

Protection Briefing

Donors and Diplomatic Mission

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Protection Situation

- Protection needs in the North East particularly in newly accessible areas in Borno state remains severe. Civilians face grave violations of human rights and humanitarian law, including death, injuries, sexual violence and exploitation, detention, disappearances, forced displacement, attacks on civilian sites and forced recruitment, exacerbated by the lack of sufficient services and limited prevention measures. UNHCR Vulnerability Screening Round II (June 2016) has identified **51,474 IDPs in Borno with severe levels of vulnerabilities**.
- **In newly accessible areas, IDPs experienced human rights violations including abductions**, sexual abuse, forced marriage, forced religious conversions and witnessing grave violence to family members, as well as repeated waves of displacement (65% of vulnerable displaced households in Borno have reported multiple displacement) and enduring insecurity. Civilian camp leadership structures and community-based protection mechanisms are lacking.
- **Children have witnessed or experienced violence and displacement**. These experiences, coupled with continuing uncertainty and risks of violence, has had an acute impact of the psychological well-being of children. It is estimated that there are 20,000 unaccompanied and separated children across the three States of Emergency.
- **It is estimated that over 7,000 women and girls who have been subjected to Boko Haram related sexual violence**, including forced marriage. More than 11, 000 civilians rescued in 2016 alone. Over 1,200 abducted children have been rescued in 2016 alone. Children as young as nine were used in suicide bombing attacks – 21 out of 89 suicide attacks in 2015 involved girls under 18. Out of a total of 55 incidents from January to March 2016, 10 children (7 girls and 3 boys between the ages of 9 and 16) were used in such attacks by Boko Haram. Unexploded ordnance and improvised explosive devices are posing a significant danger to returning IDPs and children.
- **Women and girls face real risk not only of rejection and stigmatization** but also violence in some communities. The stigma is also based on the fear that these girls and women may have been radicalized, even if they have been screened by the military. As some communities hold the belief that the blood of the father will always run in the blood of the child, children born out of sexual violence are at particular risk of abandonment and violence, as it is thought that they will eventually turn on the community. The challenges for reintegration facing boys who were recruited and used by Boko Haram are even more acute, as they are viewed with deep suspicion and distrust and there is little appetite for reconciliation.

- Estimate by the Office of the National Security Advisor (ONSA) put the figure at **8,000 children who may have been recruited and used by Boko Haram** in both combat roles and support roles. Children were also used by Civilian Joint Task Force and vigilante groups. Failure to effectively reintegrate boys who were associated with armed groups and provide them opportunities for education and livelihoods, will lead to their disenfranchisement, exacerbate their poverty and risk criminality and future radicalization.
- **Detention including children associated with Boko Haram** either directly or due to their family connections continues to be an area of significant concern and is a highly sensitive challenge. While positive progress has been made in accessing children in military detention, there continues to be a challenge in verifying all the locations and the exact numbers of all under-18 detainees being held, as well as gaining access to monitor their well-being, assess their needs, and prepare for release and reintegration.
- **60,000 Nigerian returnees who have arrived** from Cameroon to Ngala, Borno, several of them finding themselves in dire displacement situations upon return to Nigeria and staying in camps consisting of abandoned public buildings largely destroyed by Boko Haram.

Protection Response

- As of June, **the protection sector has reached 260,734** in the most affected North East states, including 138,504 vulnerable individuals profiled, 50,661 vulnerable individuals provided with targeted protection-based material assistance, including solar lanterns for vulnerable women and girls; 59,369 reached with awareness raising and community-based initiatives including on core protection and humanitarian principles, protection mainstreaming, sexual abuse and exploitation and self-protection mechanisms; 6,650 vulnerable cases referred to appropriate specialized services; capacity of 2,494 individuals built through protection trainings; 2,059 individuals reached through specialized protection services (including housing land and property assistance, legal aid and detention visits); and 878 reached with psychosocial support to promote their wellbeing.
- **With the support of CERF funding, protection actors are now targeting 488,126 vulnerable IDPs,** returnees and host communities in the newly accessible local government areas of Askira/Uba, Bama, Damboa, Dikwa, Gwoza, Kaga, Kukawa, Monguno, Ngala, and Nganzai within Borno state. Protection actors have already begun to deliver interventions in Bama, Damboa, Dikwa and Monguno LGAs, including in the past 2 months reaching over 18,000 most vulnerable displaced with protection-based material assistance and conducting 3 trainings on CCCM and protection principles for military and IDP leadership. The sector is now focused on urgently profiling and registration of vulnerable displaced and providing material protection response (including cash grants and solar lanterns to the most vulnerable); providing psychosocial support to victims of acute trauma, including individual counselling for survivors of sexual violence; establishing community-based protection mechanisms and maintaining the civilian character of IDP sites; undertaking of an urgent initiative to support all government counterparts, humanitarian agencies and sector working groups on protection mainstreaming; and establishing and strengthening registration systems for refugees returning from neighbouring countries with relevant government counterparts.

- In the first half of 2016, **the Child Protection Sub-Sector reached 158,533 children** (52 % boys and 48% girls). 140,813 girls and boys were reached with psycho-social support (PSS) through Child-Friendly Spaces (CFS)/children's clubs through a network of 252 CFS and 11 after-school PSS clubs. 3,438 Unaccompanied and Separated Children (UASC) were identified and registered, which includes 384 unaccompanied children. 1,787 UASC were supported in interim alternative care, supervised by trained social workers and case workers. 3,350 children at risk supported through inter-agency case management system. A unified and harmonized UASC and child protection case management and information management system is operational, which was developed with the government and INGOs, based on the globally agreed model. 103 unaccompanied children have been reunified and 521 conflict affected children referred to specialist support services. 9,349 girls and boys benefitted from mine risk education by UNICEF in partnership with Danish Refugee Council. 480 women and girls who have been victims of Boko Haram related sexual violence were provided with reintegration support and their communities were engaged to address stigma, discrimination and resistance to reintegration, as well as to mitigate threat of violence. This is currently being scaled up to reach 800 women and girls.
- As of June 2016, **the GBV sub-sector has reached 186,976 in the most affected North East states**, including 117,256 of vulnerable persons provided with psychosocial counselling support; 58,115 individuals reached through sensitization on GBV and SEA, 1,132 vulnerable women and girls gained skills for livelihoods; and 9,683 women and girls received dignity kits. Further, efforts have been in the areas of capacity building in GBV and prevention response, clinical management of rape, establishment of guidelines for PSS for quality control; establishment of safe spaces for women and girls; mobilization of communities to prevent abuses and access GBV services through communication and education, establishment and operationalization of GBVIMS in Nigeria, and strengthening the coordination of GBV services through the establishment of GBV working groups and case management groups at federal, state and community levels.

Gaps and challenges

- Despite severe protection needs, **the Protection Sector remains only 12% funded** as of mid-July. Urgent support is needed by the donor community to fund the scaling up of protection operations, especially in Borno's newly accessible areas, particularly the prioritized protection needs including profiling and identification of vulnerable groups requiring urgent interventions, provide psychosocial services for civilians who experienced trauma and urgently build community-based protection mechanisms in these areas and registration/provision of assistance to returns.
- Child-Protection Sub Sector has struggled to recruit a qualified Child Protection Coordinator, following the departure of the ProCap CPiE Coordinator in March 2016. This may be in part due to the unavailability of funding, leading to the role being advertised as a consultancy rather than a post, which means that qualified candidates are not attracted to apply. Due to the urgency and scale of emergency, there is a need for a CPiE Coordinator at the Federal level and a CPiE Coordinator to work at the state level.
- Child Protection in Emergencies (CPiE) response capacity is acutely constrained in terms of funding, human resources and technical capacity. Moreover, very few UN agencies, international NGOs and national/local NGOs are working on child protection in the North-East Nigeria and the geographical coverage remains limited.

- Critical gaps for the sector include the absence of a GBV coordinator and a MIS staff to strengthen coordination and enable evidence for greater resource allocation; lack of a mainstreaming intent in sectors' work plans for a more integrated GBV programming; high funding gap due to low prioritization for GBV; high rate of under reporting of GBV due to cultural factors, poor mobilization against GBV with a focus on adolescent girls and boys; inadequate utilization of the referral established pathways; lack of comprehensive data on GBV; lack of facilities and caregivers to provide specialized care in most of the areas and security challenges accessing areas where affected persons are inhabit.

Protection Sector, Nigeria



PSWG Secretariat
UNHCR Nigeria
61 Jose Marti, Asokoro, Abuja