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Emergency Plan of Action (EPoA) Nigeria: Explosion

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation	Operation n° MDRNG015; Glide n°
Date of issue: 5 June 2014	Date of disaster: 20 May 2014
Operation manager (responsible for this EPoA): Javier Barrera	Point of contact (name and title): Javier Barrera, Country Representative
Operation start date: 4 June 2014	Expected timeframe: 3 months
Overall operation budget: CHF 85,658	
Number of people affected: 1,500 persons	Number of people to be assisted: 250 families (1,500 persons)
Host National Society(ies) presence (n° of volunteers, staff, branches):	
Red Cross Red Crescent Movement partners actively involved in the operation (if available and relevant): ICRC and IFRC	
Other partner organizations actively involved in the operation: National Emergency Management Agency (NEMA), State and Federal Government	

A. Situation analysis

Description of the disaster

Following the deadly explosion in Jos, the capital of plateau state in North Central Nigeria on Tuesday, 20 May, 2014 that led to the killing of 118 and injuring 84 people, recorded as the worst attack on the city, there was an attempt to attack a local open air television viewing centre on Saturday, 24 May during the finals of European Champions league. There were over 700 youth viewers inside the hall at the time of the explosion. The suicide bomber was prevented from parking close to the viewing centre, invariably could not access what he targeted; but the incident led to the death of 4 people when detonated elsewhere. The explosion site is about 5 metres from the local Red Cross office which is directly opposite the viewing centre. Impact of the explosion shattered most of the glasses on the windows of the RC office and left a sizeable crack on the building. Jos and environs have recorded ethno-religious conflict and prolonged violence since 2001 that claimed thousands of lives and large scale destruction but the recent indiscriminate bombings in public places is a clear departure from the past. The bereaved family members of those killed, the injured, responders and witnesses of this carnage have been left traumatized and insecure. There are currently over 150 people receiving treatment in 6 Health facilities.



Nigerian Red Cross volunteers removing human remains from the scene during the Jos twin bomb explosions. Photo: NRCS

Summary of the current response

Overview of Host National Society

The NRCS has many years of experience in responding to disaster situations. NRCS has a good pool of RDRT and NDRT in psychosocial support, restoring family links (RFL), health in emergency, Watsan, shelter, and DM among others that can easily be mobilized and deployed. However, with respect to psychosocial support intervention, NRCS has a core team of 50 volunteers and staff trained in psychosocial support, mental health and stress management by

both IFRC and ICRC. The NRCS National Headquarters is currently providing guidance to the local branch in relating with the families of the affected, State Emergency Management Agency and the National Emergency Management Agency to provide psychosocial support to 250 targeted families. The NRCS will be supported by the IFRC to carry out this role as an auxiliary to the Government of Nigeria.

Overview of Red Cross Red Crescent Movement in country

The International Committee of the Red Cross supported the operation through the Nigerian Red Cross with 30 body bags, donated emergency supply kits and equally deployed its surgical team (as they happened to be in Jos at the time of occurrence) to 2 hospitals: Jos University Teaching Hospital and Plateau Specialist Hospital. The NRCS National Headquarters is currently providing guidance to the local branch in mapping and relating with the families of the affected, State Emergency Management Agency and the National Emergency Management Agency (NEMA) to provide psychosocial support (PSS) to 250 targeted families. The NRCS will be supported by the IFRC to carry out this role as an auxiliary to the Government of Nigeria.

Movement Coordination

IFRC has a Country Representation in Nigeria, hosted by the NRCS that has been providing technical oversight and guidance since office re-opened in Abuja, 2012. ICRC has a robust country delegation with 3 sub-delegations, including one in the affected state of Plateau.

The first coordination meeting on terror related and other critical issues was held in May, at the headquarters of NRCS with the presence of IFRC Country Representative, ICRC Head of Delegation and NRCS Secretary-General.

In order to meet the PSS needs of the affected families of the bereaved, injured and volunteers, remote technical oversight from the IFRC Psychosocial Reference Centre, Copenhagen, Denmark is proposed.

Overview of non-RCRC actors in country

The state government with local organizations responded to the immediate needs of the affected victims however not the affected families. The need for PSS was not addressed by any organization. This is the reason the RC and its partners have to provide this missing aspect of the response.

Needs analysis, beneficiary selection, risk assessment and scenario planning

The immediate needs of the affected and bereaved families, injured persons and traumatized populations after a preliminary assessment are expressed in terms of psychosocial support services, RFL services and one time food distribution (not provided by IFRC) in order to improve their psychosocial wellbeing will be done to the affected and traumatized families in line with sphere standards and IASC guidelines. The food distribution will be used as a point of entry and establishment of relationship with the affected families.

The volunteers and staff involved in the response will be trained in PSS activities, including PSS for families who have been separated, supportive communication, coping with stress, loss and grief – and caring for volunteers/self-care, so as to enhance their capacity to provide adequate and competent support to the families of the bereaved, hospitalized and injured.

Considering the two consecutive blasts and the lack of psychosocial support (PSS) response from authorities and the humanitarian community, there is a clear need to establish the necessary PSS capacity for rapid response to possible future incidents.

Risk Assessment

The current security situation might be an issue of concern. As noted above there was a follow-up bomb blast after the first twin blast 4 days later. This poses a danger to the volunteers and staff working in the area. However precaution will be taken to ensure that all volunteers and staff responding to the emergency are protected. There is a need to map referral options and strengthen links with other PSS stakeholders such as authorities and other organizations.

B. Operational strategy and plan

Overall objective

Proposed strategy

This operation is targeting 250 most affected and vulnerable families from the city of Jos, Plateau state, Nigeria; especially traumatized populations surrounding the impact areas of multiple bomb explosions. The criteria in the selection will include those families who have lost family members, injured, affected families whose members are

hospitalized and recuperating, families whose houses were burnt/damaged, those who lost belongings and/or means of livelihood.

The Nigerian Red Cross Society with the technical lead from its PSS focal point supported by other PSS staff and volunteers will carry out a comprehensive assessment of needs related to psychosocial support services to beneficiaries, and volunteers. They will conduct training of volunteers, staff and partners (NEMA and one NGO-People with Disabilities representative) on how to deliver psychological first aid and supportive communications in emergencies; will organize the delivery of immediate assistance in food relief items to affected population. The operation will be technically supported by the IFRC PSS reference centre, ICRC and the IFRC country, regional and Zone offices.

Operational support services

Human resources

The Branch Secretary in conjunction with the NHQ PSS focal person will be in charge of the operation. A Regional Disaster Response Team (RDRT) member will be identified for learning and regional PSS capacity building purposes since Nigeria RC has some good PSS capacities. The RDRT person will be deployed to the field to work with the Branch Secretary and Volunteers.

Logistics and supply chain

All the supplies will be procured locally, the NRCS has a database of suppliers who are used for tendering procedures.

Information technologies (IT)

The cost of an LCD projector has been identified and included in the operation to aid presentations during the training. The NS doesn't have a projector at the moment and this would go a long way to assist the NS in presentations. Costs for air time and internet are in-built in the budget to enable effective communication and reporting.

Communications

The Nigeria Red Cross will share information on the operation with the media, authorities and partners. The Secretary General will be responsible for communication to the external stakeholders. At the operational level the Secretary General will appoint a focal person to undertake communications activities. The IFRC will support with the publishing of stories on the website. The beneficiaries will be targeted through home visits.

Security

The IFRC and ICRC will support the Nigeria Red Cross and other partners supporting the operation on security issues by sharing regular updates on security situation in the operational area.

Planning, monitoring, evaluation, & reporting (PMER)

Supervision of the response will be done at all levels and at the three stages of implementation: training, home visits to the affected families and during distribution of the food items. The response will be coordinated at the national level by the head of Organizational Development (PSS focal person), under the supervision of the Programme Coordinator.

At the branch level, the Branch Secretary will coordinate and monitor the implementation of the operation, overseeing the activities of the trained volunteers. At community level, a volunteer supervisor will be appointed in each operational community to oversee the operation activities.

Reporting will involve daily record keeping of all activities carried out by the volunteers and the submission of the reports to the Divisional focal person, who will in turn collate and forward to the Branch Secretary. The Branch Secretary will then compile the reports and submit to the head of OD at National level.

A lesson learnt workshop will be held before the end of the operation to discuss good practices, challenges and other experiences. The planned workshop will be held in the operational area to include the beneficiaries and the stakeholders.

C. DETAILED OPERATIONAL PLAN

Emergency Health

Outcome 1 The immediate risks to the health of affected populations are reduced				
Output 1.1 Psychosocial support provided to the target population				
Activities planned	Month	1	2	3
Train 40 volunteers on psychosocial support				
Conduct home visits				
Conduct referral to other psychosocial support services				
Conduct debriefing sessions with staff and volunteers				
Output 1.2 Target population is provided with rapid medical management of injuries and diseases				
Activities planned	Month	1	2	3
Replenishment of used first aid items				

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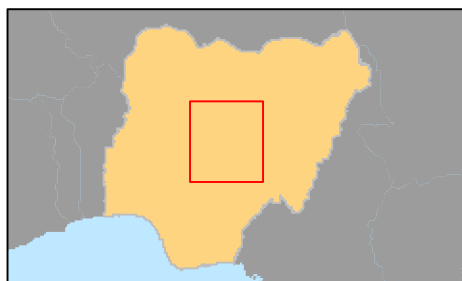
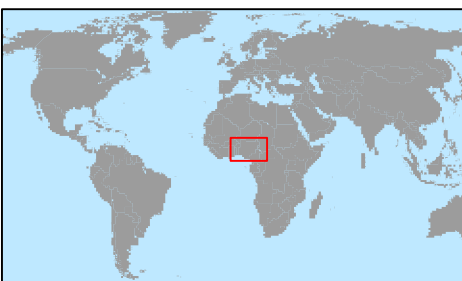
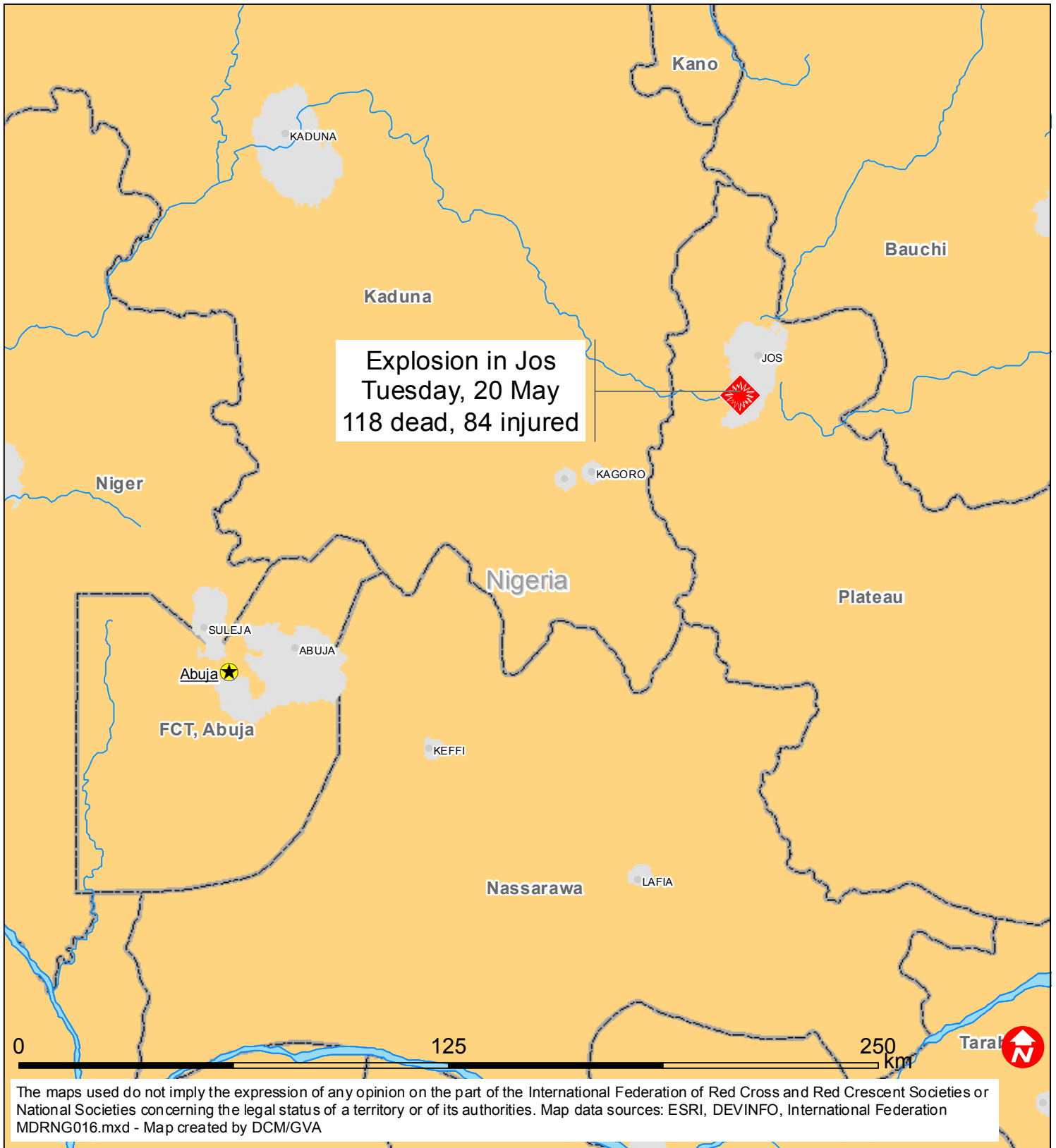
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Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	0	0		0
Shelter - Transitional	0	0		0
Construction - Housing	0	0		0
Construction - Facilities	0	0		0
Construction - Materials	0	0		0
Clothing & Textiles	0	0		0
Food	0	0		0
Seeds & Plants	0	0		0
Water, Sanitation & Hygiene	0	0		0
Medical & First Aid	3,000	0		3,000
Teaching Materials	0	0		0
Utensils & Tools	0	0		0
Other Supplies & Services	0	0		0
Emergency Response Units	0	0		0
Cash Disbursements	0	0		0
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	3,000	0	0	3,000
Land & Buildings	0	0		0
Vehicles Purchase	0	0		0
Computer & Telecom Equipment	0	0		0
Office/Household Furniture & Equipment	1,500	0		1,500
Medical Equipment	0	0		0
Other Machinery & Equipment	0	0		0
Total LAND, VEHICLES AND EQUIPMENT	1,500	0	0	1,500
Storage, Warehousing	0	0		0
Distribution & Monitoring	0	0		0
Transport & Vehicle Costs	7,400	0		7,400
Logistics Services	0	0		0
Total LOGISTICS, TRANSPORT AND STORAGE	7,400	0	0	7,400
International Staff	6,000	0		6,000
National Staff	0	0		0
National Society Staff	2,700	0		2,700
Volunteers	11,150	0		11,150
Total PERSONNEL	19,850	0	0	19,850
Consultants	0	0		0
Professional Fees	0	0		0
Total CONSULTANTS & PROFESSIONAL FEES	0	0	0	0
Workshops & Training	36,480	0		36,480
Total WORKSHOP & TRAINING	36,480	0	0	36,480
Travel	4,200	0		4,200
Information & Public Relations	4,800	0		4,800
Office Costs	0	0		0
Communications	2,200	0		2,200
Financial Charges	1,000	0		1,000
Other General Expenses	0	0		0
Shared Support Services	0	0		0
Total GENERAL EXPENDITURES	12,200	0	0	12,200
Programme and Supplementary Services Recovery	5,228	0	0	5,228
Total INDIRECT COSTS	5,228	0	0	5,228
TOTAL BUDGET	85,658	0	0	85,658
NET DREF NEEDS	85,658			85,658



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- States borders
- Urban extend
- Main settlements