Active in Nigeria during the Biafran war (1966–1970), the ICRC established a delegation in the country in 1988. It seeks to protect and assist the people affected by emergencies throughout the country, paying particular attention to those caught up in the conflict in the north-east; it also visits detainees. It works closely with the National Society and supports its capacity-building efforts in emergency preparedness and restoring family links. Working with the authorities, the armed forces/police, civil society and the Economic Community of West African States, the ICRC promotes awareness of IHL and its implementation at national level.

**MAIN TARGETS FOR 2017**

- People affected by conflict in the north-east and other violence in the Middle Belt and the south meet their urgent needs through Nigerian Red Cross Society/ICRC relief distributions, including in areas that are challenging to reach.
- IDPs, returnees and residents strengthen their resilience to conflict and other violence with the ICRC’s assistance: support for resumed agriculture, renovating water systems in Maiduguri and elsewhere, and constructing shelters.
- People in remote areas, particularly women and children, have better access to health services through fixed or mobile clinics backed/established by the ICRC; the weapon-wounded are treated by ICRC surgical teams in Maiduguri.
- The authorities and weapon bearers take steps to protect healthcare workers and other civilians, including women and children, and provide people with basic services or facilitate their access to them.
- Detainees, including those held by the army and the police, are visited by the ICRC to monitor their treatment and living conditions; ailing and malnourished inmates are treated by the authorities with support from the ICRC.
- Children reunite with their families with the help of Movement components in the region. Relatives of missing people get legal, psychosocial and other assistance via peer-support sessions and referrals facilitated by the ICRC.

**BUDGET IN KCHF**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protection</td>
<td>9,078</td>
</tr>
<tr>
<td>Assistance</td>
<td>64,772</td>
</tr>
<tr>
<td>Prevention</td>
<td>4,233</td>
</tr>
<tr>
<td>Cooperation with National Societies</td>
<td>3,191</td>
</tr>
<tr>
<td>General</td>
<td>379</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>81,653</td>
</tr>
<tr>
<td>Of which:</td>
<td></td>
</tr>
<tr>
<td>Overheads</td>
<td>4,983</td>
</tr>
</tbody>
</table>

**PERSONNEL**

- Mobile staff: 100
- Resident staff (daily workers not included): 495

**ASSISTANCE**

<table>
<thead>
<tr>
<th>Category</th>
<th>Targets (up to)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Civilians (Residents, IDPs, Returnees, etc.)</td>
<td></td>
</tr>
<tr>
<td>Economic security (in some cases provided within a protection or cooperation programme)</td>
<td></td>
</tr>
<tr>
<td>Food commodities</td>
<td>Beneficiaries 300,000</td>
</tr>
<tr>
<td>Essential household items</td>
<td>Beneficiaries 150,000</td>
</tr>
<tr>
<td>Productive inputs</td>
<td>Beneficiaries 240,000</td>
</tr>
<tr>
<td>Cash</td>
<td>Beneficiaries 60,000</td>
</tr>
<tr>
<td>Services and training</td>
<td>Beneficiaries 12,000</td>
</tr>
<tr>
<td>Water and habitat (in some cases provided within a protection or cooperation programme)</td>
<td></td>
</tr>
<tr>
<td>Water and habitat activities</td>
<td>Beneficiaries 1,410,000</td>
</tr>
<tr>
<td>Health</td>
<td></td>
</tr>
<tr>
<td>Health centres supported</td>
<td>Structures 25</td>
</tr>
<tr>
<td>WOUNDED AND SICK</td>
<td></td>
</tr>
<tr>
<td>Water and habitat</td>
<td>Number of beds 820</td>
</tr>
<tr>
<td>Physical Rehabilitation</td>
<td></td>
</tr>
<tr>
<td>Projects supported</td>
<td>Projects 2</td>
</tr>
</tbody>
</table>
The conflict between Nigerian defence/security forces and the armed group that calls itself the Islamic State's West Africa Province (also known as Jama'atu Ahlis Sunna Lidda'awati wal-Jihad or Boko Haram) continues. Cameroon, Chad and Niger are also fighting the group in border areas, notably, as part of the Multinational Joint Task Force (MNJTF).

Skirmishes and bombings in Nigeria’s north-eastern states (mainly Adamawa, Borno and Yobe) have had dire humanitarian consequences. Parts of the north-east have been secured, and people have attempted to return home; some communities with urgent, unmet needs have become accessible to humanitarian actors. However, security constraints still limit access to other areas, and most people remain displaced. Reportedly, there are over 2.3 million IDPs in Nigeria – mostly in host communities – and hundreds of thousands of Nigerian refugees in neighbouring countries.

People in Nigeria’s Middle Belt states contend with communal violence due mainly to resource disputes, and people in southern Nigeria have experienced increases in crime and in violence related to resurgent militancy and the claims of Biafra secessionists. The severe economic situation exacerbates these tensions. Nigeria plays a key role in addressing regional peace and security issues through the Economic Community of West African States (ECOWAS).

### HUMANITARIAN RESPONSE

In 2017, the ICRC will continue to expand its multidisciplinary efforts to mitigate the consequences of the conflict in north-eastern Nigeria, and of other situations of violence in the Middle Belt and southern Nigeria. It will work with the Nigerian Red Cross Society whenever possible, and focus on remote/underserved communities and other vulnerable groups. Coordination among Movement components in the Lake Chad region and with other humanitarian actors in Nigeria will help prevent duplication of effort and maximize impact. In parallel, the ICRC will remind the authorities and weapon bearers of the need to protect civilians and provide/facilitate access to basic services.

People affected by conflict/other violence will meet their urgent needs with the help of food and essential items – or, where markets are functioning, cash – distributed by the National Society/ICRC, including in areas that are challenging to reach. Malnourished children will be referred to ICRC-backed clinics for treatment.

To strengthen their resilience to the effects of conflict/other violence, the ICRC will provide people with medium- to longer-term support. Returnees will be able to resume farming using ICRC-donated seeds/tools, and to live in ICRC-constructed shelters. In urban areas, widows and other heads of vulnerable households will run small businesses with cash grants and training from the ICRC. Projects to build or repair water/sanitation facilities, including water infrastructure in Maiduguri and pumps in rural areas of the Middle Belt, will improve people’s access to water and reduce their risk of contracting diseases; in Port Harcourt, similar projects will also mitigate violence-related risks, as they will be implemented in areas that are experiencing tensions over resources, or areas that are better-lit.

Underserved communities will have better access to basic health services, including ante/post-natal and paediatric care, at fixed and mobile clinics supported/established by the ICRC. Those in need of further care will be referred to ICRC-supported hospitals, where the weapon-wounded will be treated by two ICRC surgical teams, and the disabled will be able to obtain physical rehabilitation services. People who have suffered from conflict-related trauma, including sexual violence, will be counselled by ICRC-trained National Society volunteers. In the north-east, Middle Belt, and southern Nigeria, the ICRC will train and supply first-aiders to increase casualties’ chances of receiving emergency treatment.

The ICRC will visit detainees to monitor their treatment and living conditions, individually following up those held in connection with the conflict. It will confidentially share findings/recommendations with the authorities, while continuing to seek access to all detainees. It will work with officials to improve inmates' access to health care and nutrition, for example, by providing material/technical support for treating ailing and severely malnourished detainees. It will also help the authorities upgrade prison infrastructure.

Families dispersed by conflict, violence, detention and migration will be able to reconnect through the Movement’s family-links services. The ICRC will advise the authorities on their efforts to clarify the fate of the missing and to provide administrative/legal, psychosocial and other assistance to their families; it will also refer them to other organizations for such assistance, and launch peer-support sessions for these families.

To facilitate its work, the ICRC will maintain dialogue with the armed/security forces and other weapon bearers, and community/religious leaders. It will also conduct dissemination sessions for them on IHL, humanitarian principles and the Movement; some of the sessions will be combined with training in first aid and in managing human remains.

The ICRC will advise the Nigerian authorities on ratifying/accessing to or implementing the Arms Trade Treaty, the African Union Convention on IDPs and other key legal instruments. Together with Ecowas, it will also provide technical support in this regard to other States in West Africa.

### HUMANITARIAN ISSUES AND ICRC OBJECTIVES

#### CIVILIANS

People in conflict/violence-affected areas report movement restrictions and abuses, including sexual violence. In some cases, these abuses have caused mental trauma.

Basic services, commerce and livelihoods have been disrupted, and international aid remains insufficient. As a result, the few functioning water/sanitation and health facilities are overwhelmed, and IDPs without any belongings, impoverished host communities, and returnees whose homes have been destroyed cannot sustain themselves.

Families are dispersed by conflict, violence, migration and detention; some people are unaccounted for. Following mass-casualty incidents, human remains must be properly managed to facilitate their identification.
Objective

Civilians are protected in accordance with applicable domestic/international law. Conflict/violence-affected people can cover their basic needs. Families dispersed by conflict/violence are able to reconnect and, where appropriate, reunite.

Plan of action and indicators

PROTECTION

- through the ICRC's field presence, and meetings with other actors, monitor and document the concerns of people affected by conflict or other violence, with a view to:
  - engaging the authorities and weapon bearers in dialogue on their obligations under IHL and other applicable laws or norms, such as the need to: protect civilians, especially women and children; facilitate access to or improve the provision of basic services; and safeguard medical personnel/facilities
  - helping vulnerable communities formulate/strengthen strategies to mitigate their exposure to various risks, including sexual violence

Restoring family links

- through training and financial/material support, help the National Society strengthen its family-links and human remains management capabilities

With the National Society:

- in coordination with other actors, including National Societies in neighbouring countries:
  - enable families dispersed by conflict, violence, detention or migration to reconnect with each other through phone calls, RCMs and tracing services
  - reunite people separated from their relatives, including unaccompanied children, with their families

- promote (see Actors of influence) the Movement's family-links services among other organizations and the public, to reach more people

- urge the authorities to implement measures to prevent families from being dispersed during evacuation/resettlement

- to help the families of the missing ascertain their relatives' fates and obtain administrative/legal, psychosocial and other assistance:
  - advise the authorities on their efforts thereon, while encouraging them to establish a national mechanism for collecting/managing data on the missing and on the assistance available to their families
  - help the families obtain such assistance by facilitating peer-support sessions and referring them to other organizations

ASSISTANCE

- help the National Society expand its operations by training its volunteers to conduct the assistance activities below

With the National Society:

Economic security

- help IDPs and other people affected by conflict/other violence – including those in remote areas of the north-east that are challenging to reach, and vulnerable households in urban areas – meet their urgent needs while they search for alternative coping mechanisms; to this end:
  - distribute up to three months' worth of food to 50,000 households (300,000 people) and household essentials to 25,000 households (150,000 people); where markets are functioning, provide cash for purchasing these goods instead, to stimulate commerce
  - refer malnourished children to ICRC-backed clinics for treatment (see below)

- to help people strengthen their resilience to the effects of conflict/other violence:
  - donate agricultural supplies/equipment to some 40,000 households (240,000 people), enabling them to resume farming or improve their yields
  - provide cash and basic training for small businesses to 10,000 vulnerable households (60,000 people) in urban areas, including those headed by widows or that include victims of sexual violence or mines/explosive remnants of war (ERW)
  - train and supply animal-health workers so that 2,000 households (12,000 people in all) can maintain their livestock's health
  - support local services by donating irrigation equipment to agricultural cooperatives and by renovating veterinary clinics

Forensics

- to promote the proper management of human remains:
  - help the authorities amend national legislation on forensics; provide representatives with specialized training abroad
  - train/equip first-responders and armed/security forces in human remains management; incorporate the subject in first-aid and IHL-dissemination sessions (see Wounded and sick and Actors of influence)
  - provide two hospitals' morgues with material/technical support in this regard

Health

- help people obtain basic health services – including ante/post-natal and paediatric care – that meet national/international standards by working with the health ministry to support/establish 25 fixed or mobile primary-care facilities in remote, underserved areas; specifically:
  - provide equipment/supplies, financial incentives, training, and technical support – notably, via a mobile device-based software application that provides information on disease-management protocols
  - renovate/set up these facilities (see below)
  - give malnourished children's families therapeutic food for home-based treatment, and provide inpatient care when needed
  - mobilize community leaders to assist in disseminating health-related information and waste/water management

- to help people deal with conflict-related trauma, including sexual violence:
  - train National Society volunteers in providing psychosocial support, and in self-care
  - conduct workshops to aid communities in developing/strengthening coping mechanisms

Water and habitat

- to help 1,410,000 IDPs and other people in conflict/violence-affected communities ease their living conditions:
• upgrade water systems in urban areas, including Maiduguri, and construct/install/repair hand pumps and other facilities in rural areas; establish community maintenance committees and provide them and Borno’s water board with training/supplies
• construct latrines for 50,000 people, while conducting hygiene-promotion and cleaning campaigns, especially during cholera season
• through these initiatives – particularly, by implementing water projects in areas experiencing tensions over resources, and by placing latrines in better-lit areas – mitigate the violence-related risks faced by 10,000 people in Port Harcourt
• truck in water during emergencies
• set up emergency shelters for 12,000 IDPs and help reconstruct houses for 30,000 returnees – in some cases, using stabilized-soil blocks
▶ improve the electrical and water/sanitation systems of 15 ICRC-supported primary-health-care facilities and 4 hospitals; set up temporary structures for 5 clinics
▶ help construct/renovate 12 National Society offices

PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees, including people held in connection with the conflict, are held by the Nigerian Prisons Services (NPS) or various armed/security forces. Penitentiary services are overstretched, and the situation is exacerbated, in part, by prolonged detention related to judicial delays. Furthermore, the authorities’ efforts to ease detainees’ living conditions, alleviate overcrowding and treat malnourished inmates in some facilities are hindered by budgetary and administrative constraints. Some detainees also need help contacting their families.

Objective
Detainees’ treatment and living conditions, including access to health care, meet internationally recognized standards; procedural rights and judicial guarantees are respected.

Plan of action and indicators

PROTECTION
▶ continue seeking access to all detainees, through dialogue with the authorities concerned
▶ visit detainees in accordance with standard ICRC procedures, to monitor whether their treatment and living conditions comply with IHL and internationally recognized standards; individually follow up people held in connection with the conflict
▶ based on these visits, confidentially share findings/recommendations with the authorities concerned, for instance, on the need to protect women and minors
▶ enable detainees to contact their relatives or consular representatives by providing family-links services; urge the authorities to notify detainees’ relatives of their status
▶ advise officials on ensuring respect for detainees’ judicial guarantees and on expediting judicial processes to alleviate overcrowding

ASSISTANCE

Economic security
▶ help the authorities ensure that detainees meet their nutritional requirements by urging officials to improve penitentiary food-supply management and by directly providing supplemental rations to 5,000 detainees
▶ ease the living conditions of 20,000 detainees by giving them household essentials

Health
▶ to help improve detainees’ access to health care and nutrition:
• strengthen the authorities’ capacities in this regard by organizing training for officials and sponsoring their participation in courses abroad, holding meetings to facilitate coordination between the NPS and health ministry, and giving advice on the implementation of ICRC recommendations, including an emergency-preparedness plan
• monitor inmates’ health status during visits; provide prison staff with equipment/supplies and technical support for preventing/treating illnesses and severe malnutrition, particularly during emergencies

Water and habitat
▶ to help the authorities improve detainees’ living conditions:
• construct/repair kitchens and other infrastructure for around 5,100 people; water facilities for 3,100 people; sanitation systems for 3,900 people
• distribute hygiene items to 5,600 detainees
• provide officials with tools/training for maintaining prison facilities

WOUNDED AND SICK

In the north-east, violence against medical personnel/facilities has caused hospitals to close, and staff, to flee. The few remaining facilities need support for providing good-quality care, including physical rehabilitation services. Increasingly, weapon-wounded patients are being referred to the State Specialist Hospital in Maiduguri (SSH-M), which needs assistance to cope with the additional strain on its services.

Objective
Weapon-wounded patients benefit from prompt, adequate treatment.

Plan of action and indicators

With the National Society:
▶ raise awareness of the need to protect people seeking/ providing health care through events for and dialogue with stakeholders (see Actors of influence and Civilians)

Medical care
▶ provide first-aid training/supplies to National Society first-aid instructors/volunteers, community members, weapon bearers, and members of faith-based organizations, to increase casualties’ chances of receiving timely treatment
▶ to improve people’s access to good-quality medical treatment:
• maintain two ICRC teams at the SSH-M to provide people with free surgical care and advise/train hospital staff
• provide the SSH-M with medical equipment/supplies
• support 4 hospitals (total capacity: 820 beds), including the SSH-M, in improving their facilities
• visit communities covered by ICRC-supported clinics (see Civilians) to identify people in need of surgery/physiotherapy; refer them to ICRC-supported hospitals for further care
• support other hospitals during mass-casualty influxes by providing supplies
• conduct seminars on emergency-room trauma care and weapon-wound surgery

▶ provide an orthopaedic hospital in Kano with training for staff and equipment/materials for making prosthetic/orthotic devices; cover the accommodation/travel expenses of patients referred to this hospital, and the devices of children referred to another hospital in Maiduguri for club-foot treatment

**ACTORS OF INFLUENCE**

Nigerian defence/security forces operate in conflict/violence-affected areas of Nigeria; international actors are supporting their efforts to increase awareness of IHL and international law enforcement standards among their personnel, and to incorporate key provisions in their doctrine, training and operations. In the north-east, the MNJTF and civilian self-defence groups also undertake operations against armed groups.

Across Nigeria, acceptance of the Movement among communities and weapon bearers is crucial for the unimpeded provision of humanitarian aid. Local/religious leaders and national/international media can influence opinion, including among weapon bearers.

Nigeria is party to many IHL treaties, but implementation remains slow. Universities are strengthening their IHL research/instruction capacities.

The country is part of ECOWAS, a regional body that tackles economic, humanitarian and security concerns. The ECOWAS Standby Force (ESF) undertakes peace-support operations.

**Objective**

The authorities and weapon bearers know and respect IHL and other fundamental rules protecting people in armed conflict and other situations of violence, and incorporate these in their decision-making. The media, academia and other civil society actors help foster awareness of IHL and humanitarian issues among all parties concerned and the wider public, securing greater respect for human dignity. All actors understand the ICRC’s mandate and support the Movement’s work.

**Plan of action and indicators**

**PREVENTION**

▶ to encourage respect for IHL and other applicable norms among parties to the conflict or other violence, and to facilitate humanitarian access to affected communities:
  • maintain/develop dialogue with government officials and weapon bearers on IHL, including rules for the conduct of hostilities, and ICRC operations; reinforce such discussions via talks with community/religious leaders
  • conduct dissemination sessions – sometimes combined with training in first aid and human remains management – for armed/security forces, peacekeepers preparing for deployment and other weapon bearers, regarding IHL; international law enforcement standards, particularly those related to arrests and detention; humanitarian principles; and the Movement
  • raise awareness of the need to facilitate safe access to health care by organizing events on the subject, with the National Society;
  • in Rivers state, provide technical support for developing measures to protect those seeking/providing medical treatment, to a group of health-care stakeholders
  • to foster long-term compliance with IHL and other norms among armed/security forces personnel:
    • help the Nigerian armed forces/police forces integrate these in their training and operations by offering technical support in this regard, organizing workshops for instructors and sponsoring officers’ attendance of courses abroad
    • advise ECOWAS on incorporating key provisions of IHL and other legal frameworks in the ESF’s operating procedures

▶ to facilitate accession to/the implementation of IHL treaties, including the Arms Trade Treaty, and other key instruments, particularly the ECOWAS Convention on Small Arms and Light Weapons and the African Union Convention on IDPs:
  • provide technical support to the national IHL committee and sponsor its members’ participation in workshops abroad
  • organize, together with ECOWAS, regional meetings to review implementation of key treaties and to discuss humanitarian concerns
  • conduct a workshop to examine domestic laws protecting medical staff/facilities, making recommendations as necessary
  • continue advocating the goals of the Health Care in Danger project and the importance of implementing the African Union Convention on IDPs, notably, by organizing round-tables on these topics

▶ to garner public support for humanitarian principles and Movement activities:
  • organize workshops for Islamic scholars on the similarities between IHL and Islamic law, and send them to similar events abroad (see Lebanon and Niger)
  • encourage academics to study IHL by sponsoring their participation in IHL courses/competitions and supporting IHL research/publications
  • help local/international media relay humanitarian messages by organizing field trips for them and by producing audiovisual/print materials, including in Hausa
  • boost knowledge of the ICRC’s work among ECOWAS member States through events for ambassadors and parliamentarians
  • conduct public-communication initiatives with the National Society, while providing them with financial/technical support in this regard
The Nigerian Red Cross is building its profile as an effective provider of neutral, impartial and independent humanitarian services. It is working to strengthen its communication and its financial/organizational management.

Objective
The National Society has a strong legal basis for independent action. It is able to carry out its core activities effectively. Movement components’ activities are coordinated.

Plan of action and indicators

COOPERATION

- through training and financial/logistical/material support, help the National Society:
  - strengthen its emergency-response activities (see Civilians and Wounded and sick) and its ability to conduct operations in line with the Fundamental Principles and the Safer Access Framework
  - disseminate information on mine/ERW-related risks, in affected communities
  - reinforce its communication capacities and its organizational development
- coordinate activities with Movement partners, particularly those in the Lake Chad region (see Chad, Niger and Yaoundé), through regular meetings