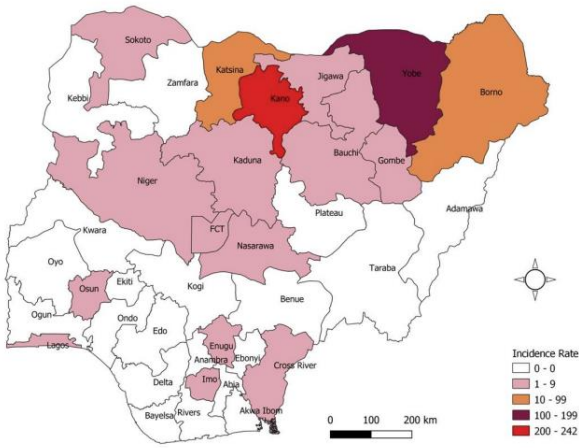




The Nigerian Red Cross Society (NRCS) is conducting RCCE activities in Kano State, Nigeria, at the epicentre of a diphtheria outbreak that threatens 5.4 million people.

Appeal No: <b>MDRNG037</b>	IFRC Secretariat Funding requirements: <b>CHF 5.4 million</b> Federation-wide Funding requirements: <b>CHF 6 million</b>	
Glide No: <b>EP-2023-000034-NGA</b>	People [affected/at risk]: <b>5.4 million</b>	People to be assisted: <b>5.4 million</b>
DREF allocation: CHF1,000,000	Appeal launched: <b>11/10/2023</b>	Appeal ends: <b>30/06/2024</b>



## SITUATION OVERVIEW

An outbreak of diphtheria has been ravaging Nigeria since December 2022, resulting in **12,041 suspected cases, 7,487 cases confirmed and 471 deaths (5.3 per cent case-fatality ratio (CFR))** as of 28 September 2023. In addition to illness and loss of life, the outbreak is having a toll on the already stretched public health facilities and health workers in Nigeria, as well as families that must care for the ill, resulting in disruption of livelihoods. A massive spike has been observed since July 2023, with over **1,000 weekly cases** identified since. Kano state is the epicentre of the outbreak, and despite some recent decline in this state due to an uptake of the response and vaccination, the outbreak is now spread over 19 states and 111 local government areas (LGA), where active case finding, contact tracing, and vaccination is still underperforming. In some of these states, the CFR is above 20 per cent - an indication of the limited Community Based Surveillance (CBS) and response capacity in these areas.

Diphtheria is a severe bacterial infection that can affect a person's nose, throat and skin, often causing swelling in the neck. It is brought on by *Corynebacterium diphtheriae*. At greatest risk in this outbreak are children and people who have received no vaccine or only a single dose. Residents of densely crowded areas and unsanitary areas are also at risk. Healthcare professionals, hospital frontline workers and anyone who has encountered suspected or confirmed diphtheria cases are at risk as well.

Since January of 2023 the outbreak has been concentrated in Kano state, with about 70 per cent of infections, followed by Yobe (12 per cent), Katsina

(6 per cent), Sokoto (2 per cent), and Enugu, Ogun, Osun, Kaduna, Lagos and Zamfara states, all with 1 per cent each. By June, Federal Capitol Territory (FCT), which includes Abuja, and Cross River were also reporting cases.

Of the 7,487 confirmed cases, 73.6 per cent were children aged between 1-14 years old. More than half of all cases (57.4 per cent) were among females. Vaccination is ongoing, but still with a reduced coverage (23.9 per cent) amongst the confirmed cases, and mostly concentrated in Kano state. The Nigeria Centre for Disease Control vaccination plan is to reach full vaccination amongst confirmed and suspected cases, and eventually scale-up the routine immunization within areas most at risk.

This outbreak has had a significant impact, including through increased hospitalization of those affected and severe economic stress. There have been reports of school closures in Bauchi state to slow the spread and this may continue in the coming weeks, particularly as schools resume in October.

Nigeria Red Cross has been supporting the government-led response since March 2023, in six states, through an allocation of CHF 430,654 from the IFRC Disaster Response Emergency Fund (DREF). Since then, Nigeria Red Cross has performed the following activities:

- 760 volunteers trained in Public Health and Risk Communication and Community Engagement (RCCE) for Diphtheria, reaching 4,966,680 people.
- 922,334 people sensitized about the importance of, and mobilized for the governments' vaccination program, via 120 trained vaccination teams.
- 1,915 suspected cases detected and referred to health facilities by Nigeria Red Cross Society volunteers.

Given the key role Nigeria Red Cross Society (NRCS) has been playing in this response, the **Government of Nigeria has officially requested a scale up of the response**. NRCS is hence requesting this Emergency Appeal, scaling up its activities to twelve states (previously six), following activities under the government plan.

# TARGETING

Overall, 5.4 million people affected and/or at-risk will be targeted in this Emergency Appeal, in the original states of Kano, Katsina, Lagos, Osun, Kaduna and FCT, with newly added Bauchi, Yobe, Jigawa, Zamfara, Borno and Sokoto. Priority will be:

- local government areas (LGAs) recording the highest caseload as a priority.
- local government areas (LGAs) with abnormally high CFR.
- Communities with high zero-dose and low immunization numbers.

Within these prioritized geographical areas, NRCS actions will focus on enabling access to vaccines for the most at-risk groups, as per the government's vaccination plan:

- Support vaccination for children aged 0 to 14;
- aged 15 and over, especially those who have not been vaccinated; and
- persons with disabilities and who may be at risk of not accessing health care and not getting vaccinated.

NRCS will deploy volunteers to conduct RCCE as well as public health awareness activities aiming at mobilizing for vaccination and will deploy additional vaccination teams to underserved communities, for increased coverage. Priority will be on zero-dose and under-vaccinated children, and on children aged 0 to 14. Those aged 15 and over, especially those who have not been vaccinated, will also be targeted.

# PLANNED OPERATIONS

Through this Emergency Appeal the International Federation of Red Cross and Red Crescent Societies (IFRC) aims to support the NRCS in its response to the diphtheria outbreak. The strategy of the IFRC response will be to contribute support to 5.4 million people and this response will focus on the following areas:



## Health and Care including Water, Sanitation and Hygiene (WASH)

*(Surveillance/Vaccination/Community Health)*

Reduce the immediate risks to the health of affected populations through the following interventions:



- Provide logistics support to 2,620 vaccination teams in high zero-dose and hard-to-reach areas for vaccine intensification.
- Deploy 2,000 NRCS volunteers to support contact tracing activities and active case finding.
- Conduct mass awareness-raising campaigns including road walks in 13 targeted states.
- Support airing of jingles and public service announcements in all targeted states.
- Conduct RCCE diphtheria awareness and social mobilization for reactive vaccination.
- Hygiene promotion and health education intervention based on epidemic control for volunteers (ECV) training, targeting 5.4 million people with health messages.
- Provide disinfectant to 12,000 households with children suffering from diphtheria.
- Provide family hygiene kits, one per household, to families in treatment centres.
- Provide infection, prevention and control (IPC) support to vaccinators and health workers in five states (face masks, gloves, gowns, etc.)

## Protection and Prevention

(Protection, Gender and Inclusion [PGI], Community Engagement and Accountability [CEA], Migration, Environmental Sustainability, Risk Reduction, Climate Adaptation and Recovery, Education)

NRCS will intensify awareness raising campaigns and road shows across states, disseminating information about the outbreak and the importance of getting vaccinated. This will be done using public address systems, megaphones and distribution of information education communication (IEC) materials including setup of community feedback mechanisms.



- NRCS will deploy mobilizers and vaccinators to widely scattered settlements, IDP camps and security-compromised areas, ensuring that services are delivered to underserved populations.
- PGI and safeguarding will be prioritized in these activities.
- Volunteers and staff will abide by the prevention of sexual exploitation and abuse (PSEA) and safeguarding policies of NRCS and IFRC.
- Conduct targeted advocacy to key stakeholders, gatekeepers and opinion leaders to address vaccine hesitancy and to increase demand for vaccine uptake.
- Conduct a perception survey in five priority branches to assess knowledge, attitudes and perceptions of the people toward the outbreak and toward vaccine uptake.
- Intensify social media engagement for increased coverage and NRCS visibility.
- Strengthen NRCS's two-way feedback system through toll free lines, focus group discussions and community meetings, which include community consultation and sharing of final evaluation with the community.

## Enabling approaches

The sectors outlined above will be supported and enhanced by the following enabling approaches:

### Coordination and partnerships



- Provide technical and operational complementarity between IFRC membership and ICRC and ensure Movement cooperation is enhanced through cooperation with external partners.
- Regularly participate in the national task force and Emergency Operations and Coordination (EOC) meetings, and share updates on NRCS activities.

### IFRC Secretariat services



- Provide effective Secretariat support to NRCS, in operations coordination, health technical support, PMER and logistics.
- IFRC Minimum Security Requirements (MSRs) will apply to all staff. Area-specific security risk assessments will be conducted, with risk mitigation measures identified and implemented.
- Support will be provided to ensure all financial justifications are reported on time and in accordance with the IFRC Standard Financial Management procedures.



## National Society Strengthening



- The Emergency Appeal will also support NRCS in self-assessed gaps, further leveraging its mandate and capabilities as a partner of choice for emergency response and health system strengthening.
- NRCS will also be supported to enhance the financial management capacity of its branches in the target states, strengthen its supply chain management capacity and enhance its Planning, Monitoring, Evaluation and Reporting/Information Management (PMER/IM) capacity at national and branch levels.
- National Disaster Response Teams (NDRTs) to cover both branch and national headquarters will be deployed to support implementation in the affected states, to improve efficiency.

The planned response reflects the current situation and is based on the information available at the time of this Emergency Appeal launch. Details of the operation will be updated through the Operational Strategy to be released in the upcoming days. The Operational Strategy will also provide further details on the Federation Wide approach which includes response activities of all contributing Red Cross and Red Crescent National Societies, and the Federation-wide funding requirement.

## RED CROSS RED CRESCENT FOOTPRINT IN COUNTRY



### Nigeria Red Cross Society (NRCS)

#### Core areas of operation



Number of staff:

**500**

Number of volunteers:

**800,000**

Number of branches

**37**

Nigeria's largest volunteer-based organization, with more than 800,000 volunteers countrywide, NRCS currently has 37 state branches, which are further divided into 774 divisions at the Local Government Area (LGA) level, with detachments at the community level. Each state branch is managed by a Branch Secretary assisted by program officers, among them a health officer, communication officer, and PMER officers.

Most volunteers and health staff have received training on Epidemic Control for Volunteers (ECV), and on community-based health and first aid (CBHFA) and are equipped to respond to health emergencies at the branch level, coordinating activities of members of the Health Action Teams (HATs).

#### IFRC Membership coordination

The IFRC Secretariat has a delegation in Abuja providing support to NRCS on emergency preparedness, response and longer-term programmes. In recent years, IFRC has also supported NRCS in rolling out a country-wide response to COVID-19, as well as other epidemics including cholera, measles, Lassa fever, yellow fever and meningitis.

The IFRC Operations and Health team is providing technical support to the NRCS team. For better coordination and information sharing, the IFRC/NRCS activated a National Society Emergency Operations Centre (EOC) for the

outbreak, consisting of the branch officers, National Disaster Response Teams (NDRTs) and National Headquarter project teams. The EOC meeting is held every Friday and updates are received from the branches with targets, success stories and recommendations.

The British Red Cross (BRC) is in the country and integrated into the IFRC secretariat. It is implementing bilateral programmes on disaster risk reduction (DRR) with NRCS, providing technical support in cash and voucher assistance (CVA) and community, engagement and accountability (CEA) mainstreaming. The Italian Red Cross is supporting the population movement programmes at NRCS headquarters, and the Norwegian Red Cross (housed under ICRC) is supporting NRCS headquarters on financial systems strengthening and on community-based health programmes.

### **Red Cross Red Crescent Movement coordination**

The ICRC has an office in Abuja and is operational in the conflict affected North-East region. Regular Movement coordination meetings are ongoing as per the existing Movement Cooperation Agreement, ensuring a coordinated Movement approach to support the NRCS in preparedness, readiness and response efforts. The ICRC is supporting the NRCS in reinforcing its emergency response through emergency first aid teams (EFAT) and restoring family links. The NRCS, together with the IFRC, ICRC and BRC, have established a management committee to help in coordinating the efforts of Movement partners towards an effective response to emergencies nationwide.

### **External coordination**

- NRCS is regularly participating in the national task force and EOC meetings, and shares updates on NRCS activities. It is collaborating and networking with other technical working groups involved in the response.
- NRCS/IFRC will also engage local partners for resource mobilization to support the appeal.
- IFRC will ensure that NRCS is part of coordination platforms at the state level to increase its visibility and fulfil its auxiliary role to the local authorities on humanitarian issues.

## Contact information

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

### At the Nigerian Red Cross Society

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- **IFRC Geneva:** Santiago Luengo, Senior Officer, Operations Coordination, [santiago.luengo@ifrc.org](mailto:santiago.luengo@ifrc.org),

### For IFRC Resource Mobilization and pledges support:

- **Head of Regional Strategic Engagement and Partnerships:** Louise Daintrey-Hall; phone: +254 110 843 978; email: [louise.daintrey@ifrc.org](mailto:louise.daintrey@ifrc.org)

### Reference

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