



# NIGERIA: BORNO STATE CRISIS PROFILE

November 2016

## Contents

|   |   |
|---|---|
| Contents .....                              | 1 |
| Crisis overview .....                       | 1 |
| Sector needs .....                          | 3 |
| Response capacity .....                     | 4 |
| Information gaps and data limitations ..... | 4 |
| Baseline characteristics.....               | 5 |
| Map of Borno.....                           | 5 |

## Crisis overview

### CONTEXT

Borno state is the most affected by the Boko Haram (BH) insurgency and military counter-insurgency operations. The insurgency began in 2009, and conflict escalated in 2013. Since 2015, security forces have recaptured large areas from BH control, however BH still controls territory and military operations continue. While access for humanitarian actors has improved in 2016, the majority of Borno state remains inaccessible to humanitarian actors, with humanitarian operations focusing on Maiduguri city and LGA headquarters in newly accessible areas.

Large-scale severe humanitarian needs persist, and are expected to continue to increase. Of highest concern are the inaccessible areas in northern Borno, where food security levels are likely to have reached famine levels. Both displaced and host communities are experiencing critical needs across all sectors. Borno hosts almost two million IDPs and returnees.

### PRIORITY NEEDS

**Food** is overwhelmingly the highest priority, in both formal and informal camps, and in host communities.

**Malnutrition** rates are critical, with deaths linked to starvation expected to continue to increase.

**WASH** infrastructure is severely limited, and lack of access exacerbates nutrition and health concerns

**Health:** malaria, measles, cholera, and polio outbreaks are of particular concern .

**Protection** concerns include indiscriminate killing of civilians, SGBV, and arbitrary detention of suspected BH members, including children.

### CONFLICT DEVELOPMENTS

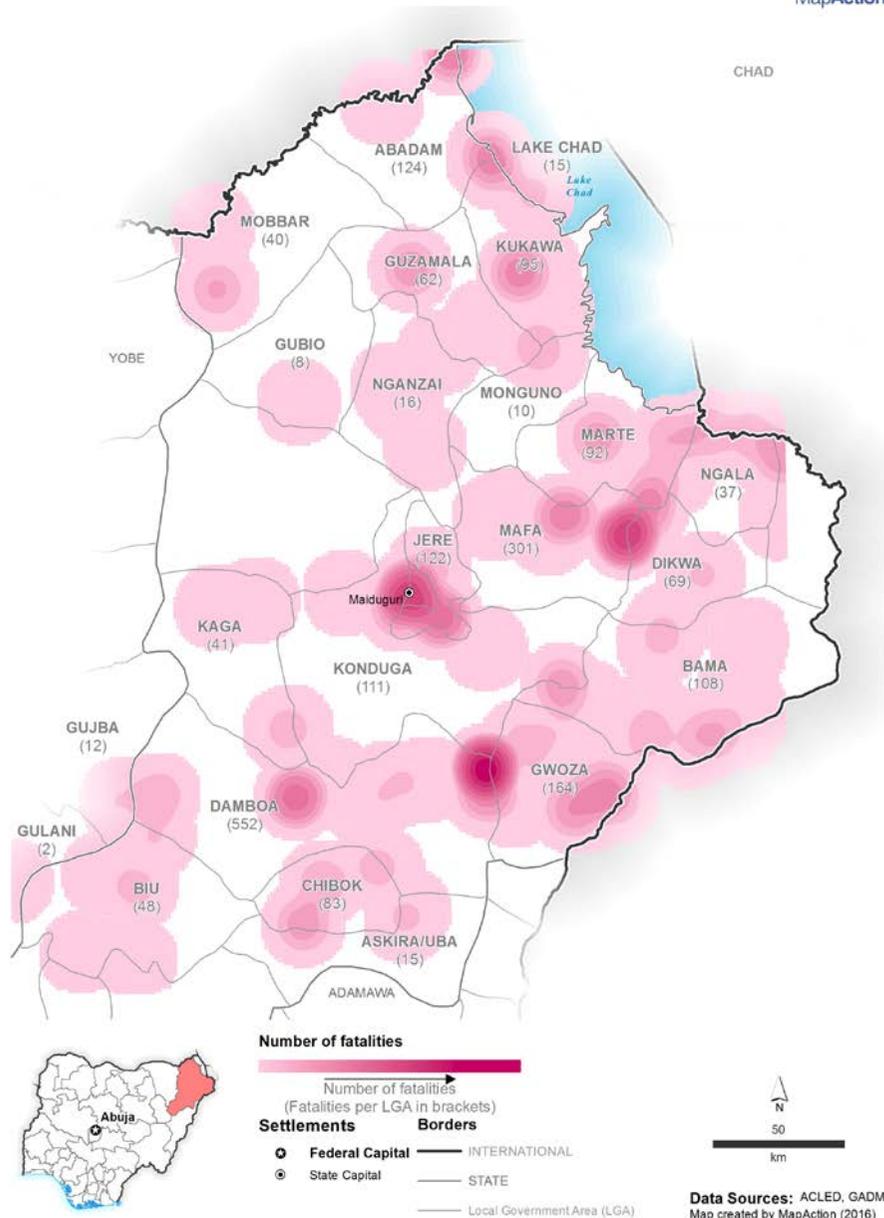
Operations by the Nigerian military, the regional Multi-National Joint Task Force (MNJTF), and the Civilian Joint Task Force (CJTF) over 2016 have weakened Boko Haram (BH) capacity to hold territory, but various factions of the group continue to have a significant presence, particularly in northern Borno, along Lake Chad and the Niger border, and in areas around the Sambisa forest in eastern Borno.

BH is currently separated into two major factions: the Islamic State West Africa Province (ISWAP) in the north, led by Abu Musab al Barnawi, and the Abubakar Shekau-led faction along the Sambisa forest in the east. Shekau was BH leader from 2009 until August 2016, when he was replaced by al Barnawi. Al Barnawi has rejected Shekau’s strategies of indiscriminate targeting of the Muslim civilian population, and has stated that attacks should target security forces and Christians (Daily Post 05/08/2016; AP 04/08/2016).

According to the Institute for Security Studies, BH has launched almost 60 strikes on military targets since August (The Guardian 20/11/2016). With the end of the rainy season in September, attacks and armed clashes have escalated, and are likely to continue to increase in the coming months. In October, suicide bombers attacked Bakassi IDP camp in Maiduguri, following reports of other attempted attacks on IDP camps in recent months (ACLEDD 05/11/2016). Further attacks on IDP camps are likely.

## Conflict-related fatalities in Borno, January–November 2016

**Borno State:** Number of reported fatalities, January - November 2016



## DISPLACEMENT

According to the October round of IOM's Displacement Tracking Matrix (DTM), Borno state hosts 1.4 million IDPs – 76% of all identified IDPs in the northeast. The DTM also identified 350,000 IDP returnees in Borno. 162,000 IDPs have returned since August, and returns continue. The number of refugee returnees from Cameroon into Borno has also increased over recent months, with 90,000 registered at the Ngala border crossing as of end September.

However, the majority of both IDP and refugee returnees are not returning to their towns or villages of origin, but rather to the LGA headquarters of their LGA of origin, meaning they remain in a situation of displacement (IOM 31/10/2016; OCHA 14/10/2016; UNHCR 30/09/2016). The government has announced it intends to close all IDP camps in Borno by May 2017 (Daily Trust 12/10/2016).

The vast majority (74%) of IDPs in Borno are staying among host communities, who are themselves experiencing critical cross-sectoral needs. 26% of IDPs are staying in government-run camps, including camps run by security forces, or informal IDP settlements (IOM 31/10/2016). Maiduguri city (which stretches past the Maiduguri Metropolitan Council (MMC), and includes parts of neighbouring LGAs) hosts almost one million IDPs (IOM 31/10/2016; OCHA 14/10/2016).

## HUMANITARIAN AND OPERATIONAL CONSTRAINTS

Severe humanitarian access constraints persist, mainly as a result of insecurity.

- Insecurity – both BH attacks and military operations – significantly hampers humanitarian response. Humanitarian actors face extremely limited access outside of Maiduguri, with access restricted to LGA headquarters.
- Access to LGA headquarters is further restrained by insecure roads, with humanitarian operations often restricted to daytrips by air (UNHAS). Some roads can only be accessed with military escort. Fuel shortages are increasingly reported.
- Lack of warehouse space in Maiduguri hampers storage of food and other supplies.
- Customs delays of imported medical supplies have been reported.
- High turnover of staff challenges institutional memory and long-term planning.
- Targeting of humanitarian actors is likely. In July, a humanitarian convoy was attacked, temporarily suspending humanitarian assistance (UNICEF 28/07/2016). Al Barnawi has accused aid organisations of exploiting the humanitarian crisis to convert the Muslim population to Christianity (AP 04/08/2016).

## Sectoral needs

### FOOD SECURITY AND LIVELIHOODS

Food is overwhelmingly reported as the highest priority need. According to the October Cadre Harmonisé, 1.4 million people in northern and central Borno are currently facing Emergency (IPC Phase 4) food security outcomes. In the inaccessible areas in the north, Famine (IPC Phase 5) food security outcomes are likely to be occurring. A total of 3.3 million people in Borno are estimated to be facing Crisis–Famine (IPC Phases 3–5) situations (Cadre Harmonisé 01/11/2016). Food is also a priority need in camps, with many IDPs only receiving one meal a day (PI 21/11/2016; 07/11/2016).

Food stocks are depleted, food production has been extremely limited for the last three years, and market functioning outside urban centres is low. Where markets are functioning, food prices are high, exacerbated by inflation and a 40% depreciation of the Nigerian naira since early 2016 (Cadre Harmonisé 01/11/2016; FEWSNET 09/2016). The military's tactic of starving BH is also affecting the local population's access to food.

Livelihood opportunities are scarce for both the IDP and host population – prior to the conflict, the vast majority of the population in Borno was dependent on subsistence and livestock farming, but insecurity and displacement have disrupted food production for the last three years (FEWSNET 09/2016; IITA 2007).

### NUTRITION

According to UNICEF estimates, 244,000 children in Borno suffer from severe acute malnutrition (SAM) (UNICEF 19/07/2016). The government declared a nutrition emergency in Borno in June 2016 (Daily Trust 27/06/2016). Deaths linked to starvation are reported, including in IDP sites in Maiduguri city. The critical malnutrition situation, compounded by lack of access to adequate WASH infrastructure, is further exacerbating the prevalence and mortality rates of diseases, most critically malaria, measles, and acute watery diarrhoea (AWD) (MSF 14/11/2016; WHO 14/10/2016).

Rapid MUAC screenings in camps in central Borno show GAM rates between 20% and 50%. A rapid SMART survey carried out in April 2016 found a GAM of 19.1% and SAM of 3.1% in Maiduguri and Jere LGAs – exceeding the Crisis threshold of 15% GAM and 2% SAM. Other LGAs are also experiencing extremely high levels of malnutrition, including: Monguno (GAM: 27.3%, SAM: 8.7%), Konduga (GAM: 16.4%, SAM: 5.0%), and Kaga (GAM: 13.0%, SAM: 3.4%) (FEWSNET 21/10/2016; WHO 14/10/2016; ACF 08/2016).

### WASH

Very limited access to adequate WASH infrastructure, including clean drinking water and sanitation, is reported in both camps and host communities (MSF 18/11/2016; 14/11/2016).

Open defecation is prevalent. It is reported in the majority of IDP sites: some sites have no latrines at all, while in half of all identified IDP sites in Borno, one latrine is used by more than 100 people. Handwashing rates are very low, and a lack of soap is reported in the majority of sites (DTM 31/10/2016; WASH Sector 25/10/2016; WHO 21/10/2016).

### HEALTH

40% of health facilities in Borno have been destroyed (WHO 14/10/2016). Health concerns are predominantly linked to the critical malnutrition situation, weakening the population's resistance to diseases. Malaria, endemic in Borno, accounts for more than 50% of recorded deaths and is a significant concern, however caseloads are decreasing with the end of the rainy season (MSF 18/11/2016; WHO 14/10/2016). Measles cases continue to be reported in IDP camps. Cases of measles, acute respiratory infection and meningitis are expected to increase in coming months (WHO 14/10/2016). A high caseload of acute watery diarrhoea (AWD) is also reported, linked to the lack of access to adequate WASH facilities, and a potential cholera outbreak in the 2017 rainy season is a concern. Since August, five cases of polio have been reported (WHO 14/10/2016).

### PROTECTION

Both IDPs and host communities face severe protection needs. BH continues to target civilians through indiscriminate killing, abductions, forced marriage, and recruitment of children, including as suicide bombers. Child recruitment is also reported in the CJTF, in addition to SGBV cases and other human rights violations (UNHCR 22/07/2016; UN 20/04/2016). Security forces are believed to have arbitrarily arrested and detained thousands of people alleged to have links with BH, including children. Torture and inhumane treatment in detention centres is reported (Daily Trust 01/10/2016; Human Rights Watch 28/07/2016; Amnesty International 06/2015). The military controls the towns in recently recaptured areas, and has imposed strict movement restrictions (MSF 18/11/2016).

Tension between IDPs and host communities is increasingly reported, and tensions when returnees return to their places of origin is also expected. Stigma against former BH abductees, particularly women and children, is reported (International Alert/UNICEF 02/2016). Rape and sexual abuse of girls and women in IDP camps by officials have been reported (Human Rights Watch 31/10/2016). Unexploded ordnance (UXO) and improvised explosive devices (IEDs) are prevalent.

## EDUCATION

Lack of facilities, teaching and learning material, and trained personnel is hampering children's access to education. Lack of adequate WASH facilities in schools, particularly lack of clean drinking water and latrines, is also reported as a priority concern (UNICEF 31/10/2016; IRC 01/2016). The majority of children in IDP sites in Borno identified by the DTM are not attending school (DTM 31/10/2016).

Borno's schools reopened in September 2016, having been closed since March 2014. More than 250,000 primary and secondary school students were without schooling for more than two years (Premium Times 22/10/2016). While closed, a large number of schools were used as IDP shelters. According to the state government, more than 520 schools in Borno have been destroyed during the insurgency (Vanguard 10/12/2015).

## SHELTER AND NFIS

A large number of IDPs are living in makeshift shelters made out of iron sheeting, sticks, or mud. Other IDPs live in abandoned houses or public buildings, including hospitals, or in the open. Shelters are generally overcrowded and offers inadequate protection against the elements (MSF 22/11/2016; DTM 31/10/2016; Mercy Corps 07/2016).

Host communities are also severely overcrowded, with many host families hosting several IDP families in their home. Returning to burned-down villages where large numbers, if not all, buildings have been destroyed, returnees have to resort to either living in damaged houses or makeshift shelters (MSF 21/11/2016; DTM 31/10/2016). Priority NFI needs include bedding, clothing, and hygiene items (DTM 31/10/2016; Mercy Corps 07/2016).

## Response capacity

### STATE AND FEDERAL RESPONSE CAPACITY

Emergency response in the northeast is coordinated by the National Emergency Management Agency (NEMA), while the Borno State Emergency Management Agency (SEMA) is responsible for emergency response at the state level. NEMA has also established a humanitarian cell in Maiduguri (GoN 31/08/2016). NEMA and SEMA are running the formal camps in Borno, however the agencies are overwhelmed and aid meant for camps is reported to have been diverted. Corruption is widespread in Nigeria, with Nigeria ranked 136 out of 168 countries on Transparency International's 2015 Corruption Perception Index (Transparency International 01/2016).

## INTERNATIONAL RESPONSE CAPACITY

All major UN agencies and a number of INGOs are responding in Borno. The majority of the response is focused on Maiduguri LGA. A number of organisations have declared the crisis an internal Level 3 emergency. UN agencies and INGOs are currently in a process of scaling up response. A Maiduguri-based Operational Humanitarian Country Team (OHCT) has recently been established to coordinate response on the Borno state level.

The response suffers from underfunding: as of mid-November, the 2016 Nigeria Humanitarian Response Plan (HRP) is 39% funded (Financial Tracking Service 11/11/2016).

## Information gaps and data limitations

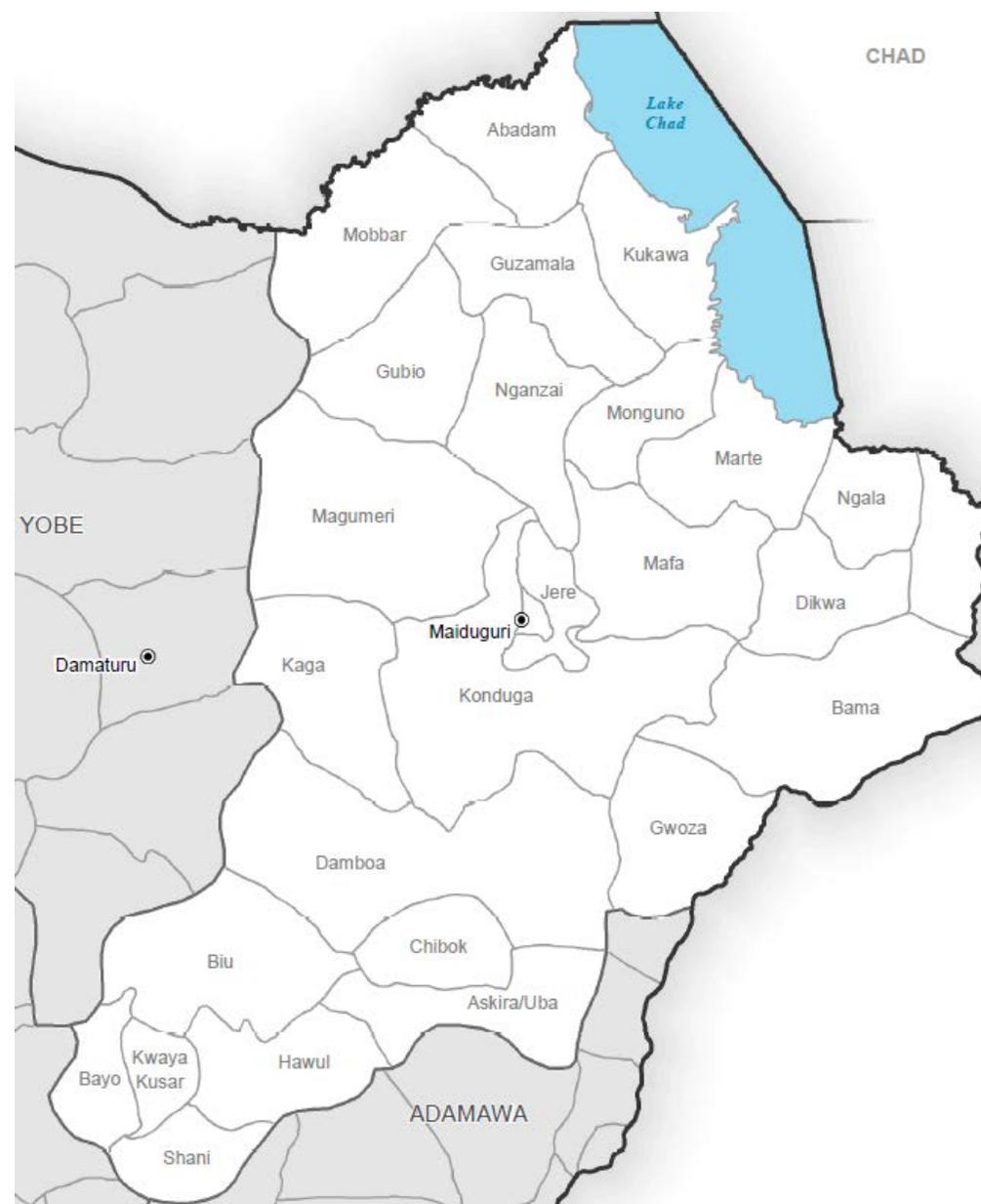
- The majority of Borno state is inaccessible to international humanitarian actors and media. Little to no information is available on needs outside Maiduguri and Jere LGAs and LGA headquarters. Assessments predominantly focus on Maiduguri and Jere LGAs.
- Limited information is available on needs of host communities, and IDPs living in host communities.
- There is a lack of comprehensive nutrition assessments outside rapid MUAC (mid upper-arm circumference) screenings in camps and informal settlements. Further assessments are underway.
- Very limited information is available on education needs, including IDPs' access to education. An inter-agency assessment is planned for early 2017.
- There is a lack of information on refugee returnees from neighbouring countries, including their needs.
- IDPs returning to their LGA of origin are frequently referred to as returnees by humanitarian actors, even though the vast majority are not returning to their villages or towns of origin, but rather to the LGA headquarters, creating a situation of secondary displacement.
- The October 2016 round of IOM's Displacement Tracking Matrix (DTM) assessed 21 of Borno's 27 LGAs, and does not include figures from six inaccessible LGAs: Mobbar, Abadam, Kukawa, Guzamala, Marte, and Kala/Balge (IOM 31/10/2016).
- The current total population of inaccessible LGAs in northern Borno is not known. Efforts to calculate the estimated population sizes of inaccessible areas are underway.

## Baseline characteristics

| Key indicators                                | Borno  |
|---|--|
| Population (2006)                             | 4,171,104  |
| Population (projected, 2016)                  | 5,800,000  |
| Number of LGAs                                | 27   |
| Area  | 70,898km <sup>2</sup>                                      |
| Population density                            | 79.1/km <sup>2</sup>                                       |
| Average household size (2010)                 | 4.8  |
| Measles vaccination coverage (2013)           | 17%  |
| Acute malnutrition prevalence (wasting, 2011) | 18.7%  |
| Literacy rate (2010)                          | Rural: 17% male, 10% female<br>Urban: 44% male, 36% female |
| Net primary school attendance ratio (2010)    | Rural: 19% male, 20% female<br>Urban: 44% male, 31% female |
| Main source of energy for cooking (2010)      | Collected firewood (85%)                                   |
| Main source of water (2010)                   | Unprotected well/spring (48%)                              |
| Main type of toilet facility (2010)           | Uncovered pit latrine (54%)                                |
| Births without skilled attendant % (2013)     | 78   |
| Healthcare facilities per 100,000 (2011)      | 10   |

Sources: NEDS 2010; NBS 2012; MICS 2011; DHS 2013

## Map of Borno LGAs



Data sources: Natural Earth; GADM  
Map created by MapAction (2016)

ACAPS would like to thank UN agencies and INGOs in Maiduguri and Abuja for their kind support in the preparation of this report. In October 2016, ACAPS published a set of scenarios considering the possible developments of the humanitarian situation in the northeast. More information on Nigeria can be found in the ACAPS Country Profile (April 2016). Previous ACAPS reports on the humanitarian situation in northeast Nigeria include a September 2016 Briefing Note, a Northeast Nigeria Crisis Profile published in July 2016, and a Secondary Data Review published in August 2015.