



2019-2021

NATIONAL CONTINGENCY PLAN



NEMA

2019-2021

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EXECUTIVE SUMMARY

In fulfillment of its mandate of Coordinating Disaster Management and related activities in Nigeria, the National Emergency Management Agency (NEMA), in collaboration with other stakeholders, has developed the National Contingency Plan (NCP) for 2019-2021. The contingency plan has been developed to provide basis for coordination of humanitarian response in the event of catastrophic/ major disaster in the country. The overall objective of this plan is guided by the following strategies;

- National Contingency Plan for Emergency Preparedness and Response.
- Sectoral Response Plan
- Budget and Pre-positioning of Emergency Supplies.

Nigeria, like the rest of the world, is exposed to wide range of Nature and Human-induced disasters. Some of these disasters are rapid, while others are slow-onset resulting in catastrophic situations leading to loss of lives and properties and degradation of our environment. These crises usually result in the Government diverting available resources to alleviate the sufferings of its people, and also to reconstruct critical infrastructure in the country, all at the cost of achieving new developments.

The document adopts the multi-risk approach and aims to reduce impact of disasters and save as many lives as possible from preventable causes. A population estimate of 500,000 people was used as the benchmark for planning assumptions. The geographical area covered the whole country based on identified hazards. The Plan recognizes Government's primary responsibility to crises affecting the country's population.

The Sectorial response strategy adequately looked into preparedness, minimum response and general responses within the following clusters: Coordination; Camp Coordination and Camp Management; Protection; WASH; Emergency Shelter and NFIs; Telecommunication and Logistics; Health; Education in Emergency; Nutrition and Food Security. The funding of the Plan will be based on the sources of Disaster Management funding in Nigeria and other arrangements as contained in the establishment Act of NEMA. The estimated requirements by each Sector are also listed out in the Plan.

The National Contingency Plan was also developed to ensure proper resource mobilization and functioning of various Sectors during the agreed period

of minimum response. Also the document made adequate arrangements for trainings and simulations.

It gives me immense satisfaction that the National Contingency Plan 2019-2021 has been prepared with a bottom-up, consultative and participatory approach. This document provides a run-down of hazards, vulnerabilities, resource-mapping and gap-analysis, keeping in view worst-case scenarios. The roles of all the stakeholders including those responsible for Early Warning and Alerts was very crucial in the entire planning process. The seasonal diseases forecast, as well as the analysis and trends of conflicts and communal violence from relevant agencies, were very critical in prioritizing the risks that were planned for in this Contingency Plan.

I appreciate the efforts of the Sector Leads with their members from Ministries, Departments and Agencies, including the Co-leads from the UN System all through the consultative process up till the proper review of the Plan at a workshop held in January 2019 in Enugu State, which culminated into the development of this National Contingency 2019-2021.

Kayode Fagbemi
Director, Planning, Research and Forecasting

FOREWORD

Disaster in Nigeria has continued to increase in frequency and magnitude with serious consequences which has slowed down the process towards sustainable development. Between 2010 and 2018, almost all the 36 States of the country have experienced multiple cases of nature and human-induced disasters with resultant humanitarian crises. The complex emergencies in the North-East are currently highest among humanitarian crises in the country.

This National Contingency Plan (NCP) is a document developed by the National Emergency Management Agency (NEMA) in collaboration with other relevant stakeholders, supported by UNICEF, to provide basis for coordination of humanitarian responses in the event of major/catastrophic disaster for quick response by the Federal Government of Nigeria for the period 2019- 2021.

It is therefore, a matter of satisfaction and assurance for me and our nation that Disaster Management stakeholder has come together to comprehensively review the National Contingency Plan.

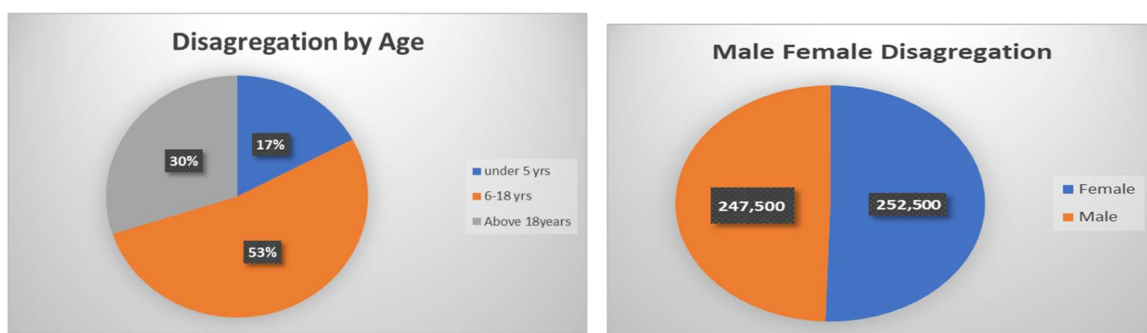
It is a universally recognized fact that preparedness before occurrence of a disaster helps, to a large extent, to reduce both human and property losses. Efficient organization and detailed plan mitigate the impact of disaster and lead to early recovery and rebuilding of the affected segment of the society. Events overtime, have shown that the void in our disaster management system has been amply highlighted mostly due to lack of preparedness plans. Being conscious of that fact, the Government, through NEMA, has gone a long way in addressing such an inadequacy by ensuring that the development of this Plan was all-inclusive with participation from relevant Ministries, Departments and Agencies, and the International/Local NGOs, as well as the UN System.

I am pleased to observe that a Contingency Plan to mitigate and deal with various kinds of disasters like flood, armed conflict, inter-communal violence, as well as diseases like cholera, have been meticulously addressed in this document. The detailed and coordinated mechanisms for responding to these disasters were indeed a necessity in order to save precious lives and infrastructure.

As identified in the Plan, all relevant Government Ministries, Departments and Agencies, with support from International Systems, have key roles in assisting NEMA in the implementation of this Plan; because major/catastrophic disasters will require coordinated national efforts for successful responses. As such, all stakeholders will be required to implement the Plan in letter and spirit, and build the requisite capacity to combat such envisaged disasters. To this end, the corporate sector is also expected to join hands with the national Disaster Management system, through effective participation as their corporate responsibility.

I hope and wish that through the wholehearted implementation of this Plan, we will not only be able to prevent, but avoid causing losses to the people of Nigeria. I feel confident that owing to the keen interest, patronage and guidance from political leadership, our people and national institutions are well prepared, to face challenges and show resilience.

AVM Muhammadu A Muhammed (rtd)
Director-General



STRATEGIC SUMMARY

Response objectives

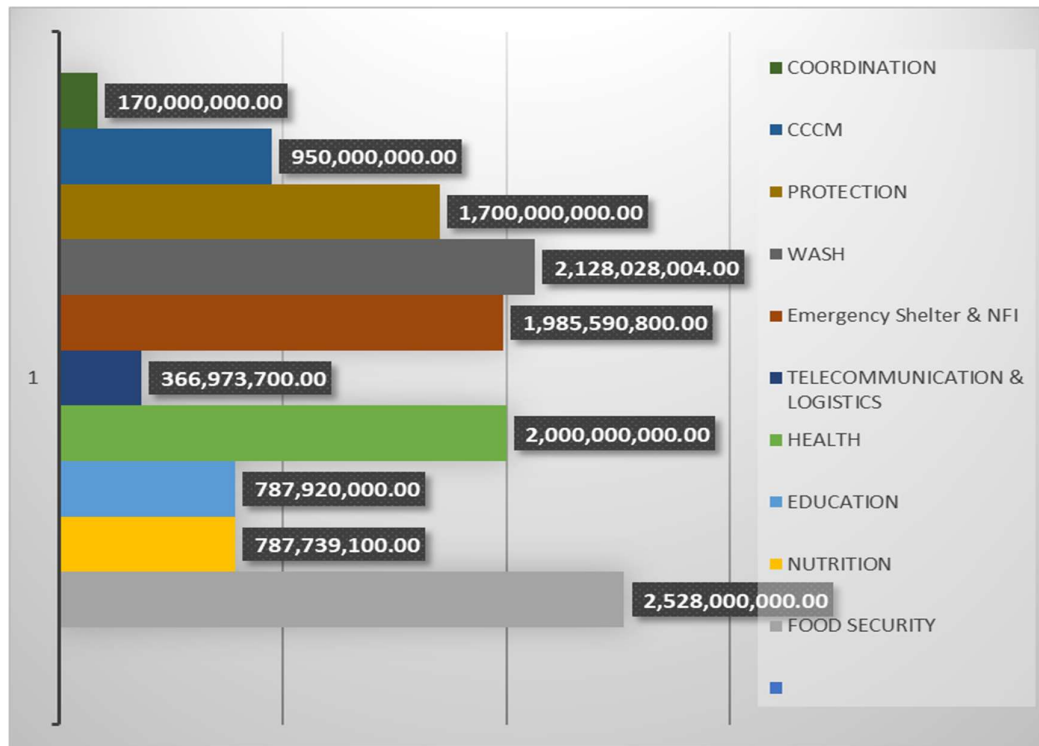
This plan aims to mitigate the impact of disasters and save as many lives as possible from preventable causes. The Humanitarian Preparedness Plan will be activated at the declaration of a humanitarian emergency by the Federal Republic of Nigeria. The plan recognizes the Government's primary responsibility to respond to crises affecting its population while the humanitarian community work to support the Government in responding to the humanitarian needs of the population as determined by coordinated assessments.

Estimated Target Population for planning- 500,000 affected persons

Funding Estimate 13,404,251,604.00 Naira

Estimated Requirement by Sector

NATIONAL CONTINGENCY PLAN-NIGERIA



MAP OF NIGERIA SHOWING STATES



SITUATION & RISK ANALYSIS

1. Country information and context analysis.

Disasters in Nigeria continue to increase in frequency and magnitude with attendant consequences such as human, environmental and material losses to communities, diversion of resources and has slowed down the process towards sustainable development. Conflict induced humanitarian crises account for a larger percentage of the disasters recorded in Nigeria. Between 2008 and 2018, almost all 36 States of the country have experienced multiple cases of human/nature induced disasters with attendant humanitarian crises. The complex emergency in the northeast currently ranks highest amongst the humanitarian crises in Nigeria. In addition to this, the North Central Herdsman/farmers' crises and ethno-religious conflicts have remained protracted for over 15 years. Communal conflicts have also been prevalent in different parts of the country for many years, while the post amnesty peace process has remained shaky across the south-south geo political zones with recurrent attacks, communal violence and piracy.

The frequency and impact of floods have increased over the years and the resilience capacity of riverine communities has been weakened. This is compounded by secondary disasters such

as cholera. Other issues include ocean surge which has caused death and displacements in the coastal states.

Scenarios and Planning Assumptions

Overall Risks	Risk breakdown	Geographical areas
Conflict	Insurgency/Counter Insurgency	North East
	Inter/Intra communal clash	North Central, South East, South South, North West, north East
	Socio Political Crises in Cameroon (refugee situation)	South South, North Central, North east
	Electoral	South South, South West, North West, north Central, north East
	Resource Based	South South, North Central, North West
Epidemic	Cholera, Ebola, Lassa Fever	North East, North West, South West, South South
Environmental	Flood	across the geopolitical zones
	Erosion (Gully)	South East, South South
Risk	Impact	
Conflict	Population displacement, injuries, loss of lives and livelihood, economic/social crises, malnutrition, food insecurity, psychosocial problem, GBV, lack of access to education, lack of access to safe water, sanitation, health service, insecurity, child abuse, destruction of property/infrastructure including shelter, and epidemic breakout	
Epidemic	Loss of lives, livelihood, social stigma, psychosocial problem, overstretching of health facilities and services, disruption of social activities.	
Environmental	loss of lives, displacement, loss of livelihood, injuries, destruction of property/infrastructure including shelter, poor access to safe water and sanitation, poor access to health care including epidemic breakout	

Conflict

Scenarios	Affected Population Estimate	Planning Population Estimate
Most probable Scenario NE Armed conflict-ongoing Other conflicts identified-planned	10.2 million	6.1 million ¹ -ongoing 500,000-planned for other conflicts
Best Case Scenario	7.1 million	6.3 million ²
Worst Case Scenario	16.7 million ³	-

Epidemic

Scenarios	Affected Population Estimate ⁴	Planning Population Estimate
Most probable Scenario		
Best Case Scenario	50,719 cases from 247 LGAs (cholera) 3498 cases from 23 states	Treatment Cholera -40,000 Lassa Fever-3000 Response 280,000
Worst case scenario		Ebola case in any part of the country will result in large scale response.

Environmental

Scenarios	Affected Population Estimate	Planning Population Estimate
Best Case Scenario	20,000 – 40,000	40,000
Most probable Scenario	How many people affected in years where there is no major flooding	500,000
Worst Case Scenario	7.7 million ⁵ (2012)	2,321,592 (2018)

¹ Humanitarian Response Plan 2018-Nigeria

² Humanitarian Response Plan 2019-Nigeria-ongoing response in the northeast

³ Population estimate based on National Population Census 2006

⁴ Nigeria Center for Disease Control (NSCDC) Epidemiological report December 2018-
<https://ncdc.gov.ng/reports/167/2018-december-week-52>

⁵ Figures from Nigeria 2012 flood

Contingency Plan Population Estimate disaggregation⁶	
Total Population (estimate for response)	500,000
Number of persons per household	6.0
Number of households	83,333
Total Fertility Rate	5.8
Number of births per month	2417
% of women	50.5
Number of women	252,500
% of men	49.5
Number of men	247,500
% of children under 5	17.2
Number of children under 5	86,000
% of children 6-18 years	52.8
Number of children 6-18 years	264,000
% of girls 0-4 years	17.5
Number of girls 0-4 years	87,500
% of boys 0-4 years	16.8
Number of boys 0-4 years	84,000
% of boys 5-9 years	16.7
Number of boys 5-9 years	83,500
% of girls 5-9 years	15.8
Number of girls 5-9 years	79,000
percentage of boys 10-14 years	13.6
number of bs 10-14 years	68,000
% of girls 10-14 years	13.6
number of girls 10-14 years	68,000
% of children below 17 years	52.8
number of children below 17 years	139,392
Contingency Plan Population Estimate disaggregation⁷	
% of Primary school children 6-11	39.2
number of primary school children	34,300
Rate of severe malnutrition among children xx %	11.5
Number of children suffering from severe malnutrition	30,360
Rate of CMAM	31.5
number of children with CMAM	27,563
HIV prevalence rate (%)	3.4
Number of people living with HIV/AIDS	17,000
Rate of sexual violence during the first month of crisis in %	1.0
Number of victims of sexual violence in the first months of the crisis	5,000
Proportion of people traumatized (%)	2.0
Number of people traumatized	10,000
Proportion of unaccompanied children (%)	1.0
Number of unaccompanied children	5,000

⁶ Disaggregation percentages are as provided by the National Bureau for Statistics (NBS)

⁷ Disaggregation percentages are as provided by the National Bureau for Statistics (NBS)

Planning Figures

The determination of affected areas and estimates of potentially affected people were based on the following:

- Historical floods, data from NIMET and NHISA and Lessons learned from the 2012-2018 floods;
- Data from National Epidemiological Reports;
- Secondary data from assessments and reports from SEMAs, NEMA Zonal Offices and Stakeholders.
- Population data and analysis from Nigeria Bureau of Statistics (NBS)

The population in need has been prioritized into 3 categories:

O1	Priority 1: Potentially affected IDPs and hosting communities Up to 2 million people affected or more, in large scale humanitarian emergencies including hard to reach areas.
O2	Priority 2: Potentially affected populations of up to 500,000 people (IDPs and hosting communities). Including impact as described in the scenario section. (This is the most probable scenario).
O3	Priority 3: Potentially affected populations of lesser figures where the Government (LGAs, states or national) is able to deal with the number of people affected.

Risk Analysis Summary

Conflict

Insurgency and Counter-insurgency has had a devastating impact on the civilian population in northeast Nigeria. An estimated 7.1 million men, women, boys and girls are in acute need of protection and assistance with over 1.8 million people displaced in the three most affected states Borno, Adamawa and Yobe. Clashes between the Nigerian military and non-state armed groups (NSAGs) has resulted into loss of lives, massive destruction of infrastructure, a collapse of livelihoods, widespread displacement and brutal attacks on the civilian population. In 2018, the attacks from the NSAGs has not abated and the possibility of an escalation cannot be overruled resulting in the need for preparedness in this regard. Also, in the northwest, the activities of armed bandits against several communities in Zamfara has led to growing humanitarian crisis. Though no systematic assessment has been undertaken but rapid analysis revealed that thousands of people have been displaced, properties and homes destroyed as a result of the attacks from the armed bandits and counter attacks from the security forces. The trend has continued to increase the impact resulting in its high rating for the contingency plan.

Inter/Intra-Communal violence is prevalent in the north central because of the ethno-religious conflict in many states of the federation. This conflict traced to the 90s has been reoccurring and has been responsible for several humanitarian crises. In Benue, Nassarawa Taraba and Adamawa the struggle for land-use and ownership between the farmers and the herdsman are contributing to humanitarian situation in this region. Though seasonal over many years, in 2018 the impact was very high attracting humanitarian response from both government and the international system. Other areas, including parts of the South south (Cross Rivers and Akwa Ibom) also ranked high with potentials for humanitarian crises resulting from inter/intra communal clashes.

In the south south, militancy (resource based conflict) is responsible for most conflicts resulting in loss of lives and humanitarian crises in the zone, though it subsided with the Amnesty programme, but the possibilities of reoccurrence of violence that can result into humanitarian situations cannot be over ruled.

The tendencies of electoral violence resulting into humanitarian crises ranks high with the 2019 elections, the probability of electoral violence cuts across many States with the north west and south west and south south south ranking high.

Population movement of refugees from Cameroon have increased since 2018 into Cross River, Taraba and Benue States. The crises in the anglophone areas in Cameroon is socio-political and has been existing for many years resulting in displacement and refugee situation in Nigeria. Assessment by humanitarian actors like the UNHCR shows that conflicts in the anglophone parts of Cameroon has resulted into the displacement of over 40,000 persons since 2018. The movement from the northern Anglophone regions are towards the northern border of the Mambila plateau, while populations from southern regions are moving towards the western border to Ikom and Calabar.

Environmental Disaster.

Flooding is the major environmental disaster is ranked highest in the country. The impact cuts across all the states, though different types of floods occur in different parts. River floods ranks highest, with urban flood and flash flood also causing a lot of destruction.

While the states bordering the River Niger and River Benue are most affected by river floods, urban floods, flash floods are predominant in all the region while ocean surge occur in the litoral states. The major contributing factors to flood in Nigeria are dam spills, dumping of refuse in the canal, building on flood plains with no provisions for surface drainage or where existing drainage has been blocked with solid waste, refuse and eroded soil. For example, urban flooding is a phenomenon of every rainy season in Lagos and Ibadan.

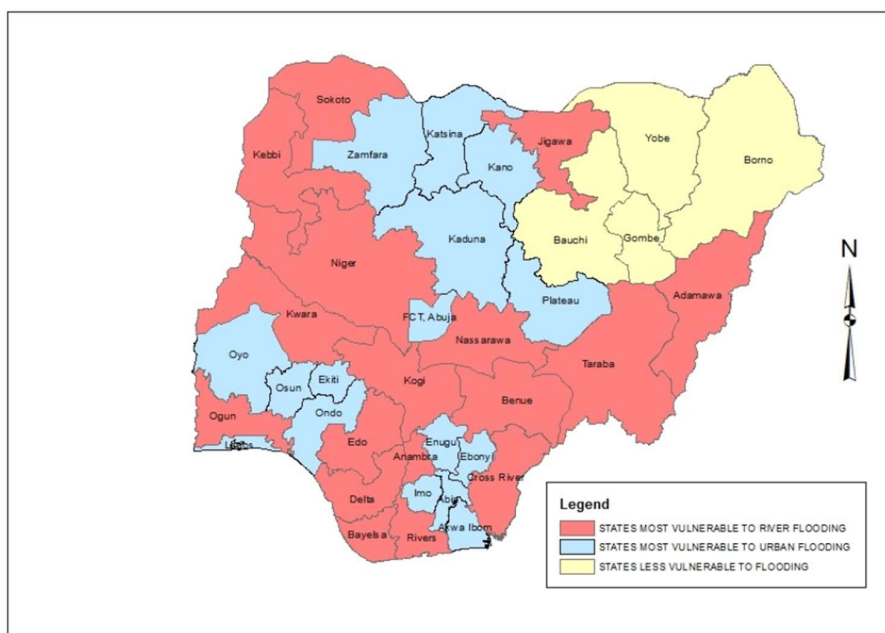
Epidemic

Cholera occurrence has become a reoccurring emergency in Nigeria, especially in the last 4 years. In 2018 alone, 50,719 suspected cholera cases with 1136 deaths (CFR, 2.2%) were recorded in 247 LGAs compared while 4221 suspected cases and 107 deaths (CFR, 2.5%) from 87 LGAs in 2017. over 10,000 of these cases were recorded in the 3 States of Adamawa, Borno and Yobe. Cholera outbreak is also prevalent in the northwest (Zamfara,) and southwest with Oyo and Osun recording most cases in the south west. Improper waste management, especially during flood, poor sanitation and hygiene conditions as well as poor access to safe water are major causal factors in affected communities. Assessment showed that there is clearly a link between cholera and poverty, dirty environment, lack of social amenities including provision of good water sources. These factors usually determine the frequency and severity of the disease as well as its epidemic potential and the presence of these factors makes cholera of high priority to plan for in 2019.

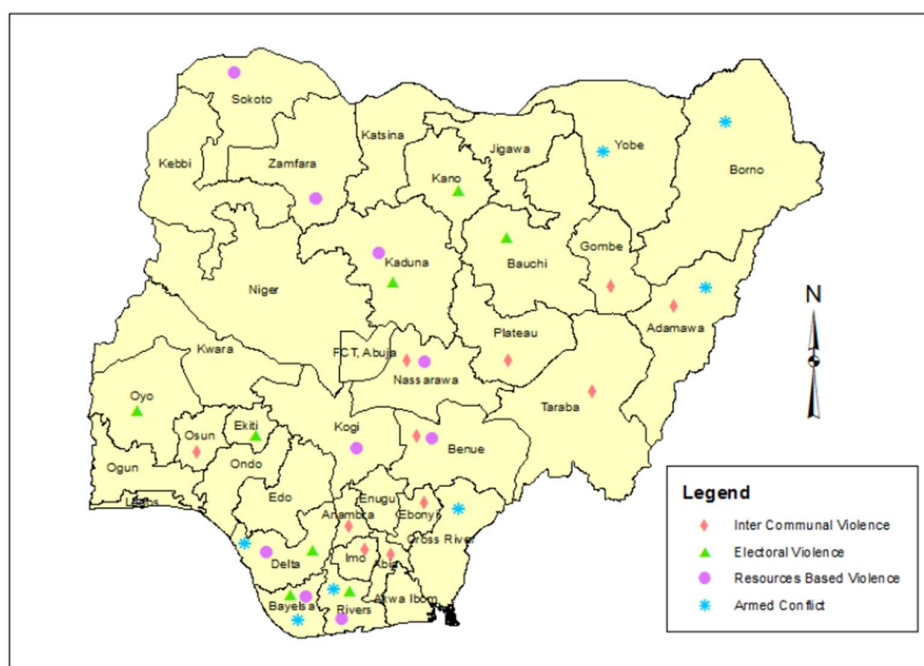
Risk Maps

Map for Environmental Emergencies

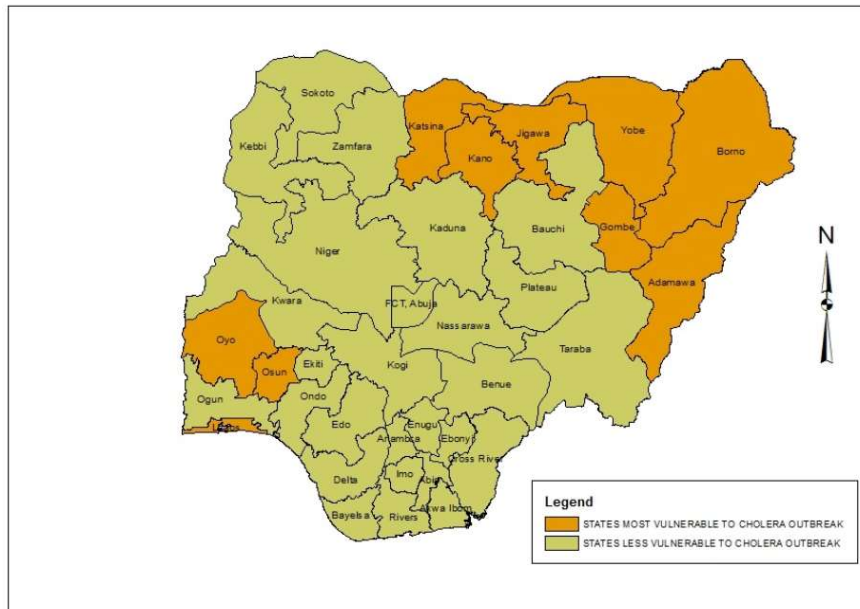
STATES IN NIGERIA MOST VULNERABLE TO FLOODING



STATES IN NIGERIA MOST VULNERABLE TO CONFLICTS



STATES IN NIGERIA MOST VULNERABLE TO CHOLERA OUTBREAK



Humanitarian consequences

Based on experience, factors that exacerbate the vulnerability of many populations in Nigeria to different kind of hazards include: poor housing quality; poor socio-economic conditions; poor data quality and inadequate analysis of gender distinct needs; food insecurity; poor sanitation, water supply system and hygiene practices; and inadequate health services in vulnerable areas. 50 per cent⁸ of the people are living below the poverty line, and many of these are living in hazard prone areas. Many of the most vulnerable including women, children, unaccompanied and separated children, Aged, Child headed household e.t.c. are also the least able to prioritize Disaster Risk Reduction (DRR). Thus, when a population already has minimal coping mechanisms it follows that their capacity to absorb, adapt and transform will be very low, as recurrent disasters have damaged their homes and livelihoods, and affected the capacity of communities to recover. The priority needs of disaster affected communities in Nigeria are likely to be health services, clean drinking water, gender sensitive sanitation and hygiene, basic food commodities and shelter. However, for the different sectors, the level of humanitarian impact and consequences will vary. The sector response plan in the CP will provide details of the requirements based on the risk analysis and scenarios for addressing the humanitarian needs.

⁸ World Bank report 2018

NATIONAL CONTINGENCY PLAN-NIGERIA

Early Warning/Trigger/Responsible Agencies

Hazards	Triggers,	Early Warning/ monitoring indicators	Relevant Agencies
Conflicts			
1.) Militancy 2.) Inter/intra communal clashes 3. Socio Political Crises (Cameroon Situation) 4.) Electoral 5.) Resource based (e.g Herdsmen/ Farmers)	Economic marginalization, political disenfranchisement, sudden demographic changes and movement, human rights violations, Factional parties, political thuggery, gangsterism, nepotism, boundary disputes, climate change, Religious intolerance and increased casualties.	Agitations, Protests, influx of non-residents, demographic movement and displacement proliferation/stockpiling of small arms and weapons, border encroachment, reduction in rainfall, drought, desertification, increasing criminal activities, illicit drug sales and abuse, Inflammatory speech, hate speech	Armed Forces (NPF, NSCDC, NAVY, Army, DSS), UN Agencies, NEMA, SEMA, NOA, NHRC, Min of Env, Min of Interior, Min of Agric, Min of Water Resources, Min of Works, Power and Housing, Min of Education, Min of Health, Min of Information, Refugee, Commission, IPCR, NGOs, NIMET, NASRDA ,State Peace Agencies
Epidemics			
1.) Cholera 3. Ebola 3.) Lassa Fever	Flood, poor sanitation & hygiene, Bush burning, Contamination of food and water supply, Influx of persons from affected countries, conflict, overcrowding, increased casualties and conflicts.	Excessive rainfall, weather forecast, Annual flood outlook, Increasing cases in health facilities, Hospital records, Blocked drainages, open defecation, unattended municipal wastes, improper waste management, Ports of entry Health records, Health alerts, Thermal, NCDC Early Warning Surveillance system.	Min of Health, NCDC, Min of interior/Foreign Affairs, NEMA, SEMA, FAAN, Security Agencies, NIHSA, NIMET, Min of Agric, Min of Water resources, NASRDA, NOSDRA, NESREA.
Hazards	Triggers,	Early Warning/ monitoring indicators	Relevant Agencies

NATIONAL CONTINGENCY PLAN-NIGERIA

Environmental Hazards			
1.) Flood	Climate change, Torrential rainfall, Dam failure, urbanisation, drainage obstruction, building in floodplains, drainage patterns, non compliance with land use planning, topography, siltation, distortion in river system, shallow river channelisement , poor Dam Management	Sudden rise in sea/river level, sudden speed in river flow, torrential rainfall, increased humidity, rise above benchmark in hydrological station, release of water in upstream dams, transboundary river pattern/behaviour, Rainfall parameters (IDF) Curves	NIHSA, NIMET, NIWA, NASDRA, NOA, Min of Env, Min of Water resources, NEMA, SEMA, Min of Health and NCDC.

Main Challenges to Emergency Response

This contingency plan aims to address the following challenges, identified in previous emergency responses:

- Delays in information collection, collation and sharing caused mainly by the lack of a common approach and clear definitions and/or agreement on information management responsibilities and tasks.
- Delays in humanitarian financing mobilization, including delays due to weak or unavailable data and slow decision-making processes.
- The need for improved Government and inter agency capacity on a number of issues, including information management at all levels
- The need for improved dissemination of early warning information from the Federal to the sub national levels
- The need to establish improved mechanisms for more predictable funding within the Government for emergency response.

In addition, the contingency plan aims to facilitate progress towards improving the following systemic challenges:

- The operations of the Emergency Operations Centers.

Response Strategy

Objectives and activities

The objectives of the preparedness activities outlined in this plan are to:

- Mitigate the impact of disasters to save lives and protect livelihoods
- Contribute towards humanitarian readiness through coordinated preparedness planning.

Strategic Objective 1	Mitigate the impact of disasters in order to save lives and protect livelihoods
Key activities	<ul style="list-style-type: none"> • Advocate for and ensure early action in response to crisis situations • Mobilize resources and provide time critical assistance to save lives and protect livelihoods • Communicating key public messages to the vulnerable/affected communities
Strategic Objective 2	Contribute towards humanitarian readiness through coordinated preparedness planning
Key activities	<ul style="list-style-type: none"> • Agree on assessment methodology and tools for a multi sector coordinated rapid assessment • Map all available/accessible stocks for a timely and effective humanitarian response

	<ul style="list-style-type: none"> • Provide enabling services and an environment for an effective and timely humanitarian response
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The overall objectives would be guided by the following strategies:

- i. National Contingency Plan for emergency preparedness and response.
- ii. Sectoral Response Plans
- iii. Budget and Pre-positioning of emergency supplies

The National Contingency Plan is to be activated at the declaration of a National disaster and operational for the first 3 months while other comprehensive assessment and planning is ongoing. This plan is based on the premise that Federal Government of Nigeria has a primary responsibility of ensuring protection and responding to the needs of her citizens in emergency and post-emergency situations.

Implementation

Sector implementation plan summary

The response plan will focus on the following sectors: education, food security, logistics, health, nutrition, protection, shelter and non-food items (NFI), and water sanitation and hygiene (WASH) including information Management. The response will be conducted in line with the following operational principles:

- i. Special attention will be devoted to particularly vulnerable populations in each context;
- ii. Strategic and operational responses will be jointly planned and implemented by all concerned stakeholders;
- iii. A specific set of recommended actions will be developed to assist host communities in coping with the emergency;
- iv. Safety and security of humanitarian workers will be of the utmost concern of the humanitarian community.

Coordination and Management Arrangements

In line with the Inter Sector Working Group guidelines, the National Emergency Management Agency has identified the sector approach as the coordination mechanism for humanitarian response and identified sector lead agencies for operationalizing the National Contingency Plan and will build on collaboration with governments, relevant Ministry Department and Agencies (MDAs), military and paramilitary, Police Force, CSOs, International Organizations and the UN system. NEMA will collaborate with relevant agencies to monitor early warning, potential threats and emergency situations to ensure adequate response.

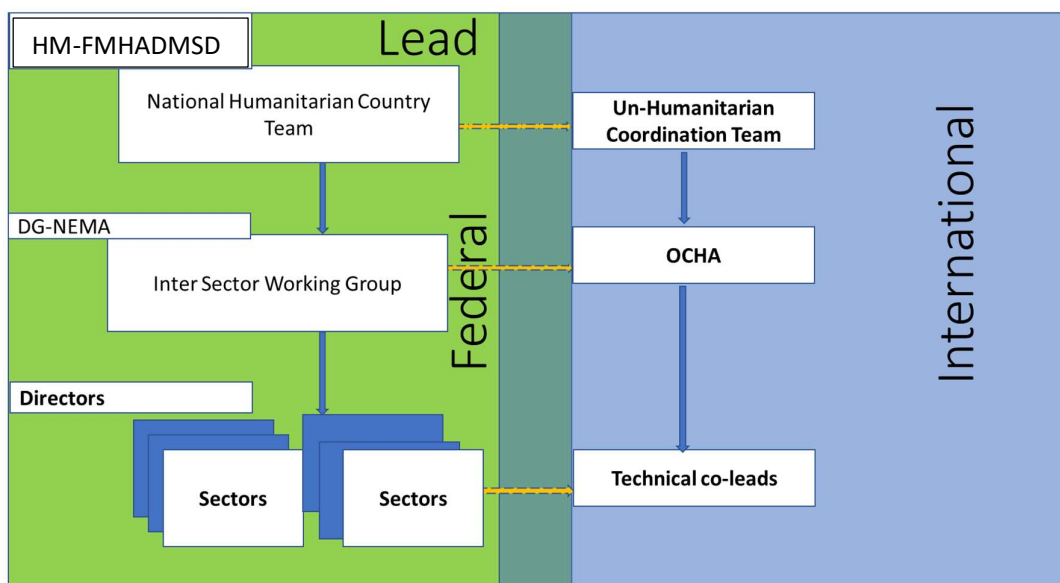
When the sector system is activated, NEMA and the respective government lead agencies will coordinate humanitarian partners with technical support from the Co – Leads or international

technical leads. Each sector will be coordinated or chaired by the sector lead agency and co-chaired by the relevant international technical organization.

Sector Leads and Co-Leads Table.

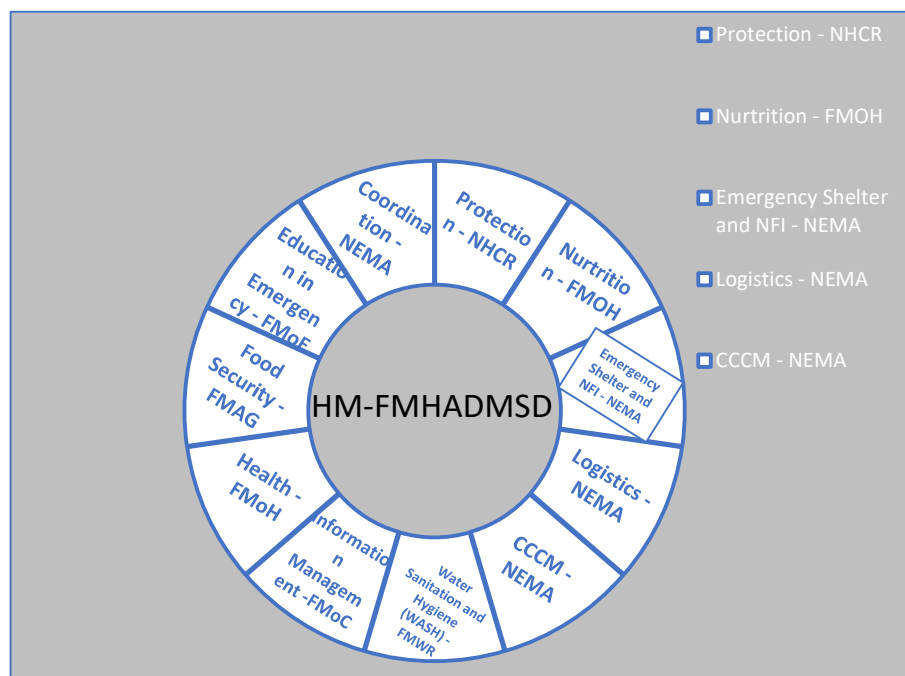
S/N	Sectors	Lead	Co- Lead/ Technical Support
1	Protection	NHRC	UNHCR
	Child Protection	FWASD	UNICEF
	Gender Based Violence	FWASD	UNFPA
2	Nutrition	FMoH	UNICEF
3	Emergency Shelter & NFI	NEMA	IOM
4	Logistics	NEMA	WFP
5	CCCM	NEMA	IOM
6	Water Sanitation & Hygiene (WASH)	FMoWR	UNICEF
7	Security	Police	UNDSS
8	Information Management	Ministry of Information	OCHA
9	Health	FMoH	WHO
10	Food Security	FMARD	FAO/WFP
11	Education in Emergency	FMoE	UNICEF/SCI
12	Coordination	NEMA	OCHA

Coordination Mechanism Flow Chart



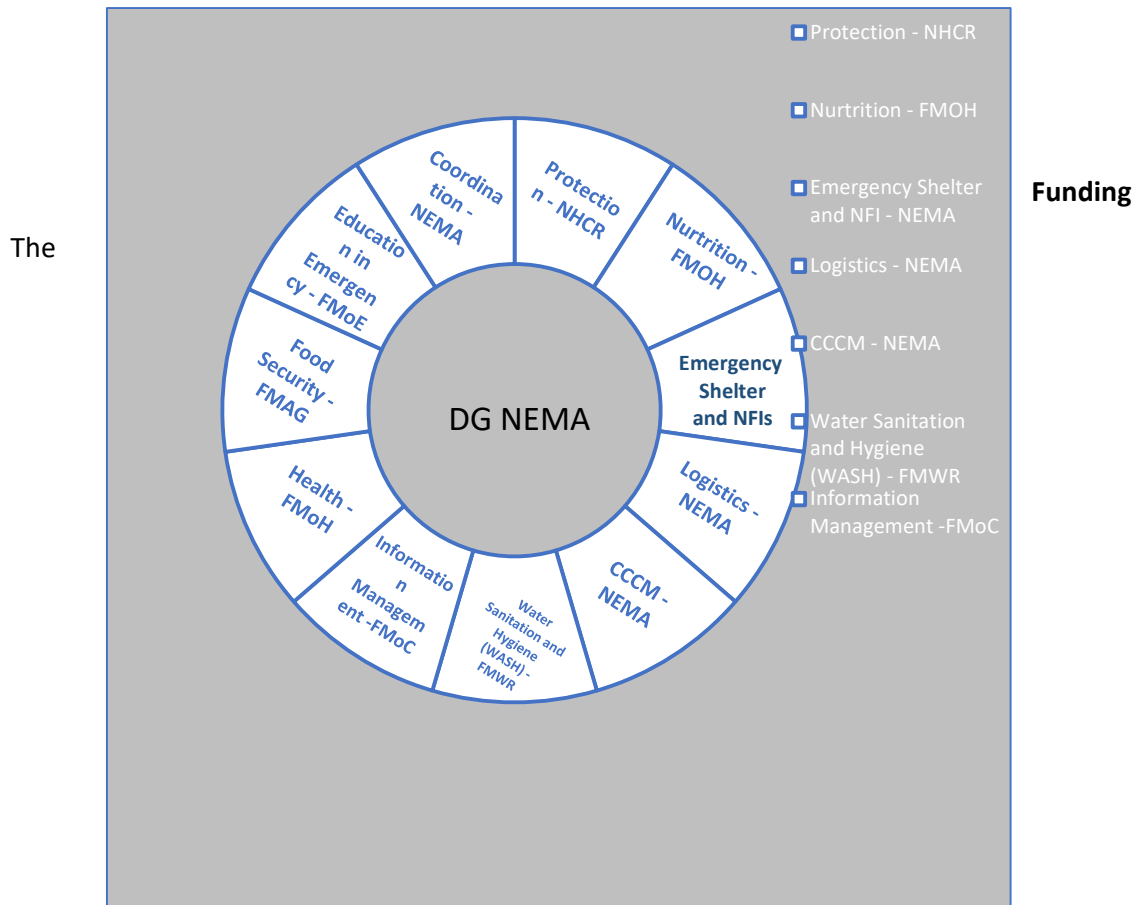
National Humanitarian Country Team: will be led by the Presidency (Office of the Vice President) and will be responsible for overall humanitarian coordination along with Ministers/ CEOs of different MDAs. The UN-HCT provides support and collaborate with Inter Sector Working Groups.

Coordination at National Humanitarian Country Team Level



The Inter-Sector Working Group: will be made up of the government agencies as Focal points of the sectors and will be coordinated by DG NEMA. Sectors will have their meetings coordinated by sector leads with the support of the co-leads.

Coordination at Inter-Sector Working Group Level



Contingency Plan will be funded from Disaster Management funds from NEMA and will be supported by Emergency Response funds from the UN e.g Central Emergency Response Fund (CERF) and National Humanitarian Fund (NHF). This will be in addition to any grants, appeal or funds that the Government of Nigeria might make available for the emergency in the event of its occurrence.

CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

Introduction

Camp Management is a critical aspect of managing interventions especially during displacements induced by disasters. The need for the establishment of proper and well-coordinated camp management system for effective and efficient response to emergencies is crucial to emergency response. In most cases, the success or failure of such interventions depends on the quality of camp arrangement established.

Sectoral Objective

To ensure quality, timely, efficient and effective camp administration, including stakeholders' coordination and management in line with international best practices.

Operational Objectives

- i. To ensure coordination of camp arrangements and administration for internally displaced persons;
- ii. To leverage on the core functions of the lead agencies, supporting agencies and the roles that other actors may play during different phases of an emergency;
- iii. To ensure an improved assistance to and the protection of IDPs in camps;
- iv. To ensure monitoring and evaluation activities at the camp;
- v. To mainstream cross cutting issues at the camps;
- vi. To work out exit strategy for IDPs;
- vii. To organize closure and phase out of camps upon IDP returns.

NATIONAL CONTINGENCY PLAN-NIGERIA

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
Emergency Preparedness	<ul style="list-style-type: none"> - Ensuring SEMAs preparedness for camp establishment and management - Identification of suitable sites - Developing site plans - Coordination meetings - Coordinating the pre-positioning of emergency supplies - Training and Simulation exercises - Linkages with other sectors - Channels of Communication with other stakeholders established - Procurement of database and IT equipment - Creating data base for information sharing among sector leads and other stakeholders - Camp security establishment - Establishing a harmonized template for profiling and data collection - Monitoring & Evaluation - Projection for Exit Strategy 	<ul style="list-style-type: none"> - Existing Permanent Camps- UN Camp Abuja, IDP Camp Bauchi, Bakassi Camp CRS, Lagos Camp Agbowalkosi, Returnees Camp Oru-Ijebu, Ogun State, Bakassi Camp Bayelsa, Oguta IDP Camp(Imo State), Damire Camp - Permanent and temporary tent shelters deployed. Public utilities (water, lavatories, electricity, security, health etc), 	<ul style="list-style-type: none"> - Weak coordination, negative attitude of host communities, insecurity in the camps, Bureaucracy, Lack of Funds, Transparency, lack of functionality and capacity of some SEMAs, lack of Logistic supports, lukewarm cooperation from other stakeholders, Lack of cooperation by camp residents
- Minimum Response	<ul style="list-style-type: none"> - Security/health check of IDPs before admittance into the camp - Profiling/issuance of identification cards. - Facilitating of wet feeding for displaced population. - Coordination meetings - Vulnerability screening of IDPs. - Shelter allocation - Marking and segregation of toilet and showers - Rapid Assessment of the situation of IDPs and of existing facilities and infrastructures - Send out report of Assessment and Appeals - Registration and segregation of IDPs on basis of gender, age, vulnerability and status 	<ul style="list-style-type: none"> - Activation of Permanent Camps - Deployment of temporary tent shelters with water, lavatories, electricity, health etc) - Invite Security agencies and other stakeholders and actors for emergency meeting/deployments 	<ul style="list-style-type: none"> - Weak coordination, negative attitude of host communities, insecurity in the camps, Bureaucracy, Lack of Funds, Transparency, lack of functionality and capacity of SEMAs and other stakeholders, lack of Logistic supports, lukewarm cooperation from other stakeholders, unruliness of camp residents

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	<ul style="list-style-type: none"> - Mobilization of sector specific human and material resources 		
- Comprehensive Response	<ul style="list-style-type: none"> - Establishment of cooking and feeding methodology. - Stockpiling relief materials - Coordination meetings - Periodic reassessment of needs of the camp residents and personnel - Send out periodic report of Assessments and further Appeals - Further Mobilization of sector specific human and material resources - Detailed profiling of IDPs - Initial multi-sectoral assessment - Vocational training for IDPs to prevent dependence - Provision of psychosocial support for IDPs - Set up and maintain a site information management system - Establishing an effective complaints and feedback mechanism (Complaint desk, developing and printing of Instructional Education and Communication materials e.g. posters and information boards) that is accessible to all camp residents. - Establishment of sectoral committees - Strengthening of existing community governance structure and setting up missing ones - Training of committees - Mapping of partners activities (5ws) - Strengthening and establishment of referral pathways - Provision of site maintenance materials - Plan for Early recovery and livelihood resuscitation: equipping the IDP's on life after camp - Provision of credit facilities - Inventory of permanent camps nationwide with documentation in the appendix for identification ease and to prevent accidental bombing by the air force 	<ul style="list-style-type: none"> - Planning for closure and decommissioning of camp - 	<ul style="list-style-type: none"> - Persistence of problem, overlap of responsibility, donor fatigue, - Weak coordination, negative attitude of host communities, insecurity in the camps, Bureaucracy, Lack of Funds, Transparency, lack of functionality and capacity of some SEMAs, lack of Logistic supports, lukewarm cooperation from other stakeholders, lack of cooperation by camp residents
	NEMA, SEMA, FMOH, NCDC, WASH, Security Agencies, Red Cross/Crescent, NGOs, Host Communities, international Development Partners, NAPTIP, NCR, etc, Ministry of Interior, NPHCDA, NAFDAC, NDLEA, NPopC, nbs, Youth corp members, NOA, Environmental Health Officers, NASRDA		

Emergency Shelters and Non-Food Items (NFIs)

Introduction:

Emergency Shelter and Non-Food Items are instrumental to effective relief operation during emergencies. Provision of emergency shelter and NFIs restore the dignity of the affected population.

Sectoral Objective:

To mitigate the impact of emergencies on disaster-affected families through provision of NFIs and emergency shelter.

Operational Objectives:

- a) To identify shelter needs of displaced population;
- b) To identify potential sites for location of emergency shelter camps;
- c) To ensure the pre-positioning and deployment of emergency shelter materials, kits and NFIs
- d) To ensure appropriate shelter facilities for vulnerable group persons

Strategies	Requirements	Currently Available/Deployed Activities	Operational Constraint and Gaps
Emergency Preparedness	<ul style="list-style-type: none"> - MOU with essential service providers - Prepositioning of supplies (ES kits and NFI) - Training of trainers (ToT) to develop the capacity of essential responders and stakeholders/communities on erection, repairs and upgrade of emergency shelter. - Identification of Suitable location and type of shelter for the Environment - Advocacy/collaborative measures towards engaging people at local and community level (Religious heads Inclusive) - Coordination meetings with stakeholders - Identification of location for construction for safe space as shelter 	<ul style="list-style-type: none"> - Shelter kits: 25% - NFIs: 100% 	<ul style="list-style-type: none"> — Ineffective coordination - Inadequate funding — Weak commitment among actors - 75% shelter kits - Lack of capacity in shelter construction and repairs/upgrades
Minimum Response	<ul style="list-style-type: none"> - Rapid Assessment and early registration. - Securing the consent and cooperation of local communities and actors for use of sites; - Deployment of shelter kits and NFIs - Rapid orientation of volunteers and affected persons on the use of NFIs and ES kits - Use of trained community members on erection of ES. - provision of dignity kits to women 		<ul style="list-style-type: none"> - Weak capacity in the construction of emergency shelter - Inadequate prepositioning of emergency shelter materials. - consent and cooperation of local communities and actors for use of sites;
Comprehensive Response	<ul style="list-style-type: none"> - Drafting of Withdrawal Plan - Implementation of Resettlement Plan <ul style="list-style-type: none"> • Rehabilitation (in shelter context) • Reconstruction (where moving back to former abode) • Resettlement (Where moving into new sites) • Post Distribution Monitoring(PDM) • Data collection and profiling of returnees 	<ul style="list-style-type: none"> - Existing Permanent Camps in Gombe, Temporary UN Camp Abuja, IDP Camp Bauchi, Bakassi Camp Cross River State, Lagos Camp Agbowa Ikosi, Returnees Camp Oru-Ijebu, Ogun State. 	<ul style="list-style-type: none"> - Lack of plan for existing camps - Unwillingness of IDPs to leave camp - More state should construct IDP camps - It should be recommended that the security sector look into the post emergency usage of built shelters, to avert confiscation by hoodlums.
	<ul style="list-style-type: none"> - NEMA, SEMA, Fed Min of Works, housing and power, State Ministry of Works , State Ministry of Lands/Survey, Local Planning Authorities, Humanitarian Agencies (Nigerian Society of Red Cross, IOM, UNHCR , NGOs (International, Local), Community, UNFPA. 		

Education in Emergency Sector

Introduction

Education in Emergency (EiE) is a programme recommended by International Network for Education in Emergency (INEE) as a critical part of effective response to situations of displacements due to human/natural hazards induced disasters leading to disruption in regular school activities. It has been established that interruption of Basic Education even for a short period can drastically affect cognitive memory, reduce learning and further expose children to psycho-social trauma. Level of preparedness will help to reduce the impact of emergencies on children. When properly implemented, EiE can also motivate affected population to commence livelihood activities and reduce tension within camp environment. The education plan is a program that will take into account national and international educational policies, upholds the right to education, and is responsive to the learning needs of affected populations. This framework will aim to improve the quality of education and access to schools as well as clearly show the transition from emergency response to development.

Sectoral Objective

- i. Ensure conflict-affected children and adolescents have access to inclusive quality basic education and vocational skills opportunities within a safe learning environment.
- ii. Ensure conflict-affected children and adolescents receive quality and conflict sensitive educational services to enhance their resilience.
- iii. Ensure communities have increased capacity to participate in school development and risk reduction planning and demand equitable access to conflict sensitive quality education for all children and adolescents.
- iv. Individuals do not forfeit their right to education during emergencies and education cannot remain 'outside' the mainstream humanitarian debate, but must be seen as a priority humanitarian response
- v. a broad-based desire and commitment to ensure a minimum level of quality, access and accountability for education in situations of crisis.

Operational Objectives

- I. Carry out sectoral objectives by actively involving the Federal Ministry of Education, State Ministry of Education and State Universal Basic Education Boards (SUBEB).
- II. Ensure availability of trained teachers in Disaster Risk Reduction, Psycho-social Support training, Classrooms and learning materials
- III. Engaging with community and religious leaders, School Based Management Committees (SBMC) and Parents Teachers Associations to build resilience.

Sector Name: BASIC EDUCATION IN EMERGENCY				
Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps	ACTORS
Emergency Preparedness	<ul style="list-style-type: none"> - Coordination and Quarterly meeting - Identify and train teachers on DRR issues, Pshycho-Social Support and emergency preparedness/response - Provision of temporary learning spaces and learning materials with consideration for children with special needs e.g. School in the box/kits, Arts and crafts/tools - Prepositioning of Recreational facilities/items e.g. games, child friendly materials, story- books - Training of Child/community facilitators or guidance and counselling 	<ul style="list-style-type: none"> - temporary learning spaces - Trained teachers /children in DRR/First Aid - Trained Community facilitators 	<ul style="list-style-type: none"> - Difficulties in coordination mechanism - Inadequate Teaching and Learning Educational Materials - Inadequate number of qualified Teachers 	NEMA, FME SMoE, UBEC, SUBEB, NERDC, Development Partners, International/National Non- Governmental Organisations, Civil Society Organisations CSO and Private Sectors.
Minimum Response	<ul style="list-style-type: none"> - Joint rapid assessment by relevant agencies - Identification of separated/unaccompanied children - Educating children on initial security and safety needs in camp like settings/Host communities - Initial awareness raising around hygiene and sanitation 	<ul style="list-style-type: none"> - Rapid assessment tools - Availability of trainers/facilitators 	<ul style="list-style-type: none"> - Parents refusing to release their children for EIE - Finding conducive teaching environment for the children 	FME SMoE, UBEC, SUBEB, NERDC, Development Partners, International/National Non- Governmental Organisations, Civil Society Organisations CSO and Private Sectors.
Comprehensive Response	<ul style="list-style-type: none"> - Establishment of Child-friendly learning Spaces in Camps like settings/Host communities with consideration for children with special needs - provision of WASH facilities/ dignity kits with consideration for children with special needs - Delivery of Supply of educational materials to camps - Promotion of learning activities - Training in arts/crafts /skill acquisition - Recreational facilities - recruitment of volunteer teachers/facilitators 	<ul style="list-style-type: none"> - Continuous teaching - Provision of teaching/learning materials - existing School facilities - Existing government recruited teachers 	<ul style="list-style-type: none"> - Integrating emergency education with the normal school curricula - Inadequate number of facilitators for non – formal and adult education 	FME, SMoE, SUBEB, International Organisations

Water Sanitation and Hygiene (WASH)

Introduction

Water and Sanitation during emergencies is especially vital to successful intervention irrespective of the type, nature or magnitude of the disaster. Provision of safe water and sanitation reduce the risk of secondary threats such as epidemics, diseases and other health-related challenges in camp environment. The risks of waterborne diseases are more pronounced during emergencies. Therefore, water, sanitation and hygiene practices are critical determinants for survival in the initial stages of any disaster.

Sector Overall Objective

To ensure provision of adequate safe drinking Water, Sanitation and Hygiene during emergencies.

Operational Objectives:

- i. To provide safe and adequate water (15L/capita/day of water) supply to affected population,
- ii. To ensure effective sanitation in and out of camp environments during displacement or epidemic situation including mass casualties.
- iii. To ensure effective hygiene practices and hygiene education for affected population.

Specific objective related to interventions: Ensure availability of

- i. Safe drinking water (Aqua tabs, water tanker/Mobile water treatment facilities, plastic tanks, buckets, cups, drilling of HPBHs, SPBHs, MBHs, etc)
- ii. Safe excreta disposal (latrines, potty, soap, disinfectants or support thereto).
- iii. Conduct mass Hygiene education (Conduct CLTS, public awareness through the use of IEC materials, Hygiene promotional messages, etc).
- iv. Vector Control (Fumigation, Bush clearing, etc)
- v. Solid Waste Management (provision of dustbin, waste disposal sites, etc)
- vi. Drainage (Construction of drainages, sewage, etc)
- vii. M&E to establish early warning signs and all levels of implementation.

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
<ul style="list-style-type: none"> - Emergency Preparedness 	<ul style="list-style-type: none"> - Procure plastic tanks, buckets, cups water purification etc. - Needs assessment for capacity building. - Training of volunteers and camp leaders on the maintenance of WASH facilities - Conduct capacity development training for WASH sector partners on EPR - Training of LAMs (Local Area Mechanics) to operate and maintain water facilities. - Co-ordination with WASH in Emergency members and other relevant stakeholders on WASH related issues. 	<ul style="list-style-type: none"> - Equipment (Drilling rig and accessories, tanker trucks, plastic tanks, buckets and cups, plastic bucket fitted with tabs, refuse bin, latrine construction model material and water treatment kit). - Chemical (chlorine, water treatment tablets, etc). - Other materials (filter cloths, stoves, etc) - Agreements with service providers and suppliers 	<ul style="list-style-type: none"> - Inadequate Equipment (Drilling rig and accessories, tanker trucks, plastic tanks, buckets and cups, plastic bucket fitted with tabs, refuse bin, latrine construction model material and water treatment kit). - Chemical (chlorine, water treatment tablets, etc). - Other materials (filter cloths, stoves, etc) - Agreements with service providers and suppliers
<ul style="list-style-type: none"> - Minimum Response 	<ul style="list-style-type: none"> - Objective (a): safe drinking water - Dispatch water tanker to provide safe drinking water. - Drill borehole(s) - Supply water treatment tablets and chlorine to treat contaminated water - Boiling of water where appropriate - Supply of water purification Buckets - Objective (b): Safe Excreta Disposal - Construct emergency Latrines - Provide soap, Hand washing buckets and disinfectants to support good personal hygiene practice. - Supply of Personal Hygiene and Dignity kits. - Supply WASH NFIs (plastic kettle, brooms, rakes, shovels etc). - Objective (c): Hygiene Promotion - Conduct mass health education (use of IEC materials, conduct of CLTS, Training of VHPs, conduct of Hygiene promotion messages through electronic media, etc) - Objective (d): Vector Control - Fumigation of emergency camps periodically against vectors - Bush clearing around emergency camps - Objective (e): Solid Waste Management - Supply and provision of Dustbins, Brooms, rakes, etc. 	<ul style="list-style-type: none"> - Deployment of water tankers - Provision of boreholes - Deployment of mobile water treatment facilities and regiments - Supply of buckets with lids, jerry cans - Training on water treatment - Provision of emergency trenches - Construction of emergency latrines, shower space, bathing space and washing area. - Provision of soaps for hand washing and bathing - Formation of WASH committee (WASHCOM) - Procurement of fumigants and its accessory - Bush clearing and environmental sanitation and fumigation. - Sensitization on CLTS and hygiene education - Deployment waste disposal van - Decommissioning of latrines - Deployment of construction materials 	<ul style="list-style-type: none"> -

	<ul style="list-style-type: none"> - Periodic environmental Sanitation (Daily, weekly, etc) - Evacuation of solid waste from collection center to dump sites. - Conversion of waste to wealth (Recycling of wastes) - Objective (f): Drainage - Construction of emergency drainage system/channel - 		
- Comprehensive Response	<ul style="list-style-type: none"> - Continuous assessment of provided WASH facilities - Provision of logistic support for routine monitoring (vehicles, jotters, pens, etc.) - Provision of GPS gadgets, Laptops, iPads, Video and Still cameras, etc. - Provision of reflective jackets for site identification. - Strengthening of the WASH in Emergency secretariat. 		

Food Security**Introduction**

Food and Nutrition provision are key components to save lives and reduce human suffering in emergencies. Depending on scale and magnitude of such disaster, affected population may suffer hunger and malnutrition increasing the risk of diseases and deaths.

Sectoral Objective

To reduce human suffering and risks of deaths during emergency situations through the provision of adequate and quality food that meets their daily nutritional requirements, building resilience and restoration of livelihood.

Operational Objectives

- i. Supporting victims (Households) to regain resilience through the provision of Agricultural production inputs and advisory/extension services.
- ii. To ensure the availability and accessibility of food items that meet the daily nutritional needs of the affected population during emergencies in line with international best practices
- iii. To ensure that, the affected population is adequately supplied with food stuff while recognising special requirements/nutritional needs of children, pregnant women and lactating mothers and vulnerable persons

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
Emergency Preparedness	<ul style="list-style-type: none"> - Planning/Coordination Meetings - Meeting with Stakeholders (Needs assessment) - Monitor emergency triggers - Identify sources and Survey of prices of food items (Pre-position food supply) - Establishment of database for proper food distribution - Ensure standard storage in line global standards. 	<ul style="list-style-type: none"> - MoUs with food suppliers - Transportation of food items to the affected areas - Identify and source for storage structures - Tracking of food trucks - Food vouchers 	<ul style="list-style-type: none"> - Weak coordination - Inadequate storage and distribution system - Infiltration from host communities
Minimum/Medium Response	<ul style="list-style-type: none"> - Situational analysis – Food security assessment - Provision of wet ration to beneficiaries - Distribution of dry ration - Quality control and proper storage of food items 	<ul style="list-style-type: none"> - Mobilization of food items to affected areas - Classification of food needs for the different groups, e.g. Vulnerable group, pregnant women - Distribution of food items to affected population - Monitoring food distribution to affected population 	<ul style="list-style-type: none"> - Inadequate storage and distribution procedure - Better quality control needed: Some of the food items supplied are near expiration - Challenges of crowd control due to inadequate distribution procedures - High cost of food materials due to scarcity in the affected areas.
- Comprehensive/ Long term Response	<ul style="list-style-type: none"> - Provision of ON and OFF Farm storage facilities - Food supply chain management - Value chain Development. - Conditional Cash Transfer - Provision of Farm/Input - Provision of extension services - Access to farm land - Safe Access to Fuel and Emergency 	<ul style="list-style-type: none"> - Inventory of food items - Distribution of food items - Warehouses - 	<ul style="list-style-type: none"> - Overlap of response provision - Delayed evacuation of affected persons from the area. - Extension of camp period
Actors	- FMARD, NEMA, SEMA, LEMC, NPFS, UNICEF, FAO, WFP,NGOs, FMOH		

Nutrition

The problems of malnutrition are heightened in emergencies, making nutrition response critical. Protecting the nutritional status of vulnerable groups affected by emergencies is very important to the success of an emergency response. Emergencies have an impact on a range of factors that can increase the risk of malnutrition, illness (morbidity) and death (mortality). Emergencies can often be the tipping point, revealing and exacerbating underlying pre-existing nutrition concerns. If a population has a relatively good nutritional status at the onset of an emergency, it is important to protect this through appropriate responses as it can deteriorate during the emergency.

Sectoral Objective

To Prevent excess mortality and morbidity as a result of malnutrition by ensuring access to nutritional services and protecting the nutritional status of those affected especially the vulnerable.

Operational Objectives

1. Provide quality services for managing acute malnutrition for children (boys and girls 6-59 months) and pregnant or breastfeeding women by increasing access to treatment
2. Increase the capacity to identify malnourished children and promote services preventing undernutrition while supplementing for micro- nutrient deficiencies.
3. Promote access to services preventing under-nutrition for the vulnerable groups (children under five and pregnant and caregivers of children less than 2 years of age) focusing on infant and young child feeding in emergencies, micronutrient supplementation, and blanket supplementary feeding.
4. Support, promote and protect appropriate infant and young child feeding and nutritional care for groups with special needs e.g. HIV/AIDS.
5. Ensure that young children appropriately receive appropriate and safe complementary foods in emergency
6. Ensure a coordination of nutrition interventions during the emergency

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
Emergency Preparedness	<ul style="list-style-type: none"> - Planning/Coordination Meetings - Monitor emergency triggers - Ensure standard storage in line with global standards. - Anthropometric equipment' & therapeutic food & food supplements - Train a critical mass of health workers on Nutrition in Emergency - Procure and maintain a stock of RUTF - Build the capacity of the national government and partners to adequately address nutrition emergency response by investing in up-to-date and agreed upon technical standards for core NiE programming 	<ul style="list-style-type: none"> - Ready to use Therapeutic Food (RUTF) - Nutrition in Emergency Working Group (NIEWG) 	<ul style="list-style-type: none"> - Weak coordination - Inadequate funding - Inadequate nutrition assessment kits - Inadequate technical skills on nutrition assessment and food utilization
Minimum/ Medium Response	<ul style="list-style-type: none"> - Situational analysis – nutrition assessment - Conduct a needs assessment - Establish a nutritional assessment and surveillance systems - infant and young children feeding (IYCF) counselling sessions and hygiene promotion; - Undertake a mapping of existing capacities for the management of acute malnutrition - Establish sites for the management of acute malnutritionblanket supplementary feeding programme (BSFP) for children and pregnant and lactating women; Develop and share consistent and appropriate communication on IYCF in emergencies - distribution of micro-nutrient powders, vitamin A and deworming; screenings for the identification of malnutrition cases at the community level and referral to outpatient therapeutic programme (OTP) for treatments; mobilising adequate human resources such as community nutrition workers to support activities; and mobile teams' identification, equipping and training to support with outreach. Develop and share consistent and appropriate communication on IYCF in emergencies - Establish safe spaces that protect, support & promote optimal IYCF practices 	<ul style="list-style-type: none"> - Classification of food needs for the different groups, e.g. Vulnerable group, pregnant women - 	<ul style="list-style-type: none"> - Inadequate storage and distribution procedure <ul style="list-style-type: none"> - Non availability of supplies - Inadequate trained manpower

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<ul style="list-style-type: none"> - Comprehensive/ Long term Response 	<ul style="list-style-type: none"> - Nutrition Education - Nutritional Impact Assessment - distribution of micro-nutrient powders, vitamin A and deworming; - screenings for the identification of malnutrition cases at the community level and referral to outpatient therapeutic programme (OTP) for treatments; - Conditional Cash Transfer - - establish new sites/services and/or mechanisms for surge support in high risk locations - Nutritional supplementation with vitamin A, Micro Nutrient Powder 	<ul style="list-style-type: none"> - Ready to use Therapeutic Food (RUTF) - Other nutrition commodities - 	<ul style="list-style-type: none"> -
Actors	<ul style="list-style-type: none"> - FMOH NEMA, SEMA, LEMC, NPFS, UNICEF, FAO, WFP,NGOs, 		

Protection

Introduction

Protection issues especially in disasters leading to mass displacement of people can have significant impact on the human right of the affected population when inadequately managed. It is important to acknowledge the different vulnerabilities, needs and capacities of affected groups. Factors such as gender, age, disability and HIV/AIDS status, increase vulnerabilities and affect the ability of people to cope. Particularly, women, children, the aged and PLWHA may suffer specific disadvantages in coping with a disaster and may face cultural and social barriers in accessing services and other support to which they are entitled. Frequently, ethno-religious or political affiliation and displacement also predispose certain people to risk. Failure to recognize the differing needs of vulnerable groups and the challenges they face in gaining equal access to appropriate services and support can result to further marginalization or denial.

6.1. Sectoral Objective

- i. To ensure special protective measures and care are provided for most vulnerable population in emergencies.
- ii. To ensure that issues of equity, diversity, non-discrimination and other human right principles are observed during provision of humanitarian services to affected persons.
- iii. To ensure rights to dignity and preservation of worth/ esteem (~~human rights~~) is adequately protected
- iv. To ensure rights of children to a safe environment is guaranteed, including
- v. facilitating child tracing, registration and establishment of safe “playing areas” within camp/ out of camp environments.

6.2 Operational Objectives

- i. To ensure the protection of vulnerable groups especially women, children, the aged, PLWAs and people living with disabilities from abuse, exploitation, stigmatization, neglect, harm, ~~exploitation~~, abduction, recruitment into fighting forces, sexual violence, lack of opportunity to participate in decision making.
- ii. To ensure proper documentation and effective reporting systems are in place to aid investigation and intervention.
- iii. To ensure the provision of social welfare services for the affected population.

Sector Name: Protection				
Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps	ACTORS
Emergency Preparedness	<ul style="list-style-type: none"> - Coordination and Quarterly meetings to compile, adapt and enforce existing national and international protocol and laws on human rights protection. Mapping of HIV in emergency stakeholders, systems and structures by state at all levels. - Set up Advocacy working groups - Mobilise/sensitise Child protection networks and capacity building of FMWASD, responders/aid workers on prevention and response to Gender violence, code of conduct on sexual exploitation, post rape care to protect Vulnerable groups (women, children, aged, physically and mentally challenged, PLWHAs, etc) in disaster/emergency situations - Develop/adapt relevant messages on prevention of gender violence, sexual exploitation in emergencies - Sensitization advocacy on the rights of individuals, PLWHA, GBV prevention, victims of sexual violence with youth groups, women groups, NGOs, media, opinion leaders (through awareness campaigns, community outreaches, electronic and print media) - Assessment of convenience areas for the affected population - Develop/adapt an orientation manual on prevention of gender violence, sexual exploitation, life skills and HIV prevention for women and, adolescents and other vulnerable groups - Stockpiling aids and appliances including HIV related supplies like condoms and contraceptives, SBCC materials, NFI's, dignity 	<ul style="list-style-type: none"> - Child protection networks existing in some states, Child Rights ACT passed at the national level and in some states. (24 STATES) confirmed - NAPTIP providing services for trafficked children and women - SBCC strategy available, 111 NGOs trained on SBCC and Minimum prevention package intervention by NYNETHA using Global Fund round 9 - Existing NPTWG and SPTWG in some states that coordinate prevention activities. - Police has gender and child friendly desks in some states - NHRC Protection monitoring ongoing in 3 NE States mostly affected by Boko Haram Insurgency - NACA has established GBV Response desk point in some states (6 STATES) CONFIRMED - PLWD bill signed into law 	<ul style="list-style-type: none"> - Bureaucracy - Inadequate training - Inadequate skilled personnel - People living with disabilities and the elderly usually find it difficult to use facilities provided at camps - Weak implementation of policies/legislation and systems for service provision for people with disability - Inadequate funding - Inadequate facilities and working tools - Weak coordination of HIV in emergency - Non-availability of data on HIV response in emergencies from previous camp activities (number of people on camp disaggregated by sex and age, access to HCT, ARVs, condoms, post rape care etc) - Law enforcement agencies do not have adequate knowledge on human rights laws - Inadequate legal framework - Weak Interagency synergy / collaboration 	<p>NEMA, SEMA, LEMC, FMWASD, NDLEA, NAPTIP, NHRC, NPS, NPF, FMOJ, NACA, NCFRMI, OHCHR, UNFPA, UNHCR, UNICEF, FIDA, Legal Aid Council, NPHCDA, Red cross, Save the Children, NYNETHA, NGOs, CSOs, Community and gatekeepers</p>

	<p>kits), for affected population, including the vulnerable group.</p> <ul style="list-style-type: none"> - Meeting/Planning with relevant actors - Adequate training and retraining of relevant actors - establish network on Disaster Response and management by relevant Agencies 			
Minimum Response	<ul style="list-style-type: none"> - Provision of secured and safe spaces/services in/ out of camps - activate Advocacy working groups - Reception and documentation - Training and retraining of all response actors - documentation for tracing and restoring family links - Counselling and psycho-social support for affected persons and responders - Equitable access to facilities and services - Enforcement of human rights laws - Awareness and sensitization on prevention of sexual exploitation using developed SBCC materials - Mobilization of trained staff on camp to establish camp committees for protection of vulnerable groups and legal aid services - Orientation training for women, adolescent and other vulnerable groups on prevention of gender violence, sexual exploitation and abuse, life skills and HIV prevention - Availability and access to condoms-and other contraceptives - Sensitization on land mines/ IEDs - Oranization Land Mines/ IED clean-up exercise 	<ul style="list-style-type: none"> - Secured and safe spaces/services in camps - Reception and documentation areas - Documentation for tracing and restoring family links - Counselling and psycho-social support for affected persons and responders - Awareness on usage and provision of condoms, other contraceptives and dignity kits - NGOs already trained on prevention and SBCC - HIV prevention training materials and modules, available to young people and the general population - Human rights awareness on going 	<ul style="list-style-type: none"> - Limited Advocacy centres - Poor documentation for tracing and restoring family links - Poor capacity in responding to HIV in emergencies - Non-domestication of the Kampala convention on IDPs - Poor data collection & management, monitoring and reporting - Weak coordination mechanism - Poor knowledge and capacity on dangers and existence of landmines/ IEDs - Weak Interagency synergy / collaboration - Frequent changes of key sector officers 	<p>NEMA, SEMA, LEMC, NDLEA, NAPTIP, NHRC, NPS, and CSOs NPF, FMOJ, NACA, NCFRMI, OHCHR, UNFPA, UNHCR, UNICEF, FIDA, Legal Aid Council, NPHCDA, Red cross, Save the Children, NYNETHA, NGOs , CSOs Community and gatekeepers</p>
Comprehensive Response	<ul style="list-style-type: none"> - Documentation matrix for IDPs should be disaggregated by gender, age etc - Refresher training for social workers and other relevant stakeholders on human right approach to disaster management - Awareness on safe sex practices - Sensitization on safe family planning practices 	<ul style="list-style-type: none"> - Continuous sensitisation on usage and provision of condoms and other contraceptives - Continuous updating of data base for affected population 	<ul style="list-style-type: none"> - Poor documentation - Weak enforcement of human rights laws and protection system - Poor funding - Weak coordination mechanisms 	<p>NEMA, SEMA, LEMC, NDLEA, NAPTIP, NHRC, NPS, and CSOs NPF, FMOJ, NACA,NCFRMI, OHCHR, UNFPA,</p>

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	<ul style="list-style-type: none"> - provision of condoms, other contraceptives and dignity kits - - Ensure enforcement and strengthening of Human Rights laws and protection systems and structures in the community - Ensure feedback mechanisms on the reported cases of discrimination and other human rights violation - Establishment of an information management system on reported human rights violations - Initiate best practices in rights protection (especially in relation to HIV, GBV, Child Protection, persons with disabilities, etc in emergencies) - Speeding up the process of establishment and management of database of missing persons in Nigeria - Effective implementation of the national contingency plan - Promote access to housing and land resources for agriculture 	<ul style="list-style-type: none"> - National technical committee on the establishment and management of database of missing persons in Nigeria - Existence Idp committees in the National Assembly 	<ul style="list-style-type: none"> - Poor political will at subnational - Inadequate legal framework - Weak Interagency synergy / collaboration 	<p>UNHCR, UNICEF, FIDA, Legal Aid Council, NPHCDA, Red cross, Save the Children, NYNETHA, NGOs , CSOs Community and gatekeepers MWLH and MOA</p>
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Health

Introduction:

Health care during emergencies is very essential to reduce morbidity, mortality and disability. Vulnerable groups such as the wounded, sick, children, pregnant women, lactating mothers, PLWHAs, victims of sexual violence, , people with special needs, the aged and traumatized may require medical attention. Additional support for vaccines, medications, laboratory and other care will be required.

Sectoral Objective:

To ensure access to healthcare services delivery to the affected population in emergency situations within a functional health system.

Operational Objectives:

- i. To reduce mortality, morbidity and disability
- ii. To reduce and respond to epidemics and pandemics during humanitarian response
- iii. To ensure effective, efficient and appropriate health care delivery to vulnerable groups within a functional health system.

NATIONAL CONTINGENCY PLAN-NIGERIA

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
Emergency Preparedness	<ul style="list-style-type: none"> - Coordination meeting- - Database of stakeholders - Simulation exercises - Constitution of Rapid Response Team - Training and re-retraining of staff on health emergency response - Sensitization/campaigns - Pre-positioning of drugs/medical supplies - Maintain database of volunteer health workers - Budgetary provision by relevant MDA's - Equipping of health facilities and diagnostic laboratory - Quality control - Partnership with NCDS on Epidemics Surge (Lassa, Cholera, Ebola) 	<ul style="list-style-type: none"> - National stakeholders meeting coordinated by NEMA HQ in collaboration with FMOH, zonal stakeholders meeting coordinated by NEMA zonal offices in collaboration with SEMA, LEMA and SMOH - Training - Sensitization - Medical Intensive Care Units & Ambulances - Mobile water treatment plants - NEMA Air Wing for emergency Medical evacuation Availability of medical personnel - existing specific referral hospital 	<ul style="list-style-type: none"> - Inadequate personnel - Training - Inadequate funding - Turf protection affect coordination - Lack of political will and commitment - Humanitarian Emergency Preparedness and Response Plan (HEPRP) - Poor coordination - Meeting the reproductive needs of the affected population especially female IDP's. - Updated data collection and info management - Confirmatory laboratory for highly infectious diseases
Minimum Response	<ul style="list-style-type: none"> - Rapid assessment to determine situation on ground and level of intervention by other stakeholders - Rapid assessment of health facilities - Immediate deployment of trained medical personnel and equipment - Setting up of camp clinic - Documentation/registration - Logistics and supplies - deployment of drugs - Adequate drug storage - Psychosocial support - Health prioritisation - Accessibility for physically challenged and special needs persons; - sensitization and preventive measures on diseases and hygiene practice - Provision of Isolation facilities & Incinerators 	<ul style="list-style-type: none"> - Rapid assessment to determine situation on ground and level of intervention by other stakeholders - Immediate deployment of trained medical personnel and supplies - Setting up of camp clinic - Documentation/registration - Reproductive Health kits - Integrated Diseases, Surveillance and Response IDSR, International Health regulation IHR - Vaccinations - Ready to use therapeutic food (RUTF) - Mortality and nutritional survey among the IDPs - Limited Isolation Facilities 	<ul style="list-style-type: none"> - Inadequate personnel - Gaps in needed skill - Inadequate funding - Difficulties in identifying people with special health conditions, - health facilities could be depleted - Movement of highly infectious samples - Accessibility - Isolation facilities - Incinerators
Comprehensive Response	<ul style="list-style-type: none"> -Review meeting with MOH and other stakeholders to determine situation on ground and work out modalities to hand over - Case management 	<ul style="list-style-type: none"> -Existing MOUs for referrals -Volunteer health workers -International Red Cross and Red Crescent 	<ul style="list-style-type: none"> - Inadequate preparedness - Inadequate funds - Non availability of sectoral Contingency Plan - Skill gaps among health care workers

Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps
	<ul style="list-style-type: none"> - Identify and designate appropriate health facilities for referral if need be (establish MOUs with health facilities for referrals) - Rehabilitation - Health education and counselling - Segregation of cases - Winding up - Deployment of drugs and other supplies 	<ul style="list-style-type: none"> - NEMA Intensive Care Units & Ambulances; Mobile Water Treatment Plants; NEMA Air Wing for emergency Medical evacuation - Availability of executive medical volunteers; Psycho-social support 	
	NEMA, FMOH, SMOH/ LGA, NACA, SACA, SEMA,LEMC, NGOs and partners, NCDC, NPHCDA, Medical volunteers, Military Medical corp, WHO, UNFPA		

LOGISTICS

Introduction

The provision of humanitarian services during emergencies depends largely on the availability of effective operational logistic support and functional communication system. Effective logistic support relies on transportation and storage facilities while effective communication amongst the response agencies depends on the establishment of efficient alternative communication system and trained personnel.

Sectoral Objective:

To provide effective logistics and communication services for quality service delivery to the affected population.

Operational Objectives:

The overall operational objectives of this sector are, to ensure:

- i. efficient and effective logistic systems are provided during emergencies
- ii. appropriate logistical mapping and contractual arrangements/MoUs are arranged ahead of needs
- iii. Efficient and effective communication are planned ahead of emergencies response.

Sector Name: Logistics				
Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps	ACTORS
Emergency Preparedness	<ul style="list-style-type: none"> - Having MoU with transporters and airline operators, Construction Companies - Communication Gadgets - provision of <u>imaging</u> to aid logistics - ensure ware houses are in good condition - use of temperature control instead of fumigation 	NURTW, NARTO, UMT, NIWA, Search and Rescue boats, FRSC vehicles, helicopters GPS, Tracker.	<ul style="list-style-type: none"> - Need MoU with other transporters. - Insufficient Communication Gadgets 	NURTW/NARTO/FRSC/NEMA/SEMA/NPF/Military, NIWA Construction Companies NASRDA, WFP
Minimum Response	50 Trucks 30 Buses 30 Ambulances 30 SAR vehicles 50 Inflatable Boats 100 Life Jackets 6 Helicopters	20 Trucks 20 Buses 30 FRSC Ambulances 8 SAR vehicles 10 Inflatable Boat 50 Life Jackets 1 helicopter	30 Trucks 10 Buses Nil 22 SAR vehicles 40 Inflatable Boats 50 Life Jackets 5 Helicopters	NURTW/NARTO NEMA/FRSC/NIWA, Military, Construction Companies
Comprehensive Response	Regular meeting with relevant stakeholders	Meeting with NURTW, NARTO, FRSC, NPF, NIWA, Construction Company, Military.	Need for regular meeting	NEMA/SEMA/FRSC/NPF/NURTW/ NARTO/NIWA, Military, Construcccion Company, Police, Fire service.

Sector Name: Warehouse				
Strategies	Requirements	Currently Available/Deployed Activity	Operational Constraint and Gaps	ACTORS
Emergency Preparedness	<ul style="list-style-type: none"> - MOUs with Stakeholders - Arrangement for Renting additional warehouses - Identify available warehouses - 16 warehouses - 16 forklifts - Pallets for warehouses - Source of lights - Security - Rodenticide/insecticide 	<ul style="list-style-type: none"> - 16 warehouses - Non - Non - 16 warehouses - 7 forklifts - 80% pallets available - Available in Abuja, Maiduguri, Jos, Lagos, Kaduna, Enugu, Owerri, Kano, Gombe, Ekiti, PH, Sokoto, Yola, Minna - Quarterly Fumigación 	<ul style="list-style-type: none"> - No MOUs - No arrangement for rentage - 2 warehouses - 9 forklifts - 20% pallets for warehouses - 16 Generators - Security for Ibadan, Edo. - Inconsistent fumigation of the warehouses. 	<p>NATIONAL CONTINGENCY PLAN-NIGERIA</p> <p>NEMA/SEMA,</p> <p>Military, Private Companies.</p>
Minimum Response	<ul style="list-style-type: none"> - Activation of MoUs - Logistic rapid assessment - Route mapping - Training of volunteers 	<ul style="list-style-type: none"> - Nil - NEMA - NEMA - NEMA 	<ul style="list-style-type: none"> - Activation of MoUs - Logistic rapid assessment - Route mapping - Training of volunteers 	NEMA/SEMA, Private Companies
Comprehensive Response	<ul style="list-style-type: none"> - Review Meetings with stakeholders - Update MOUs - Proper stacking of material - FIFO/LIFO - Training of staff 	<ul style="list-style-type: none"> - Nil - Nil - Available - Available - Available 	<ul style="list-style-type: none"> - No Review Meetings with stackholders/update of MoUs 	NEMA/SEMA, Private Companies

INFORMATION MANAGEMENT

Functions of the Sector shall amongst others include:

Information management:

- Prepare situation reports (SITREPs) and other technical documents
- Coordinate the timely and effective distribution of information.
- Organize the exchange of information with major national and international health sector agencies.
- Collect, organize, and preserve reports and other technical or scientific information relating to the emergency or disaster.
- Assist in management of communications media and in distributing key messages.
- Monitor coverage by communications media.
- Facilitate and promote activities that will increase the visibility of the affected sector.

Communication

Emergency Operations Center (EOC)

- Emergency Operations Centers will be responsible for organizing and controlling operations and making the required decisions for effective emergency management.
- Their main function is to coordinate emergency response and make the policy and technical decisions that will ensure an effective and timely response.
- EOC actions will be based on available information. Sectoral and geographic (e.g the health sector EOC; national, regional, or local EOCs)
- EOCs will be located in affected region as security allows, and will be equipped with adequate technological and human resources to maintain rigorous oversight of each detail of the response to an emergency.

Situation Room

The Situation Room will be established to collect and analyse the information needed for the EOC to make decisions. Information about the emergency is received, organized, processed, and disseminated through the Situation Room. Physically, the Situation Room may or may not be connected with the EOC and share facilities, or it could be located in an annex or other space. It may be a “virtual room,” with information provided via the Internet.

Vital information provided by the EOC and Situation Room

- Percentage of population affected (by age, sex, location, etc.).
- Critical needs of the population (satisfied or unsatisfied)
- Percentage of population that has received some form of assistance
- Conditions of essential services in the affected zone
- Main actions undertaken by the state or by international agencies

Awareness and Sensitization

S/N	Items	Activities	Target audience	Contingency plan
1	Advocacy visit	Visit to CEOs, relevant stakeholders, traditional rulers	Impacted communities, states and IDP camps	Distribute IEC materials, town hall meetings and Information gathering
2	Early warning signs campaigns	Production of IEC materials, town hall meetings, town criers, stake holders meetings, jingles, drama sketches. etc	Affected communities/ states/ IDP camps	Production of radio and TV jingles, advertorials
3	Remediation, counseling and intermediations	Experts and professionals to do subject specific advocacy and campaigns	Affected communities/ states/ IDP camps	IEC Materials, drama sketches and jingles
4	Develop effective and functional information management mechanism/ directory	Create communication modes and platforms among members and sub committees	All committee and sub committee members Create desk officers	Create communication tools and facilities. Create closed user group with Telecom service providers
5	Lifeline Communications	Public service announcements on humanitarian crisis information	Affected population	Use of media landscape map (Identifying community based media organization)

Actors	- Federal Ministry of Information, NoA, NEMA, nasrda, nimet, nhisa, Surveyor General of Nigeria, National Population Commission, Media organization
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Annex 1-Risk Analysis Tool Kit

NOTE: Please identify ONLY the risks with humanitarian consequences that affected the large population and NOT incidences.

Zone's Name:

State covered:

(1) Environmental Disasters:

	11.1 Flood					11.2 Drought					11.3 land slide					11.4 Erosion								
Likelihood	1	2	3	4	1	2	3	4	5	5	1	2	3	4	5	1	2	3	4	5				
Impact	1	2	3	4	1	2	3	4	5	5	1	2	3	4	5	1	2	3	4	5				
Is the Risk Seasonal?																								
Yes				No			Yes			No			Yes			No			Yes			No		

(2) Seriousness of the risks is equal Likelihood and impact on the populations

General Rating of the risk

Seriousness of Risks = Likelihood x impact

Likelihood					X	Impact				
1	2	3	4	5		1	2	3	4	5

(3) Projected caseload (*individuals*) due to the accrued risk(s). select one option only

- | | | | |
|---|---|---|---|
| (11.1) | (11.2) | (1.3) | (11.4) |
| <input type="radio"/> 0 – 5,000
<input type="radio"/> 5,001 – 10,000
<input type="radio"/> 10,001 – 20,000
<input type="radio"/> 20,000 – 40,000
<input type="radio"/> 40,001 – 80,000
<input type="radio"/> 80,001 – 200,000
<input type="radio"/> 200,001 – Above | <input type="radio"/> 0 – 5,000
<input type="radio"/> 5,001 – 10,000
<input type="radio"/> 10,001 – 20,000
<input type="radio"/> 20,000 – 40,000
<input type="radio"/> 40,001 – 80,000
<input type="radio"/> 80,001 – 200,000
<input type="radio"/> 200,001 – Above | <input type="radio"/> 0 – 5,000
<input type="radio"/> 5,001 – 10,000
<input type="radio"/> 10,001 – 20,000
<input type="radio"/> 20,000 – 40,000
<input type="radio"/> 40,001 – 80,000
<input type="radio"/> 80,001 – 200,000
<input type="radio"/> 200,001 – Above | <input type="radio"/> 0 – 5,000
<input type="radio"/> 5,001 – 10,000
<input type="radio"/> 10,001 – 20,000
<input type="radio"/> 20,000 – 40,000
<input type="radio"/> 40,001 – 80,000
<input type="radio"/> 80,001 – 200,000
<input type="radio"/> 200,001 – Above |

(4) List the affected locations/LGA:

(5) Description of the Risk: (write between 2,000 to 3,000 words only)

Definition of Terms For Risk Analysis Tools

Affected locations/LGAs: refers to Local Government Areas LGAs where the disaster/emergency occurs

Armed Conflict: A conflict in which government forces are fighting with armed insurgents, or armed groups are fighting amongst themselves. (OCHA)

Impact: the effect or severity of a hazard/disaster/emergency on human, material, economic or environment.

Likelihood: the probability or chance that something will happen

Projected caseload: population whose lives, property, and livelihoods are threatened by given hazards

Risk: The probability of harmful consequences, or expected losses (deaths, injuries, property, livelihoods, economic activity disrupted or environment damaged) resulting from interactions between natural or human-induced hazards and vulnerable conditions.

Risk assessment/analysis: The process of conducting a risk assessment is based on a review of both the technical features of hazards such as their location, intensity, frequency and probability; and also the analysis of the physical, social, economic, security and environmental dimensions of vulnerability and exposure, while taking particular account of the coping capabilities pertinent to the risk scenarios

State covered: refers to the names of States within the geopolitical zones

Violence: when certain aspects of culture, the symbolic sphere of our existence - exemplified by religion and ideology, language and art, occupation are used to justify, legitimise, or direct structural violence". Examples include:

1. Ethno-religious
2. Resources Based Violence:
3. Electoral Violence
4. Gender based violence and sexual gender base violence.

Zone's Name: this refers to the political and geopolitical zone based on the National arrangements.

Rating of the risk, likelihood and impact: (1) means the lowest and (5) means the highest.