Katsina) February 2021 Assessment Report

**Health and Nutrition:** Nigeria remains one of the worst-hit by malnutrition in the Sub-Saharan region, with children and women in their reproductive age most affected. The states in northern Nigeria are the most affected by two forms of undernutrition - stunting and wasting. High prevalence of malnutrition poses significant public health and development challenges for the country. Stunting indicates a long-term nutritional problem in the country. An estimated 2 million children in Nigeria suffer from severe acute malnutrition (SAM), but only two out of every 10 children affected is currently reached with treatment. Seven percent of women of childbearing age also suffer from acute malnutrition. Exclusive breastfeeding rates have not improved significantly over the past decade, with only 17 percent of babies being exclusively breastfed during the first six months of life. Just 18 percent of children aged 6-23 months are fed the minimum acceptable diet.

The North West has the highest proportion of children who are stunted (57 percent), and lowest in the South East (18%). The proportion of children who are wasted is approximately twice as high in the North East (10%) and North West (9%) as in other zones (4% - 6%). At the state level, Kebbi has the highest proportion of stunted children (66%), and least prevalent in Anambra (14%). The prevalence<sup>3</sup> of stunting, wasting and underweight is almost twice as high among children in rural areas (45%, 8% and 27% respectively) as among those in urban areas (27%, 5% and 15% respectively). Although chronic and seasonal food insecurity occurs throughout the country, and is exacerbated by volatile and rising food prices, the impact of conflict and other shocks has resulted in acute levels of food insecurity in the North West region. Diet-related non-communicable diseases are also on the rise in Nigeria due to urbanization, lifestyle transition, socio-cultural factors, and poor maternal, foetal, and infant nutrition. The nutrition situation may also be negatively affected by the COVID-19 pandemic and its impact on socio-economic factors.

The rising cholera cases reported in the country may also aggravate the situation as people who are malnourished are more likely to develop cholera infection while cholera is more likely to spread in places where malnutrition is common. Since the beginning of June there has been an increase in the number of new cases of cholera reported in Nigeria, with three states in the North (Zamfara, Bauchi and Kano) accounting for 96% of 2,117 cases reported in weeks 23 and 24<sup>4</sup>.

**WASH:** In Nigeria, Sokoto and Kebbi States have the lowest levels of access to basic water services at 38 percent and 39 percent, respectively. Access to basic sanitation is also low in Kebbi, Zamfara and Sokoto States, at 35 per cent, 38 percent, and 41 per cent, respectively. Only five percent of people in Sokoto and one percent in Kebbi have access to safely managed water services. This severe shortage of clean water supply, toilets, and handwashing facilities in households across Nigeria presents a formidable challenge. Poor access to improved water and sanitation in Nigeria remains a major contributing factor to high morbidity and mortality rates among children under five. Contaminated drinking water and poor sanitation conditions result in increased vulnerability to water-borne diseases including diarrhoea which leads to deaths of more than 70,000 children under five annually. Lessons from the COVID-19 pandemic have also reinforced the importance of adequate and safe water, basic sanitation, and proper hygiene practices to stem the spread of the disease, including in Nigeria.

The rising cholera cases being reported in the country may aggravate the situation as people who are malnourished are more likely to develop cholera infection while cholera is more likely to spread in places where malnutrition is common. Indeed, since the beginning of June there has been an increase in the number of new cases of cholera reported in Nigeria, with three states in the North (Zamfara, Bauchi and Kano) accounting for 96% of cases reported in weeks 23 and 24<sup>5</sup>. As of 16 June 2021 (*Epi week 24*), 10,833 suspected cholera cases, including 289 deaths (CFR = 2.7%) have been reported from 14 states. The table below shows the number of cases reported among the targeted States for this Appeal.

**Mental Health and Psychosocial Support:** International organizations working in Nigeria commonly acknowledge that the mental health and psychosocial needs of conflict-affected people are not met due to the instability of the situation, limited resources, lack of support from authorities and family and community separation. Limited access to health, social and educational services, especially but not only for displaced people, worsen an already critical situation. In Nigeria, where the mental health care system is neglected and mental health problems are still negatively perceived and seldom discussed, especially in the more conservative areas like the northern part of the country, people affected by conflict-related violence are unlikely to find proper care. This complex context of protracted violence, abuse, killings, disappearances, enslavement, and imprisonment has had a profound impact on the mental health and psychosocial wellbeing of people in the north-east and north west. Millions of people have been affected, either first-hand or through indirect exposure to violence. Entire families and communities live in fear, fleeing their villages to seek refuge in safer areas, bigger cities, or neighbouring countries. Psychosocial support and counselling are critical in restoring the affected population dignity and respect as it enables the victims to build resilience to face their challenges and build their lives again.

<sup>3</sup> Nigeria demographic and health survey 2018

<sup>4</sup> Nigeria Centre for Disease Control (NCDC), [Situation Report Week 24](#), 16 June 2021

<sup>5</sup> Nigeria Centre for Disease Control (NCDC), [Situation Report Week 24](#), 16 June 2021



**Impact of COVID-19:** The COVID-19 situation has worsened the condition in these targeted states. The population has further been exposed to risk of food insecurity, disease outbreaks and lack of access to basic needs and infrastructure. The closure of roads, restrictions on travel and unavailability of food items are some of the effects of the pandemic which impacted the livelihood condition of the vulnerable population in those states. It is also important to note the risk of lack of access to COVID-19 vaccines due to the insecurity situation. This must be taken into consideration while working towards plans to ensure that the most vulnerable are reached during vaccine distribution.

## Targeting

Targeting is based on current and projected IPC levels. It is projected that as the lean season sets in, food insecurity situations are more likely to deteriorate to IPC4. The following North West and North Central states have been identified as the most critical based on food insecurity indicators.

Region	Locations	Total Population	IPC Phase 3+ in lean season	Population by sector needs
North West	Katsina	8,708,355	1,384,925 (16%)	By most vulnerable targeted via an integrated approach with food security, health, WASH, PGI and DRR and NSD – based on 5% of the total affected.
	Kebbi	4,440,050	To be confirmed	
	Sokoto	5,748,004	299,291 (5%)	
North Central	Zamfara	4,838,804	710,893 (15%)	
	Benue	6,473,877	347,724 (5%)	
	Nasarawa	2,523,395	To be confirmed	
	Niger	6,318,008	1,029,284 (16%)	
			<b>Approx. 4m</b>	<b>200,000 (33,000 households)</b>

The most vulnerable groups will be targeted (Persons living with Disabilities, Elderly people, Pregnant and Lactating Women, Female and Child Headed Households amongst other vulnerabilities) in provision of Shelter, WASH, Health, Food and Livelihood support to address needs of the population. Further sector targeting is included in Section C.

Two needs assessments will be carried out to provide detailed information for this emergency operation. Initial Assessment: prioritized formulating different operational framework options for IFRC to support the NRCS in North West and North Central Nigeria. This assessment will be done as soon as this appeal is approved.

**Detailed Needs Assessment:** recommended by the initial assessment, this detailed need assessment will prioritize the identification of emergency needs of the communities, particularly those where little or no presence of humanitarian actors could be found. It will further propose a revision of the existing emergency plan of action/appeal. This assessment will follow up on the initial assessment and will be completed approximately one month after the appeal has been approved,

### Global COVID-19 pandemic:

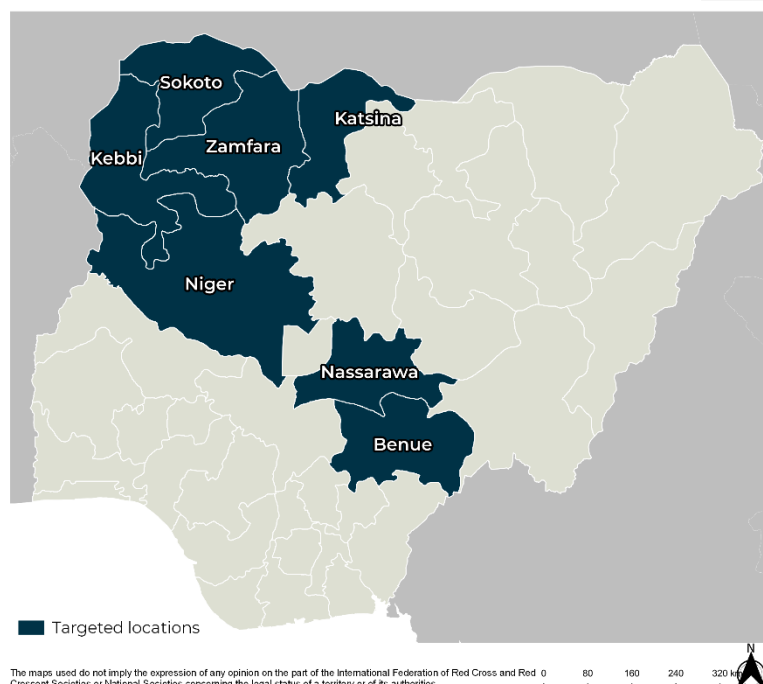
This operation is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. The National Societies' response to COVID-19 is supported through the [IFRC global appeal](#), which is facilitating and supporting them to maintain critical service provision while adapting to COVID-19. The National Societies will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of National Societies volunteers and staff. For more information, please consult the [COVID-19 operation page IFRC Go platform](#).



+CIFRC

25th June 2021

North West and North Central Nigeria  
Hunger Crisis 2021



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.

## Coordination and partnerships

### Overview of Red Cross Red Crescent Movement Actions in-country

The NRCS will lead the implementation of all activities supported by this Emergency Appeal (EA). The EA will be implemented in close coordination with the ICRC and other in-country IFRC members. As an auxiliary to the public authorities, NRCS is a primary national partner for responding to disasters across the country and facilitates disaster preparedness activities. The IFRC provides technical operational support to the National Society through the operations team in Nigeria that reports to the West Coast Country Office Delegation in Abuja. The ICRC has a country delegation with three sub-delegations in Port Harcourt, Jos and Maiduguri and an office in Kano. In-country IFRC members supporting NRCS are the British and Italian Red Cross Societies.

### Overview of other actors' actions in-country

At the national level, the Interagency Emergency Preparedness and Working Group and Humanitarian Country Team (HCT) are the two coordination mechanisms. The National Emergency Management Agency coordinates emergencies at national level while the State Emergency Management Agencies at the states level.

The proposed response will complement efforts of current stakeholders and agencies providing support to food security, identify and fill up gaps. This will be informed by stakeholder mapping, assessments and regular coordination with relevant stakeholders actively supporting and responding to food insecurity situation in the operational areas.

## Capacity analysis, risk analysis and scenario planning

The NS has branches in all 36 states and the Federal capital territory (FCT) with more than 800,000 volunteers across the country. The NS has Logistics, Human Resources and technical capacities to continue to deliver humanitarian assistance including food and livelihood assistance) in North West and Central states. The pool of volunteers in the communities in the regions are quite familiar with the context and are trained to respond.

### Operational risks

Security risks to staff, volunteers, and beneficiaries in vulnerable locations are a concern. These locations include Jigawa State, Kano, Kaduna, Katsina, and Kogi in North West, and North Central Nigeria. Protection risks include Sexual and Gender Based violence (SGBV), and Sexual Exploitation and Abuse (SEA) at community levels. Cash and Voucher Assistance (CVA) related risks may include extortion and theft. The rainy season in Nigeria is already approaching and some of the locations are on the list of vulnerabilities to flooding. In case of floods, this may impact on the operation in different ways. However, the National Society is well capacitated to carry out flood preparedness activities and with support from the IFRC, to respond in such cases. Flood awareness will be embedded in the communication messaging before and during the operation.

The NRCS and IFRC security units will work with the Nigerian Government Security operatives and other Humanitarian Security agencies (such as UNDSS and INSO) to constantly provide security updates and advice to team members. The Security Department of the IFRC will be engaged in security assessments involving threat identification, vulnerability assessment, facility assessment, stakeholder identification, engagement, and management. Location specific measure to mitigate and minimize residual risk will be developed. The security department will liaise with programmes to train team members on the key humanitarian security strategy of acceptance that would check the conduct of staff and volunteers in engaging community members in their programme activities to do no harm. The Safer Access Framework (SAF) will be implemented. The outputs of SRA will be used to determine operational areas and, SAF dissemination and orientation sessions to staff and volunteers to promote safety and security of lives and property in a robust manner and guarantee continuity of the operations in difficult terrains. It will be ensured that all volunteers involved in this operation are provided with insurance covers (Volunteer insurance) using the RCRC guidelines.

### Scenario Planning

Scenario	Humanitarian impact	Potential Response
<b>Scenario 1:</b> Insecurity is tackled in the coming months and sufficient rainfall is recorded	Security situation Improves, and the affected population returns to their communities. Access to water and sanitation improves. People can grow crops to reduce food insecurity and malnutrition	Response will be limited to the current Emergency Appeal to ensure that community is set on the path to recovery.
<b>Scenario 2:</b> The insecurity persists and affects other regions within the coming months. The COVID-19 pandemic worsens within the next few months with limited access to vaccines	More Severe Acute Malnutrition cases are recorded. More community displacement of population is recorded. WASH situation worsens due to lack of water	More emergency and recovery assistance will be required. The EA could also be extended to accommodate other regions emergency response activities.

<b>Scenario 3:</b> Insecurity worsens, and flooding emerges, cholera outbreak emerges due to poor WASH facilities, in addition to already ranging COVID-19 Pandemic	Death toll rises. Malnutrition cases worsen. High risk of famine (IPC 5)	A larger mobilization of resources to save lives and protect human dignity through the EA, while pursuing a longer-term recovery and resilience actions through the Pan-African Food Security Initiatives.
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## C. PROPOSED AREAS FOR INTERVENTION

### Overall Operational objective

The EA will support NRCS in addressing the situation of acute food insecurity with an integrated approach supporting 200,000 people (33,000 households) in the most affected parts of the North West (Katsina, Kebbi, Sokoto and Zamfara) and North Central (Benue, Nassarawa, and Niger). Promoting localisation, the entry points for response are the NRCS Branches. The Appeal will ensure the Branches are involved in the decision-making and supported through NSD activities.

## STRATEGIC PRIORITIES



### Livelihoods and basic needs

**People targeted: 66,000 (11,000 households)**

Male: 29,040

Female: 36,960

**Requirements (CHF): 2,230,000**

**Proposed intervention: Communities, especially in disaster and crisis-affected areas, restore, and strengthen their livelihoods**

The operation will support most affected households through Cash and Voucher Assistance to allow them access immediate needs. Other support for longer term livelihood protection will be included through support to small farmers, developing income generating activities (IGAs), and the formation and/or strengthening of savings groups (as relevant). The National Society will conduct a Needs and Market Assessment in the targeted locations to determine market trends, understand the needs of the most vulnerable population, identify the resources needed and modalities and delivery mechanism to use in implementing activities within the response.

**Target groups:** The operation will target internally displaced persons (IDPs), returnees, and camp dwellers with multipurpose cash support, and support for protecting and rebuilding livelihoods. The target households will be consulted on who should be targeted as the primary recipient of cash and livelihoods support respectively to ensure that the support does not create tension in families. Livelihood grant beneficiaries are categorised into agricultural livelihoods and IGAs which are non-agricultural. Agricultural livelihood beneficiaries will be supported with agricultural inputs and equipment, while IGA beneficiaries will be supported with IGA set up grants to be given in two tranches upon satisfying the requirement for second tranche disbursement. IDPs who do not have access to land will be encouraged to engage in share cropping with the host communities.

**Multipurpose cash (Basic needs) – 5,000 households:** The multipurpose cash will target vulnerable persons who, for example, do not have the capacity or will not be supported by the agricultural livelihoods or income generating activities (IGAs). IFRC and NRCS will work with the Nigeria Cash technical working group in ensuring that all cash transfer protocols are observed. The multipurpose cash support is set according to the minimum expenditure basket (MEB) in country and will be given in three tranches each of 32,500NGN (72.5CHF) to support them in meeting household basic needs.

**Livelihood Grants and Income Generating Activities (IGAs) – 6,000 households:** The livelihood grant will target 3,000 households for agricultural production and 3,000 households for IGAs. Agricultural livelihood beneficiaries will be supported with agricultural inputs and equipment worth 50,000NGN (112CHF). The agricultural inputs and equipment will comprise certified seeds (maize, rice, and beans), bio fertilizers and natural pesticides, knapsack sprayers, raincoats and rain boots. A seed fair will be organized, and farmers will access inputs and equipment's through a value voucher modality. The farmers will also undergo training in good agricultural practice (GAP) by volunteers that will be trained by government agricultural extension workers (AEWs). The agricultural livelihood beneficiaries will be classified into two groups (wet season farmers and dry season farmers). The wet season farmers will be targeted during the rainy season (May – October) while the dry season farmers will be targeted during the dry season (November – April). Dry season farmers will be supported with seeds, fertilizers and irrigation equipment worth 50,000NGN (112CHF).

IGA beneficiaries will be identified and supported based on their trades. Thus, a market assessment will be conducted to get information on costs of setting up various IGAs. The target groups will be supported with amounts commensurate with current market price of their IGAs. To boost the skills of beneficiaries, IFRC will support the NRSC to train beneficiaries on savings methodology, business skill development and financial management and discipline.

#### **Multipurpose cash activities:**

- Market assessment and market price monitoring
- Community Mapping/Beneficiary Selection
- Identification of additional Financial Service Providers (FSP) where required
- Community sensitization on programme aspects and general community engagement, and accountability (CEA) concerning relevant activity design and feedback mechanisms
- Distribution of multipurpose cash grants in three tranches
- Mapping of service provision in the targeted areas and referrals / reporting into these (including other humanitarian agencies, government actors/departments, and community structures). Supported by WASH and health sectors in this programme, the MPC recipients will be reached with awareness raising activities on hygiene and nutritional practices

#### **Livelihoods and IGA activities:**

- Food Security and Livelihoods needs assessment
- Community Mapping/Beneficiary Selection
- Baseline and market assessments
- Formation and/or strengthening of savings groups
- Training/Skills acquisition on financial linkage
- Support to government agricultural extension services



## **Health**

**People targeted: 200,000 (33,000 households)**

Male: 88,000

Female: 112,000

**Requirements (CHF): 442,000**

**Proposed intervention: The immediate risks to the health of affected population are reduced and the psychosocial impacts of the emergency are lessened**

Food insecurity has negative impacts on different aspects of life including health. To provide a complete response to the needs of affected population, NRCS will use the Community Based Health and First Aid (CBHFA) approach. The targeted communities will benefit from community-based health activities that will include training of community members/volunteers on ECV (Epidemic Control for Volunteers), first-aid training and community mobilization and awareness raising on health and hygiene promotion. Under the Health and Nutrition sector the response will focus on educating community members, especially women of childbearing ages, on the importance of positive health seeking behaviours, good nutrition and healthy diets, increase awareness on disease prevention, proper care and feeding of children, promote IYCF counselling and support for pregnant women, support in the screening and referrals of Severe Acute Malnutrition through community-based models like mothers' groups.

#### **The immediate risks to the health of affected population are reduced - planned activities**

- To provide a complete response to the needs of affected population, NRCS will use the Community Based Health and First Aid (CBHFA) approach to reach the target of 77,320 beneficiaries.
- Train 280 community volunteers on First Aid, and Psychological First Aid (PFA).
- Conduct ECV/RCCE training sessions for 420 volunteers who will conduct sensitization on community outbreaks and prevention.
- 140 Mothers' groups' members are trained on screening and referrals of SAM - each member of the Mother Club will be able to reach out to additional mothers with nutrition messages.
- Support 700 mothers with conditional supplementary feeding support and 210 mothers with homestead gardens. This would be in cash form for the PLW to purchase supplementary food. Nutrition experts will recommend food to be purchased. Volunteers will be trained, and CEA will be mainstreamed into this activity. Condition to benefit may range from pregnancy in a large household to lactating mothers with malnourished babies/children identified through MUAC screening.
- Undertake risk communication on COVID-19 - estimated 147,000 beneficiaries will be targeted with COVID-19 prevention messages.



### The psychosocial impacts of the emergency are lessened- planned activities

- The staff at the National Head Quarters (NHQ) and volunteers will be trained on how to provide Mental Health and Psychosocial Support (MHPSS) and PFA to relieve the victims from the effects of Psychosocial trauma and other related consequences.
- The training sessions will be cascaded down to the volunteers at community level to ensure the need for MHPSS is met in all states of the operation. Trained volunteers will conduct PSS activities through house-to-house engagements and community awareness raising as the need arises.
- Community PSS champions will be identified and supported to drive and provide community based psychosocial services for affected persons particularly women and the aged.



## Water, sanitation, and hygiene

**People targeted: 81,000 (13,500 households)**

Male: 35,640

Female: 45,360

**Requirements (CHF): 131,000**

### Proposed intervention: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase

It is globally recognized that food security challenges cannot be met until safe drinking water, sanitation, and hygiene (WASH) are available in the poorest communities. Considering the risk that people are exposed to due to intake of unclean water, the NRCS and the IFRC plan to embark on extensive campaigns and sensitization on water sanitation and hygiene practices. Under the WASH sector, response will focus on community hygiene promotion to households, and strengthening WASH knowledge and best practices. Community hygiene promotion will be done using the CEA approach in the communities in the target states. CEA activities will be conducted specifically for hygiene promotion while considering other community members during the activities.

#### Planned activities - Health and Hygiene promotion

Health and hygiene promotion through integrated messaging – community engagement in appropriate languages. The content of the messaging transmitted will include:

- Risk awareness – possible outbreak of diarrhoeal diseases (flood season) – cholera, malaria, etc.
- Risk communications activities / collection of community feedback, hygiene promotion, baseline and other assessments, data collection, etc.
- Access to WASH services - promotion of hand washing, safe water for consumption (promote household water treatment), use of mosquito nets and other vector control measures, proper disposal methods for excretions – use of latrines, etc.
- Distribution of menstrual hygiene kits.
- Households will be sensitized on the use of the CVA funds received for WASH items yet will ultimately be allowed to utilize the funds as they wish according to their respective needs.
- Rehabilitation and/or construction of potable water sources in communities where such do not exist especially in communities facing cholera outbreaks. These communities would be mapped out during the assessment phase and regular monitoring of the situation would be done. The IFRC will procure services to ensure that existing water sources that need rehabilitation is done and constructed in communities that do not have water sources. Availability of enough water plays a role in getting a community on track for food security.
- Rehabilitation and/or construction of latrines in communities that do not have functional latrines to reduce open defecation and risk of related health conditions. The IFRC will procure provision of such services to the communities identified in need.
- Establishment and training of local water and sanitation management structures to develop skills and capacity in Operation, Maintenance, and Management of WASH services within the target communities.



## Protection, gender, and inclusion

**People targeted: 66,000 (11,000 households)**

Male: 29,040

Female: 36,960

**Requirements (CHF): 40,000**

**Proposed intervention: Communities become more peaceful, safe, and inclusive through meeting the needs and rights of the most vulnerable**

During disasters, affected people are made more vulnerable by housing and economic insecurity. Vulnerable groups such as children, elderly, persons with disabilities, women, IDPs, and returnees are at higher risk of child abuse, SGBV including sexual exploitation and abuse. Acknowledging that women, girls, men and boys with diverse ages, disabilities and backgrounds have very different needs, risk and coping strategies, the operation will pay particular attention to protection and inclusion of vulnerable groups and on gender and diversity analysis. PGI will be included in the assessments, ensuring a gender and diversity analysis to guide the response with an understanding on different needs and capacities. There is a need to protect each of these groups and incorporate their different needs into the programming. Timely identification of protection risks and violations through systematic and coordinated protection monitoring and analysis will inform preventative, responsive, and remedial interventions, and enhance accountability. The activities will include the protection component to address risks of gender-based violence against children, girls, and young unaccompanied women. PGI will be mainstreamed throughout the intervention to ensure communities dignity, access, participation and safety. All sectors will seek to meet the PGI minimum standards in emergencies.

### PGI planned activities

- Organize training of trainer's sessions on minimum standards for protection, gender and inclusion in emergencies, PSEA, and IFRC's policy on PSEA (headquarter and regional/provincial staff).
- Provide training to staff and volunteers in IFRC principles and approach to migration and displacement.
- Follow up and provide technical support in compliance with IFRC minimum standards for protection, gender, and inclusion in emergency programming, closely linked with Movement wide commitments and minimum actions for CEA.
- For sexual and gender-based violence (SGBV) identify and share safe referral pathways at local level with volunteers, staff and communities.
- Collect and analyse sex-age and disability disaggregated data in the needs assessments and any other collection of information.
- Develop community-based information, education, and communication initiatives and materials on culture of non-violence and peace (discrimination, violence, and exclusion, including SGBV and Child Protection) and develop individuals' ability to address them.
- Assess and monitor the overall response for PGI risks and trends and adjust and advise accordingly throughout the response cycle and in close collaboration with operational leadership. The assessment results will be built into the continuous planning and design across the operation.



## Disaster Risk Reduction

**People targeted: 57,660**

Male: 25,371

Female: 32,289

**Requirements (CHF): 35,000**

**Proposed intervention: Communities in high-risk areas are prepared for and able to respond to disaster**

The operation will contribute to disaster preparedness of communities through community-based disaster risk reduction activities that will be carried out through mobilizing communities for risk assessment (VCA) for prevalent risks and identifying mitigation strategies. Involving community resilience committees and other community representatives in analysing risks and community preparedness action plans, training of community members in first aid, disaster preparedness and response, and establishing multi-hazard early warning systems will contribute to reducing risks and enhancing their preparedness. Institutional preparedness of the NRCS for preparing and responding to disasters will be an essential element in reducing risks in vulnerable regions. As such, the operation will ensure that the NRCS national and branch disaster response teams upgrade their skills and respective preparedness, and contingency plans are in place and tested.

**Planned activities**

- Concrete actions could include conducting VCA assessment in places where communities are returning, availing funds to implement community actions plans at community level, promote community cohesiveness and peace building, community friendly multi-hazard early warning system in collaboration with the local government, ensure livelihood and food security interventions are risk and climate smart, and promote cross-sectoral approach to holistic risk reduction.
- Already there are successes recorded using CEA as a cross-cutting approach. This will be leverage on and have a quantum leap in other areas.

**ENABLING ACTIONS****Influencing others as strategic partners****Requirements (CHF): 158,000****Coordination with the authorities and humanitarian actors**

IFRC and NRCS are observers in the Humanitarian Country Team (HCT) and a member of the InterCluster Coordination Team (ICCT), and relevant IASC Clusters and inter-agency working group meetings/forums, including the Food Security Cluster. Cluster and working group members include NGOs, UN agencies and public authorities.

**Strengthening Coordination and Accountability****Requirements (CHF): 527,000**

**Planning, Monitoring, Evaluation, & Reporting (PMER):** The NRCS through its PMER department, will oversee all operational, implementation, monitoring and evaluation, and reporting aspects of the operation. The responsibility for day-to-day monitoring of the operation will be with NRCS provincial branches but supervised by the NRCS headquarters to ensure appropriate accountability, transparency, and financial management of the operation. The NRCS PMER team will develop an M&E plan to ensure regular and timely monitoring of all activities in the operation, an indicator tracking table (ITT) and activity tracking table (ATT) will be in place for close monitoring. A reporting template will be updated to report on set indicators at all reporting levels with a reporting line clearly defined for an effective tracking of activity implementation. A beneficiary satisfaction survey (BSS) will be conducted, and outcomes used to inform a lesson learnt exercise at the end of the operation which will facilitate reflection on lessons learned from the operation; a report of the workshop will be widely disseminated. The IFRC delegation office in Abuja through the PMER Senior officer will also provide technical support in programme management to ensure that the operational goals are met.

**Information Management:** The PMER, CVA and CEA will engage the use of digital data collection applications and analysis platforms. Data enumerators and volunteers will be trained on the use of data collection systems like Kobo collect, Open Data Kit (ODK) and other systems to collect and analyse data. Data collection applications are mobile applications that make it possible to collect data from a smartphone, tablet, or iPad. One of the main advantages of data collections applications is the possibility of gathering data offline or while on-the-go. Offline forms allow researchers that are working in places with unreliable internet to store a backup of their data on their mobile device and upload it once an internet connection is available. IM will keep close coordination with heads of sectors and partners and develop an efficient data collection system. All key emergency information products and data are available online on the IFRC GO Platform ([go.ifrc.org](http://go.ifrc.org)). GO is a platform developed by IFRC to connect information on emergency needs with the right response.

**Community engagement and accountability (CEA):** CEA activities and approaches will be integrated into all interventions. This is to ensure that communities are given opportunities to participate in the planning and design of the operation and influence decisions made and also conduct a two-way communication within the programme through reliable and preferred communication channels. The CEA mainstreaming will also ensure that targeting is fair, most vulnerable individuals/population are identified and clear communication is provided to all. This will contribute to greater ownership by community members and improve the quality of the response. A feedback and complaint system in consultation with communities will be advertised widely to ensure everyone is aware of the system and is comfortable using it. This will be critical in helping us improve the impact of our work by identifying areas for improvement, allowing us to monitor our performance through the eyes of the community, listening to and acting on current situation in the field. We will consider any sensitive feedback received appropriately, including sexual and gender-based violence, child safe-guarding or corruption by community members or leaders and serious complaints specifically about the behaviour of staff and volunteers. Advocacy will be conducted as needed with other partners to support community initiatives, local approach and sustainable solution that will lead to greater impact after the end of project.

**CEA planned activities:**

- Printed tools - Flex and Roll up Banner, Posters, Leaflets
- Social Media - SMS broadcasting

- Radio - At least 2% of the population can be reached by the radio station coverage areas - live radio shows, jingle production (in different local languages), mass sensitization (megaphones, sound woofers, microphone)
- CEA training/workshops.

**Logistics** responsibilities will include sourcing the most urgent and relevant relief items, delivered and distributed equitably to those in need, in a timely, transparent, and cost-efficient manner. Local procurement will be carried out in accordance with the IFRC and National Society's standard procurement procedures with support of any deployed logistics surge in the country and the IFRC Regional Logistic Unit in Nairobi to ensure procurement activities will be carried out in accordance with the IFRC standard procurement procedures. Fleet assets will be deployed as and where requested, assessments of logistics capacity and systems (including procurement, transport, warehousing, and fleet management) will be carried out where possible to enhance NS' logistics infrastructure on hardware, software, capacities, and preparedness. For CVA, NRCS and IFRC will work with the current FSP, United Bank of Africa (UBA), to include an amendment into the current agreement to cover the five states where the CVA will take place. Logistics will furthermore support the FSP procurement as needed.

**Finance and Administration:** Through its Finance and Administration Department, the IFRC will provide necessary support to the operation to review and validate budgets, bank transfers, technical assistance to the NS regarding expense justification procedures and the review and validation of operational invoices. All transfers should be done at least two days before the scheduled activity starting day to enable the Branches to request and secure approval from their respective Branch governance for onward planning.

**Human Resources: This operation is expected to involve the following human resources:**

Duty of care and staff performance will be increased in the operation, through adequate HR management that promotes personal and professional growth and performance but acknowledges the challenging environment staff is facing with consecutive shocks, unprecedented challenges, and the COVID-19 pandemic. Therefore, the HR plan has taken in due consideration all issues related to duty of care and well-being.

- NRCS Headquarters: There will be HQ National Society staff involved in this operation who will be providing technical support. HQ staff will be providing monitoring visits for key implementation process such as registration of targeted recipients, cash distribution and post-distribution monitoring activity (amongst others). The key personnel involved will include CVA, DM, OD/NSD, CEA/communication, Health/WASH, Regional Coordinators, PMER, logistics, finance HR, IT, and security staff.
- NRCS Branches: Volunteers and Branch Managers (BS, DMC, BCTP FP and BCC/HC & Account Officer) of the NRCS will be deployed at intervals depending on the activities in each of the target states. The NDRT and RDRT surge will be deployed from time to time as the need arises to provide support to the NRCS.
- To support cash-based activities under the lead of the Cash-based officer and Health officer, the IFRC Abuja delegation will provide support to the NS alongside other departments such as logistics, HR, finance, PMER, security who will work closely with the NS to ensure all relevant systems for a successful operation are in place. Engagement of Nutrition, WASH and Communication Human resources will also be needed to provide support in the integration of other sectors into the operation.

**Communications and advocacy:** Support will be provided to the NS to increase their outreach and advocacy. At regional level, the Communications team will continue to engage the media and use social media with a view to position the IFRC as a key player in the response. International media attention has been focused on the eruption itself, and limited coverage has been given to people's needs. Angles such as overlapping crises (COVID-19 and malnutrition), regional impact, and population movement will be highlighted. To support volunteers in their mission and the visibility of Red Cross actions on the ground, this EA operation will procure protection and visibility items for volunteers as needed.

**Security:** Nigeria has experienced extremism, mainly in the form of kidnapping-for-ransom (KFR) and clashes between security forces and extremist militants. Those engaged in humanitarian aid work, journalism or business sectors are viewed as legitimate targets for KFR. The country faces threats from Niger-based extremist groups, which include regional affiliates of Armed groups, and Nigeria-based extremist groups, such as Armed Opposition Groups and ISIS West Africa (ISWAP). Current IFRC security phases in Nigeria vary as: Red Security phase in North-East and some part of the North-West, Orange Phase in North-West, North-Central, South-South, and South-East Regions. Tight security management and field management measures should be in place prior to implementation of activities. Overland travel outside Abuja requires stringent journey planning and management. To reduce the risk, active risk mitigation measures must be adopted. This includes situation monitoring and implementation of minimum-security standards. IFRC Regional Security Unit has been maintaining systematic coordination with direct oversight responsibilities over the Nigeria based Senior Security Officer acting as a direct extension of the IFRC security system in Nigeria in this particularly demanding and extreme operational environment.

The IFRC security plans will apply to all IFRC staff throughout. Area specific Security Risk Assessment will be conducted for any operational area should any IFRC personnel deploy there; risk mitigation measures will be identified



and implemented. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e., Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training.

The Cluster Senior Security Officer will keep under security management control the IFRC operation designed under this EA, providing coordination and cooperation on security matters with key stakeholders such as the Host National Society, ICRC, UN, and INGO Partners. A secured and well-designed internal security setting will support Country and Operations management with high standard MSR compliance (design, plans, contingencies, internal regulations, security oversight and controls). Close technical supervision from a security and safety angle will be carried out by the Regional Security Unit with particular attention to access, clearance and mission authorisation.

### **Strengthening National Societies Requirements (CHF): 567,000**

The emergency appeal operation will also support the National Society to address some self-assessed gaps with the view of further leveraging its mandate and capabilities as partner of choice for emergency response and disaster preparedness. The NS will also be supported to implement policies on personnel behaviour, to enhance financial management capacity of its branches in the target states, strengthen its supply chain management capacity, and enhance its PMER capacity at national and branch levels. Finally, the NS will be supported in enhancing financial sustainability of selected branches (by adding value of properties that can generate income), leadership development (by supporting allowances for specific leadership positions), duty of care (for all personnel involved in the operation), membership and Movement coordination.

The NS will be supported in enhancing their leadership development (through coaching, training, and support for planning activities), in Disaster Response Management and building of NDRT teams. Duty of care (for all personnel and volunteers involved in the operation, including insurance, psychosocial support, and personal protective equipment). The NRCS recognizes Branch Development as a strategic requirement for transforming institutional cultures that directly and positively impacts the Red Cross Red Crescent operational capacity to deliver on our humanitarian mission through staff and volunteers. Hence, adequate investments in branch development activities are inevitable for the NRCS. National Society capacity building and organizational development objectives are facilitated to ensure that NRCS and her branches have the necessary ethical, policies and financial foundations, systems and structures, competences, and capacities to plan, perform and carry out operations with minimum support. Training of Branch staff and volunteers to:

- Conduct assessments in the communities to determine the needs of the population.
- Promote partnerships and train communities in disaster and crisis affected areas.
- Adopt climate risk informed, and environmentally responsible values and practices.
- Support communities to develop capacities in various livelihood programmes so that they can become self-reliance and achieve sustainability.
- Support Branches with necessary ICT facilities for effective programme monitoring and reporting.
- Training of Trainers to cascade down to farmers and school children. Some may include:
  - Training farmers on crop diversification
  - Training farmers on Nature based practices on how to protect crops from hazards
  - Training school children and farmers on fruit planting (identifying fruits that survive in respective geographical locations)
- Training farmers on food processing and food preservation

## D. FUNDING REQUIREMENTS

### EMERGENCY APPEAL

#### *North West and North Central Nigeria Hunger Crisis*

##### *Funding requirements - summary*

Area of Intervention	Needs in CHF
DISASTER RISK REDUCTION	35,000
LIVELIHOODS AND BASIC NEEDS	2,230,000
HEALTH	442,000
WATER, SANITATION AND HYGIENE	131,000
PROTECTION, GENDER AND INCLUSION	40,000
INFLUENCING OTHERS AS STRATEGIC PARTNERS	158,000
STRENGTHENING COORDINATION AND ACCOUNTABILITY	527,000
STRENGTHENING NATIONAL SOCIETIES	567,000
<b>TOTAL FUNDING REQUIREMENTS</b>	<b>4,130,000</b>

## Contact information

For further information, specifically related to this operation please contact:

### In the Nigerian Red Cross Society

- Abubakar Kende, Secretary General, phone: +234 803 959 5095; e-mail: [secgen@redcrossnigeria.org](mailto:secgen@redcrossnigeria.org)
- Benson Agbro, Coordinator DM, phone: +234 802 301 5997; e-mail: [benson.agbro@redcrossnigeria.org](mailto:benson.agbro@redcrossnigeria.org)

### IFRC Cluster Delegation

- Bhupinder Tomar, Head of IFRC West Africa Country Cluster Office: email: [bhupinder.tomar@ifrc.org](mailto:bhupinder.tomar@ifrc.org)
- Francis Salako, Operations Coordinator – West Coast Cluster Delegation, Abuja, phone: +2349087351968; email: [francis.salako@ifrc.org](mailto:francis.salako@ifrc.org)

### In the IFRC

- Adesh Tripathee, Head of IFRC DCPRR Regional Office for Africa Nairobi, Kenya; phone +254731067489; email: [adesh.tripathee@ifrc.org](mailto:adesh.tripathee@ifrc.org)

### For IFRC Resource Mobilization and Pledges support

- Louise Daintrey-Hall, Head of Partnerships and Resource Development Regional Office for Africa, phone: +254 110 843978 Email: [louise.daintrey@ifrc.org](mailto:louise.daintrey@ifrc.org)

### For In-Kind donations and Mobilization table support

- Rishi Ramrakha, Head of Africa Regional Logistics Unit, phone: +254 733 888 022 email: [rishi.ramrakha@ifrc.org](mailto:rishi.ramrakha@ifrc.org);

### For Performance and Accountability support

- Philip Kahuho, PMER Manager, email: [philip.kahuho@ifrc.org](mailto:philip.kahuho@ifrc.org); phone: +254 732 232 081

## Reference documents



Click here for:

- [Appeals and updates](#)

## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organisations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, encourage, facilitate, and always promote all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.