



T05-EUTF-SAH-NG-01-02
**Multi-sector support to the displaced
in Adamawa and Borno States**

September 2018 Update



Project Funded by the Emergency Trust Fund for Africa

Current Situation

The operational context in Adamawa and Borno States remains largely unchanged from previous reporting periods. Borno State continues to account for the largest share of IDPs across the Northeast while the number of returnees increased steadily in Adamawa as the UN continues to repatriate IDPs from Cameroun. The IRC continues to respond to the outbreak of cholera in Adamawa and Borno State. Security is still fluid in both states with sporadic insurgent attacks still occurring in some LGAs which resulted in an increase in IDPs seeking shelter in major cities.

Farmers in both states have started harvesting crops such as maize, groundnut and vegetables; however, farmers complained of limited rains to irrigate the beans and sorghum during this reporting period. Periodic markets in most of the communities/LGAs remain functional, allowing farmers to market their products.

Activity Summary

Specific Objective 1: IDPs, host communities, and returnees in Nigeria access basic needs and improved livelihood opportunities

Output 1.1 - The basic needs of the targeted vulnerable households are addressed

A 1.1.1. Selection of beneficiaries for the economic support interventions.

Activity completed.

A 1.1.2. Distribution of unconditional cash (or vouchers).

This activity was completed in year one.

A 1.1.3. Cash-for-Work (CfW).

The IRC successfully handed over Cash for Work tools to community leaders and Cash for Work Committees in 18 communities across five LGAs in Adamawa and Borno States. The tools that were handed over include: shovels, head pans, axes and wheel barrows. As part of receiving the handover, stakeholders pledged commitments to ensure proper maintenance of the tools and sustainability of the Cash for Work activities in their communities after the exit of the IRC.

A 1.1.4. Screening of U5s of household benefiting from cash.

This activity was completed in year one.

Output 1.2 - Vulnerable individuals, including young people and women, have access to livelihood opportunities

A 1.2.1. Distribution of assets for farming (seeds, tools, and livestock).

The IRC distributed crop storage bags, sickles and gumboots to 1,000 (493M, 507F) Farmer Field School beneficiaries. Each beneficiary received three crop storage bags, one pair of gumboots and one sickle. The tools were distributed by the IRC to support beneficiaries in the forthcoming harvest and post-harvest activities.

A 1.2.2. Establishing and supporting the running of farmer field schools (FFS).

The IRC conducted a 3rd cycle of routine monitoring of FFS beneficiaries. Beneficiaries were monitored to see how well they implemented key lessons on fertilizer application, herbicide application, disease control, insect control and the “Earthen Up” strategy for soil conservation. A total of 400 beneficiaries were sampled for monitoring out of the 1,000 total beneficiaries of the FFS. The report of the monitoring is used to update the monthly indicator tracker to showcase the performance on the FFS.

A 1.2.3. Training in business, financial management and life skills.

Prior to the commencement of the training on business, financial and life skills, the IRC administered a pre-test to beneficiaries enroled in Income Generating Activites (IGAs) to understand their knowledge level on business skills. After the training, the IRC sampled and administered a post-test to 151 (113F, 38M) beneficiaries across 10 communities in five Local Government Areas of Borno and Adamawa States. Figures 1 and 2 present the results of the tests.

Figure 1: Pre-test on Business Skills

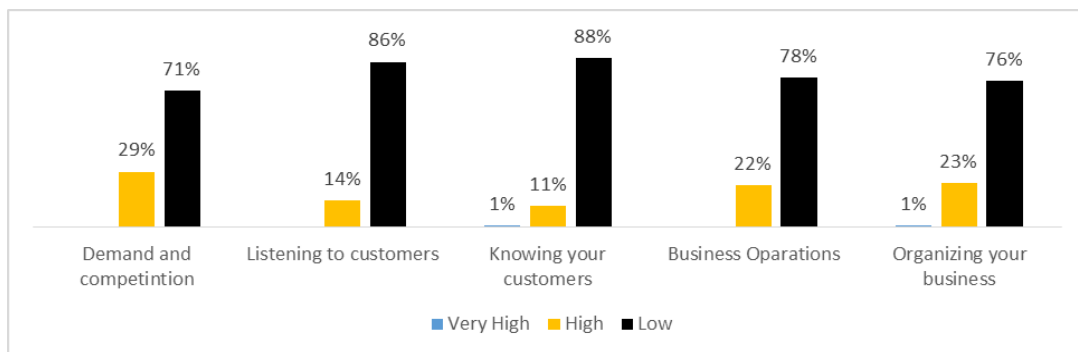
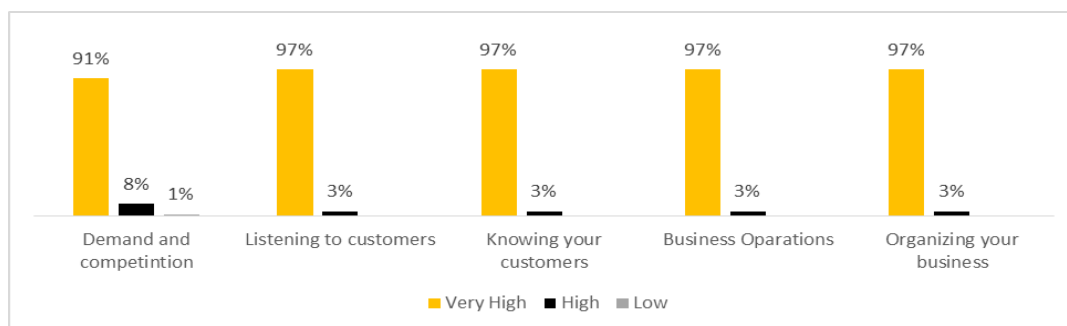


Figure 2: Post-Test on Business Skills

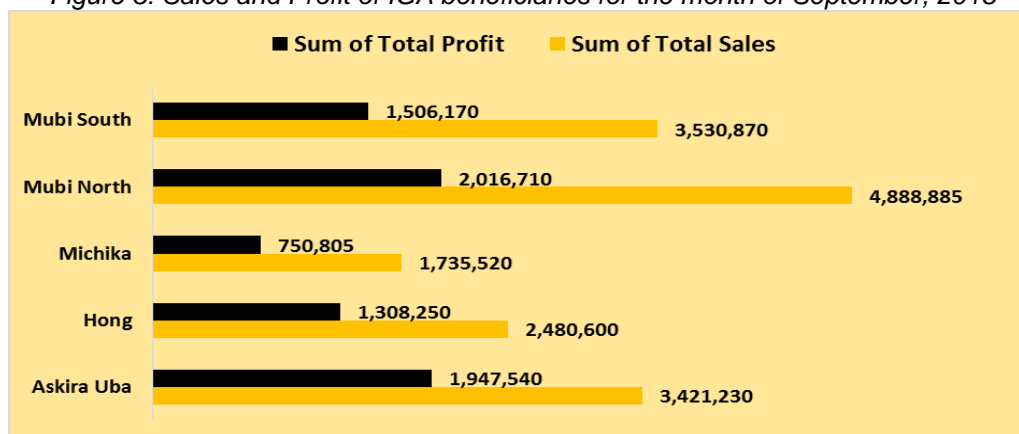


A 1.2.4. Development of business plans and distribution of start-up grants.

The IRC monitored the business growth of IGA beneficiaries that received business grants. During the month a total of 244 (78M, 166F) beneficiaries were monitored in ten communities. The monitoring report shows that Mubi North has the highest sales of NG 4,888,885 (\$13,580) and profit of NG2,016,710 (\$5,602). The reasons for the increased sales and profit in Mubi North is because most beneficiaries are involved in grain selling and directly market their commodities to wholesalers and traders in the Mubi grain market, the largest grain market in the area. Michika LGA

has the lowest sales of NG 1,735,520 (\$4,821) and profit of NG750,808 (\$2,086) when compared with other LGAs. The reasons for the decrease in sales and profit in Michika LGA is because most beneficiaries are engaged in farming activities and spending less time in their place of businesses.

Figure 3: Sales and Profit of IGA beneficiaries for the month of September, 2018



A 1.2.5. Establishing and supporting the running of Village Saving and Loan Associations (VSLAs).

The IRC monitored the activities of a newly self-formed VSLA group in the Baza community of Michika LGA, Adamawa State. During the visit 24 (all females) members were in attendance at the weekly share meetings. The purpose of the visit was to observe the group shares meeting and provide capacity building for the management committee on record keeping.

Specific Objective 2: IDPs, host communities and returnees in Nigeria have access to improved WASH and health services

Output 2.1 - Targeted communities are protected and treated for acute malnutrition

A 2.1.1. Identify, train and follow up of Mother to Mother Support Group members on CMAM and MIYCF protocols/ activities.

Borno

In the month of September mother to mother support group (MTMSG) received follow up from the IRC team, health workers and community volunteers to support group activities. These activities include providing peer support to pregnant and lactating women (PLWs), promoting optimal Infant and Young Child Feeding (IYCF) practices such as exclusive breastfeeding and complementary feeding, and practical support on proper positioning during breastfeeding. In the month of September these activities were held in ten health facilities (Fori, Mairi, Abbaganaram, Jiddari, CBDA, Dalaram, Dala, Ngomari, Yerwa, Mashamari and Bakkasi Camp) and 11 communities (Kullulori, Sajeri, Fariya, Karama Kutura, Sulumbri, Millionaires's Quarters, Gobe Da Nisa, Angwan Taya, Kwanan Yobe, Suleimanti and Goni Kachallari) in MMC and Jere LGAs. A total of 310 women were reached through the MTMSG activities.

Adamawa

No training was conducted for the MTMSG member in the month of September, but the various groups received follow up in Bazza Town, Moda and Michika Town. The IRC staff also held meetings with MTMSGs in Watsila, Wambillimi, Kuburshosho, Garta, and Khouro. IRC staff discussed successes and challenges with each MTMSG during the meetings. The group members also carried out their routine monthly activity in all the community program locations of Kuburshosho, Watsila, Moda Bazza, Michika Town, Tsukumo, and Futu. The IRC also sensitised community members on CMAM/IYCF.

A 2.1.2. Sensitise men on CMAM and MIYCF good practices using male-to-male communications means.

Borno

In the month of September, the IRC team and community volunteers engaged 82 men through the men support group in Angwan Taya and Sulumbri communities. The men were counselled on the importance of timely health seeking behaviour, family planning and its benefits to improving the nutritional status of their wives and children,

benefits of exclusive breastfeeding, food safety and hygiene, the importance of diet diversity, appropriate complementary feeding for child 6-59 months and how to recognise malnutrition among children.

Adamawa

Men to Men sensitisations were conducted in the various supported communities, reaching a total of 201 men including mostly male parents of the children with severe acute malnutrition (SAM). The men in the supported communities were also sensitised on CMAM and IYCF. A total of 164 men were sensitised specifically on the importance and benefit of exclusive breast feeding, early initiation of breastmilk, good breast attachment and proper complementary feeding.

A 2.1.3. Identify, train and follow up of the community health volunteers on CMAM and MIYCF protocols/activities (education, screening, follow up at community-level of SAM cases enrolled in the programme).

Borno

In the month of September, supportive supervision was conducted for CHVs trained on CMAM and MIYCF protocols. Their competencies on the use of the MUAC tape and strategies for defaulter follow-up were assessed. Any gaps that were identified received immediate follow up. CHVs trained as lead mothers for MTMSGs were also supervised on their ability to effectively counsel mothers using the Listening, Value, Informed, Suggest and Authenticity (LVISA) counseling approach .

Adamawa

With the support of the IRC staff and health workers, CHVs conducted community mobilisation in Moda, Watsila, Bazza, Michika Town, Kuburshosho, Tsukumo, Khouro, Garta, Futu and Wambilimi communities. The IRC also screened 7,021 (3,459M, 3,562F) under 5 children and referred 48 (19M, 29F) new SAM cases for treatment.

A 2.1.4. Develop and disseminate messages on CMAM, MIYCF and WASH good practices through local communication means (radio, theatre, group discussion).

Borno

Community awareness sessions on CMAM, MIYCF and WASH good practices were conducted by the IRC in communities hosting the mobile OTPS and in static health facilities. The IRC reached a total of 3,956 people (34 M, 3,922F).

Adamawa

In the month of September, IYCF and CMAM messages were disseminated to community members through the use of visual aids (posters, banners, handbills) and also through the usual channel of CHV, MTMSGs and health workers. A total of 1,801 (914M, 887F) individuals were reached in the program-supported communities. The key messages discussed include good hygiene practice and IYCF best practices.

A 2.1.5. Identify, train and follow up (on job training) of health workers from health facilities, camps clinics and hospitals on CMAM and MIYCF protocols/activities.

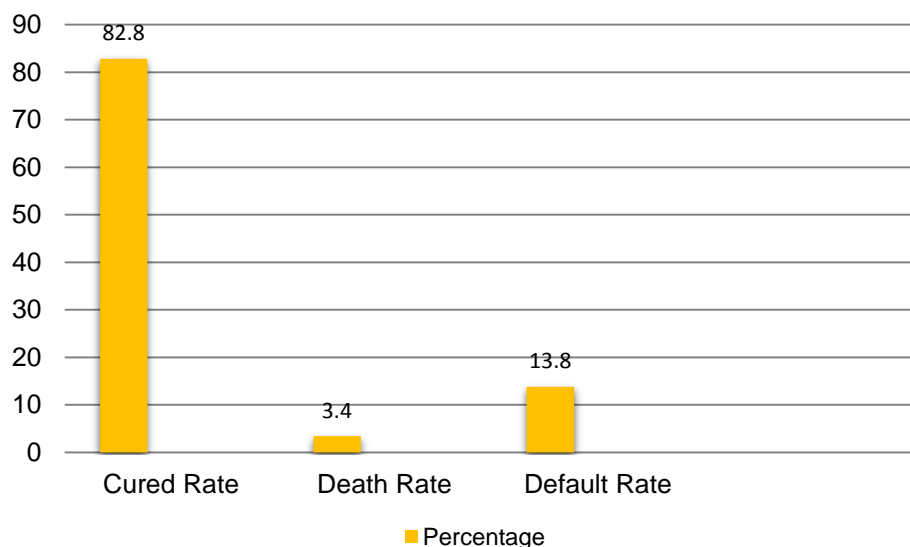
Borno

On the job technical support was offered by the IRC nutrition team to health workers in ten health facilities in MMC and Jere LGAs. This technical support include on the job training for health workers supporting the implementation of IYCF corners in the health facilities. This was done at the IYCF-corners and health workers were observed during their implementation of the various activities in the IYCF which include, group discussions, psychosocial support for mother and child, play sessions and breast feeding counselling. The identified gaps observed were resolved.

Adamawa

The health workers from the 10 supported health facilities received on the job training. Other activities conducted include the admission of 48 (19M, 29F) newly identified SAM cases, 180(85M, 95F) medical consultations were made to children on program. The total of 6,821 sachet of RUTF were issued out to the children on program. With regard to discharges of the children on program, a total of 96 (40M, 56F) were discharged as cured, 4(2M and 2F) death, 16 (6M and 10F) defaulters and 1(1M and 0F) non-responding to treatment. In the month of September, the supported program clinics performance indicator were within the approved CMAM program sphere standard of >75% cured rate, <10% death rate and <15% default rate. The percentage of the overall OTP statistical data is 82.8% cured, 3.4% death and 13.8% Default rate, as indicate in the below bar chart:-

Performance Indicator



A 2.1.6. Provide medicines and nutritional treatment as well as equipment and information, education, and communication materials to Outpatient Therapeutic Programme sites in health facilities/camps clinics and Stabilisation Centres in hospital.

Borno

Monthly program stock validation and forecasts were conducted at various mobile clinics to ensure there were no stock outs of drugs or therapeutic supplies at the health facilities and mobile clinics. In Borno State, the bulk of the pharmaceuticals are warehoused at IRC-operated pharmacies in Maiduguri. Each mobile clinic has a consumption morbidity register which teams check on a weekly basis. In the month of September through the PCA arrangement with UNICEF, IRC received 2,000 cartons of RUTF supplies from UNICEF for Borno State. Below is the total summary of OTP activities at the mobile clinics;

| Mobile clinics | Screening | New Admission | Cured | Death | Default | Non respondent |
|----------------|-----------|---------------|-------|-------|---------|----------------|
| 10 | 4,028 | 770 | 662 | 2 | 28 | 1 |

Adamawa

Sufficient quantity drugs, IEC materials and medical equipment were supplied to all ten supported Health Facilities. All the items supplied were also checked periodically to avoid running out of stock. The beneficiaries of these supplies include the newly admitted SAM patients and the in-program/existing clients. Below is the program summary of the monthly OTP health facility statistics of the beneficiaries:

| Number of Health facility | Screening | New Admission | Cured | Death | Default | Non respondent |
|---------------------------|-----------|---------------|-------|-------|---------|----------------|
| 10 | 7,021 | 48 | 96 | 4 | 16 | 1 |

A 2.1.7. Establish and operationalise MIYCF corners at OTP sites in the identified health facilities (in and out of camp).

Borno

The activities that the IRC maintained at the MIYCF corners this month include; play sessions between mother and child pair, breastfeeding counselling, activities around complementary feeding and hygiene practices. In September a total of 15 women were offered individual counselling while 6 mother-child pairs participated in play sessions.

Adamawa

A total of 30 PLW mothers were successfully counselled at MIYCF corners in Michika Town and Moda communities using the LVISA approach during group counselling. The sessions were on good breast attachment, early initiation of breast milk, breast feeding difficulties.

Output 2.2 – WASH services including water supply and sanitation infrastructure for targeted communities are provided to contribute to improved wellbeing and resilience

A 2.2.1. Construct and/or repair water supply infrastructure.

Geophysical surveys were previously carried out for the construction of 17 hand pumps (Michika LGA 7, Askira Uba 9 and Yola south LGA 1) and 3 motorized (Michika LGA 2 and Askira Uba LGA 1). Construction has yet to begin as the IRC finalises the re-tendering process. The cancellation of the previous contract has been communicated to Europe Aid and the IRC is currently finalising a requested no cost extension.

A 2.2.2. Identify, train and equip pump mechanics and pump attendants.

Activity complete and reported previously.

A 2.2.3. Establish and equip water quality monitoring laboratory.

Water quality laboratory setup in year one and routine water quality analysis/monitoring is ongoing.

A 2.2.4. Collect water samples and conduct water quality tests.

The IRC collected 24 water samples for chemical and bacteriological analysis, the water samples were collected from one motorized and 23 hand pump boreholes in Borno and Adamawa States in the following locations:

| Water quality monitoring locations, September 2018 | | | | |
|--|------------|--------------|-----------|--------|
| State | LGA | Locations | Quantity | UOM |
| Borno | Askira Uba | GSS Askira | 2 | Sample |
| Borno | Askira Uba | Jigawa | 2 | Sample |
| Borno | Askira Uba | Lugere Sadi | 2 | Sample |
| Adamawa | Michika | Matsin | 5 | Sample |
| Adamawa | Michika | Mukaffachita | 3 | Sample |
| Borno | Askira Uba | Zadawa | 2 | Sample |
| Borno | MMC | Kwanan Yobe | 3 | Sample |
| Borno | MMC | Wadiya | 2 | Sample |
| Borno | MMC | Ajajiri | 2 | Sample |
| Borno | MMC | Abbaganaram | 1 | Sample |
| Total | | | 24 | |

The water samples collected were found to be within the permissible limits for arsenic (0.01mg/l), iron++ (0.3mg/l), and chlorine (0.2 mg/l) as recommend by World Health Organization (WHO) physiochemical standard for drinking water. Results from testing for faecal contamination revealed that 79% of the water samples collected (19 samples) were free from faecal contamination and were within the bacteriological standard, while 21% of water points sampled (5 samples) indicated the presence of either thermo-tolerant or total coliforms. These water sources were disinfected with 0.35g/litres of chlorine solution to improve their quality. The IRC also intensified community sensitisation by emphasizing the importance and regular use of water treatment chemicals or other house hold water treatment techniques. Community outreach also emphasised regular cleaning of drainage channels around water points and regular use of latrines to minimise contamination.

A 2.2.5. Set up WASH Committees.

Activity concluded and reported previously. WASH-coms continue to monitor water and sanitation infrastructure in their camps and communities.

A 2.2.6. Distribution of water handling and storage kits for institutions.

Activity complete and reported previously.

A 2.2.7. Distribute point-of-use water treatment chemicals for households and institutions.

A total of 1,584 households in host communities were protected from water borne infections as the IRC distributed point of use water treatment chemicals to households in six Local Government Areas in Borno (Askira Uba, MMC, Jere) and Adamawa (Fufore, Michika and Yola South) States. Household beneficiaries received three bottles of 150ml household chlorine solution for dosing their water at point of use.

| Distribution of water treatment chemicals, September 2018 | | | | |
|--|------------|-----------------------|-----------------|------------|
| State | LGA | Locations | Quantity | UOM |
| Borno | Askira Uba | Bolori | 20 | Household |
| Borno | Askira Uba | Jigawa | 14 | Household |
| Borno | Askira Uba | Kopol | 20 | Household |
| Borno | Askira Uba | Lugere Sadi | 15 | Household |
| Borno | Askira Uba | Nassarawo | 20 | Household |
| Borno | Askira Uba | Rumirgo | 15 | Household |
| Borno | Askira Uba | Seburguma | 20 | Household |
| Borno | Askira Uba | Uba Marghi | 30 | Household |
| Borno | Askira Uba | Zadawa | 20 | Household |
| Adamawa | Fufore | Daware | 250 | Household |
| Adamawa | Michika | Futu | 25 | Household |
| Adamawa | Michika | Matsin | 40 | Household |
| Adamawa | Michika | Minkisi | 20 | Household |
| Adamawa | Michika | Mukavicita | 20 | Household |
| Adamawa | Michika | Murva | 25 | Household |
| Adamawa | Michika | Wamblimi | 15 | Household |
| Adamawa | Michika | Watsari | 15 | Household |
| Adamawa | Yola South | Malkohi Village | 200 | Household |
| Borno | Maiduguri | Millionaires Quarters | 100 | Household |
| Borno | Jere | Wadiya | 200 | Household |
| Borno | Jere | Ajajiri | 100 | Household |
| Borno | Jere | Yerwa | 100 | Household |
| Borno | Jere | Abaganaram | 100 | Household |
| Borno | MMC | Ajilari | 200 | Household |
| Total | | | 1584 | |

A 2.2.8. Train local hygiene promoters and community health volunteers and establish Community Health Clubs (CHCs) and School Health Clubs (SHCs).

The IRC, in collaboration with community hygiene volunteers, conducted 26 focus group discussions, 20 mass sensitization campaigns, 2,137 home visits and 14 area cleaning sessions in the 43 communities of intervention to share messages on personal and environmental hygiene by disseminating critical messages focusing on cholera prevention, proper use of latrines, hand washing, vector control, safe handling and storage of water.

A 2.2.9. Distribute and/ or establish hand washing materials and equipment for institutions and IDP sites.

The IRC distributed five bars of soap each to 636 households in MMC and Jere LGA to encourage hand washing at critical times in the following locations:

| Distribution of hand washing materials, September 2018 | | | | |
|--|------|-----------------------|------------|-----------|
| State | LGA | Locations | Quantity | UOM |
| Borno | MMC | Abbaganaram | 100 | Household |
| Borno | MMC | Millionaires Quarters | 100 | Household |
| Borno | MMC | Ajilari | 100 | Household |
| Borno | Jere | Wadiya | 100 | Household |
| Borno | Jere | Ajajiri | 136 | Household |
| Borno | MMC | Yerwa | 100 | Household |
| Total | | | 636 | |

A 2.2.10. Construct improved ventilated latrines for households and/or institutions.

The IRC constructed six drops holes for institutional latrines in a school (Askira GSS) in Askira Uba LGA.

A 2.2.11. Construct waste disposal facilities and infrastructure in IDP sites and returnee areas.

Activity complete and reported previously.

A 2.2.12. Distribute waste management materials for institutions and IDP sites.

Activity complete and reported previously.

Coordination

The IRC continued to coordinate with the WASH, ERD and Nutrition clusters; other partners; RUWASA, and Ministry of Water Resources to avoid duplication of services. The IRC will continue to use community level structures including community health volunteers (CHVs), local leadership, and the sector coordination mechanism to ensure that the beneficiary identification and NFI distributions are seamlessly performed.

Challenges

The IRC encountered an issue with the contractor identified to construct three motorized and 17 hand-pump boreholes in Adamawa State. After the tender was successfully awarded and the contract was finalized, the contractor failed to complete the necessary work within the defined amount of time and ultimately canceled the contract after completing only a small portion of the required work. The IRC has communicated with Europe Aid in Abuja about the impact of this canceled contract on implementation and is in the process currently of completing a request for a no cost extension. Full details on the proposed extension will be shared with Europe Aid shortly. There were no other challenges to project implementation as all other sectors remain on course.

Plans for next month

Specific Objective 1: IDPs, host communities, and returnees in Nigeria access basic needs and improved livelihood opportunities

Output 1.1 - The basic needs of the targeted vulnerable households are addressed

- Prepare endline report for Cash for Work

Output 1.2 - Vulnerable individuals, including young people and women, have access to livelihood opportunities

- Monitoring of Farmer Field School activities in 17 communities
- Distributions of post-harvest tools to 1,000 Farmer Field School beneficiaries in 17 communities
- Business growth monitoring of 250 IGA beneficiaries
- Monitoring of second cycle VSLA shares meeting

Specific Objective 2: IDPs, host communities and returnees in Nigeria have access to improved WASH and health services

Output 2.1 - Targeted communities are protected and treated for acute malnutrition

- Routine community sensitization across all the program clinics and communities
- Program supportive supervision and provision of on the job training
- Screening of under five children and referral of SAM identified new cases
- Admission of SAM children into both OTP and SC program clinics
- Routine treatment and follow up for the in program patient.
- Counselling of PLW mothers
- Program data collection on weekly and at the end of the month
- Routine distribution of program equipment, materials and supplies

Output 2.2 – WASH services including water supply and sanitation infrastructure for targeted communities are provided to contribute to improved wellbeing and resilience

- Distribute household water treatment chemicals;
- Carry out water quality assessment across 33 communities of EUTF intervention;
- Distribution of soaps for handwashing.
- Complete the ongoing construction of water infrastructures and latrine facilities.