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Emergency appeal Nigeria: Floods

 International Federation
of Red Cross and Red Crescent Societies

**Emergency appeal n° MDRNG014
GLIDE n° FL-2012-000138-NGA
22 November 2012**

This Emergency Appeal seeks CHF 3,453,527 in cash, kind, or services to support the Nigeria National Society to assist 50,000 beneficiaries for 12 months, and will be completed by the 25th September 2013. A Final Report will be made available by 25th December 2013 (three months after the end of the operation).

CHF 200,000 was allocated from the International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) to support this operation. Unearmarked funds to replenish the DREF are encouraged.



NRCS staff and volunteers working with communities to assess needs,
Photo/NRCS

Appeal history:

The preliminary Emergency Appeal was launched on 24th September 2012 for CHF 899,094 for 6 months to assist 10,000 beneficiaries. Disaster Relief Emergency Fund (DREF): CHF 200,000 was initially allocated from the Federation's DREF to support the national society to respond.

The current Emergency Appeal expands this operation in terms of geographic scope, activities, budget and duration, now totalling 12 months, with completion targeted for the 25th September 2013.

Summary:

The rainy season in Nigeria this year has brought more precipitation than earlier years, and has led to flooding in 33 of the 36 states. The rainwater was initially contained through contingency measures, but the heavy rain in the last couple of weeks has led to overflow of water reservoirs, forced release of dam water and breach of river boundaries and banks, causing damage to roads, bridges and other infrastructure, loss of property, livestock and displacement of people. Flooding between July and

October affected 7 million people, displaced 2.1 million and killed 363, according to the National Emergency Management Authority (NEMA).

NEMA and the United Nations Office for Coordination of Humanitarian Affairs (OCHA) have launched the Nigerian Humanitarian Forum on Flood response to support planning and information sharing on priority areas and needs for responding to the plight of the more than 7 million Nigerians affected by the recent floods, considered as the worst in the country in 40 years. The Forum will be jointly chaired and facilitated by NEMA and OCHA and will be initially organized on a weekly basis. The Nigerian Red Cross is participating along with the IFRC. (Abuja, Nigeria, 12 November 2012)¹

Since the launch of the preliminary emergency appeal, the National Society has distributed some relief supplies, carried out a rapid assessment of affected areas and their needs, and completed important preparatory activities, particularly the training of 50-70 volunteers in 11 state branches in shelter and in health and hygiene promotion. Additional training of trainers was also carried out and together, these trainings allow shelter and emergency health activities to be undertaken at the expanded scale of the current Emergency Appeal. Two water and sanitation kits that provide water treatment at household level for up to 2,000 beneficiaries each (WatSan kit 2) have arrived, procured non food items (NFIs) have arrived and arrangements for local procurement have been put in place.

The NRCS assessment showed that many displaced people who have not been sheltered by host families have sought refuge in schools, none of which have adequate space, sanitation facilities, or drinking water. Moreover, these displaced people are preventing schools from functioning normally. The conditions are similar in the 160 camps (each accommodating from thirty to several thousand people). In some areas people are living comfortably while in others they are not. In other areas the people have returned to their homes even if they are destroyed or still underwater. NRCS assessment teams found the displaced population to be scattered throughout the communities and countryside. Food prices in many flooded areas have risen by 30 to 70 percent increasing food insecurity for those affected.

On the basis of the assessment information, the operation is being expanded through this emergency appeal. The current appeal now targets 11 highly affected states, targeting most vulnerable populations (including child headed, female headed households). The current appeal expands operations in relief and shelter from 2,000 to 4,000 households, and broadens emergency health and WatSan interventions to 7,142 households. The duration is therefore extended to 12 months in total and the budget expanded to CHF 3,532,996. The operation currently addresses only part of the needs, but is flexible and easily scalable through an eventual revised appeal to reach more affected people should sufficient funding become available.

To date contributions have been received from private sector donors Shell, Exxon and FCMB (First City Monument Bank PLC), as well as movement partners such as Canadian Red Cross Society (from Canadian Government), Japanese Red Cross Society, Netherlands Red Cross (from Netherlands Government) and Swedish Red Cross, and also WHO Voluntary Emergency Relief. IFRC, on behalf of the Nigeria Red Cross Society, would like to extend gratitude to all donors and partners for their generous contributions, and encourage donors to fund the current expanded appeal in order to help meet the evident and urgent needs.

[<click here to view the attached Emergency Appeal Budget; here to link to a map of the affected area; or here to view contact details>](#)

¹ <http://reliefweb.int/country/nga/rss.xml>:

The situation

Torrential rain and the release of water at 4 dams in the Niger and Benue Rivers almost simultaneously have led to the worst flooding in 40 years. Floods commenced in the first two weeks of September with states bordering the rivers Benue and Niger being the most affected. The floodwaters have now moved into the Delta area in the south. While flood waters in the states upstream of the river Benue, such as Adamawa, Plateau, Taraba and Benue, have reportedly begun to subside, satellite imagery shows, however, that the areas under water along the river corridors are still much wider than in previous years (see images in Annex folder). Water levels in Edo and Anambra states are also receding, while sources in Delta and Bayelsa states report that the water levels are still rising in the lower parts of the Delta.

As the river Niger moves south from its confluence with the River Benue at Lokoja, past Onitsha and toward the river mouth, it is a broad, deep river that flows within a confined channel. Then, before it enters the Gulf of Guinea, the Niger forms a wide, fan-shaped delta, dividing into dozens of channels that wind through a maze of swamps and low-lying islands which causes it to deposit most of its sediment load. This confinement of the river has backed up the waters upstream and caused massive flooding between Lokoja and Inisha, while the siltation of the delta, due to a lower outflow as a result of dams and irrigation projects upstream, hampers the outflow of water to the sea.

Rain and flooding are reported in the capturing area in Mali of the river Niger. Therefore, the possibility of a prolonged flood situation in the delta area is being taken seriously.²

While we are seeing that upstream waters are slowly receding, Local Government Authorities (LGA) in the furthest downstream states have reported a rise in water levels in recent weeks. It must be stressed that—as possible scenarios are developed—these scarcely unprecedented floodwaters will possibly continue to rise in the lower delta regions for the coming months, and that even in that ‘positive’ scenario many tens of thousands of people will continue to be affected and displaced for the next few months; however, there is a distinct possibility that the waters will rise again either due to increased rainfall, or that the dams release water again in order to avoid “overtopping,” prolonging the time it takes the flood waters to recede to their pre-flood levels, or worse, re-displacing those already affected by the floods.

Coordination and partnerships

Movement coordination: At this time the IFRC no longer has an office in Nigeria, but still has a status agreement. Also, former IFRC staff are potentially available. At headquarters level, support is needed in the areas of communication, coordination, and representation. Operationally, the IFRC is supporting in WASH, Shelter, Relief, and Logistics. It is believed that supporting these emergency operations would be an excellent way for the IFRC to reengage with the National Society of the most populous nation in Africa. All meetings with external stakeholders in the operation have reinforced the same two messages: every entity in Nigeria is looking to the Nigerian Red Cross Society to lead the way in response and coordination, even well above and beyond its capacity and mandate; and secondly, no other agency or organization is better placed and able to react with even half of the speed and capacity with which the NS is reacting to the disaster.

The ICRC has a strong presence in Nigeria with 20 delegates in-country. There is one delegation (in Abuja) and in addition four field structures in Jos, Port Hartcourt, Kano and Malduguri. Their five principal activities are, in response to the ongoing clashes, supporting health structures, surgical

²Correspondence/handover from the Regional Water and Sanitation delegate, Zakari Issa who was part of the initial FACT

teams provide technical support to four hospitals, first aid, and cooperation and communication. There is a biweekly coordination meeting between the Nigerian RC, ICRC and the Federation.

Overview of non-RCRC actors in country: The Nigerian Emergency Management Agency (or NEMA) has a good relationship with the NRCS but is challenged to provide the level of coordination needed to successfully mitigate the worst effect of this disaster. OCHA has recognized this as a gap and is currently increasing its presence in order to give the necessary support. A small team has been sent from OCHA to support NEMA's coordination of information on the floods' impact and a humanitarian country team is working with the government's floods committee. FAO, UNHCR, UNICEF, and WHO are the UN organizations involved in the response. They are hampered by the lack of coordination and limited capacities in emergency response. UNHCR has a MoU with the Nigerian Red Cross Society. UNICEF is until now the only organization involved in emergency related relief distributions.

IOM, OXFAM, CARITAS, Save the Children, MSF and local organizations are present in-country and representatives from most of these organizations and agencies have participated in the Inter-Agency coordination meetings and the just completed joint assessment. As their activities in-country are development-oriented their response capacity is limited. Local organizations are present, especially in the delta area. Contact has been established between the alliance of environment-oriented NGOs and the Red Cross in anticipation of beginning operations in the delta region. Additionally, members from the International Rescue Committee, Catholic Relief Services and the United Nations Disaster Assessment and Coordination (UNDAC) team leader have come to meet with NRCS about the current situation and RC/RC's response.

USAID, World Bank, Shell and Embassies: The World Bank has during the past years strongly supported NEMA, and is a strong partner in advocacy for coordination. Shell has supported NRCS with a contribution of \$1 million USD to the appeal. The French Embassy is supporting the operation with 50,000 Euros, while the Netherlands Embassy is considering playing a role in communicating the concerns and activities to the wider diplomatic community.

Red Cross and Red Crescent action

In all affected states Nigerian Red Cross Society volunteers are active in the areas of camp management, relief, health, psychosocial support, hygiene promotion, registration and first aid. As the grid shows, these activities are based on the limited amount of emergency stocks and depending on the specific context in each state. Please note that the table below is just a sample based on activities in states where relief items were provided out of pre-stocked emergency relief items. The week starting November 19 Kogi state was targeted for distribution of shelter kits and tarpaulins, for 250 families which will deplete their emergency stocks.

Branch	Division	#s	Quantities	Ongoing activities
Adamawa	Girei, Yola South, Yola North, Numan	304 families	Blankets 608, Buckets 304, Mats 608, Soap 1,200, Shelter Kits 100, Kitchen Sets 100, Tarpaulins 200 and Jerry cans: 200	Camp Management, Health , Psychosocial support and Hygiene Promotion
Benue	Agatu, Guma, Logo	60 families	Blankets 300 , Buckets 100, Mats 100, Soap 600, Shelter Kits 40, Kitchen sets 40, Tarpaulins 80, Jerry cans 100 and Second hand clothing 3 bags	Psychosocial support, Camp Management and Hygiene Promotion
Jigawa	Dutse	50 families	Blankets 100, Mats 100, Mosquito nets 100, Hygiene kits 100, Kitchen sets 20, and second-hand clothing 2 Bags	Social Mobilization and Hygiene Promotion
Katsina	Mai'addua	50 families	Blankets 100, Mats 75, Mosquito	psychosocial support ,

			nets 100, Hygiene kits 100, Kitchen sets 20, and second-hand clothing 2 bags	First aids Services and Information sharing with relevant stakeholders
Kogi	Ajaokuta, Ofu, Koto karfi, Igalamela	60 families	Blankets 600 , Buckets 100, Mats 100, Soap 600, Shelter Kits 40, Kitchen sets 40, Tarpaulins 80, Jerry can 100 and second-hand clothing 2 bags	Psychosocial Support, Registration of Families affected, Evacuation , Camp Management and Hygiene Promotion
Taraba	Wukari, Ibi, Lau, Ardo-kola, Gassol, Karim lamido	250 families	Blankets 500 , Buckets 250, Mats 500, Soap 1,080 , Shelter Kits 100, Kitchen sets 100, Tarpaulins 200 and Jerry can 175	Camp Management, Psychosocial support, Social Mobilization and Hygiene Promotion

The Nigerian Red Cross Society's National Head Quarters has been focused since the beginning of the disaster with managing the assessments in the 11 targeted states and in the development of this plan of action

The needs

As the joint FACT (Field Assessment and Coordination Team) /Nigerian Red Cross Society rapid assessment is finalized,³ this plan of action will result in a revised emergency appeal both covering a larger number of beneficiaries and with a distinct and different approach in the upstream areas as compared with the delta region. The assessment shows that in the upper areas the numbers of displaced are relatively low, but the number of houses destroyed relatively high, The delta area shows a higher number of IDPs, but a lower number of destroyed houses, most likely because of the type of construction more adapted to flooding. With the caveat that the situation is still fluid (and data still missing from the low lying areas in the delta) the most recent statistics of the ten targeted states are as follows:

Summary of NRCS Rapid Assessment Data

State	LGAs	# Affected	# Displaced	# Dead	# Injured	# Missing	# of Camps	# of camp residents	# Homes destroyed /severely damaged	
Adamawa	6	20544	15879	24	233	0	11	5147	5740	
Taraba	6	15193	12440	3	23	0	15	8058	3344	
Plateau	2	2096	1645	3	22	0	0	0	329	
Benue	4	12420	7801	5	5	1	8	5992	2183	
Kogi	9	72725	30709	19	314	1	84	28764	12452	
Niger		9935	1789	32	76	0	3	1030	278	
Edo	3	54269	39602	10	178	0	13	30855	1854	
Anambra	10	64487	43350	1	1	0	3	43134	621	
Delta	8	52421	29635	18	15	0	12	27264	0	
Bayelsa	8	118601	73917	1	0	0	12	73917	0	
Rivers										
Totals		56	422691	256767	116	867	2	161	224161	26801

Source: NRCS Rapid Assessments, (Data from Rivers State not available).

The needs differ according to the geographical situation of the area and the consequent nature of the flooding. Along the upstream areas of the Rivers Niger and Benue and at their confluence, the floods had a sudden character with strong currents which inundated the flood-planes, and have now subsided to a large extent. With the availability of higher ground, most people found refuge with host households and their needs are related to their return to their habitats.⁴

Beneficiary selection criteria to identify the most vulnerable displaced households, with a focus on female and child-headed households, elderly and the physically handicapped, has been developed and is being disseminated to NRCS Branch Secretaries and the volunteers receiving the focused

³ Assessment data from Rivers State is not yet available

⁴ Though not captured in this appeal, it is important to note that livelihoods will become an important issue at a later stage as people begin to return home, with agricultural activities and fishing as main sources of income.

Health and Hygiene promotion ToT. This will lead to a targeted registration of beneficiaries in each of the eleven states who will receive assistance in the coming weeks.

While the NRCS assessment teams have focused on the settlements along the river corridors of both the Benue and the Niger rivers above the confluence, and then down below, there is still no finalized RCRC Assessment from Rivers State. Field visits by FACT and NRCS DM have developed a plan for supporting NRCS Rivers State Branch office, as well as Bayelsa and Delta states.

The 'downstream' area can be further broken down into two sections, the river bank area below the confluence of the Niger and Benue Rivers which now, even from a satellite image, resembles a great lake rather than a river, and the delta area where the river spills into the ocean. In the lower area of the River Niger and the Niger delta, the flooding is more wide spread and has inundated large areas as a result, with some districts being inundated by up to 80 percent. Consequently, the population is, to a large extent, immobilized and the available households that could function as host households are limited. This has led to a large number of overcrowded camps. As the lower areas are under the influence of the tidal movements, as well as a result of the developed infrastructure and siltation, the outflow of water will be hindered with the probability of prolonged inundation of these areas. The camps can therefore be expected to be populated over a longer period of time, with its specific needs in terms of emergency shelter and interventions in water and sanitation, as well as in camp management, health and hygiene promotion. The economic impact of the flood on the delta will be of an enormous scale, but a proper assessment of the needs is at this stage not possible.

The immediate needs of the flood-displaced people can be grouped into the areas of adequate shelter and the basic items necessary to live, as well as access to portable water and adequate sanitation facilities, and to basic health care. Most clinics visited by the assessment teams had inadequate or no stocks of basic birthing kits, antibiotics, and malaria treatment. Additionally, incidences of rape are being reported with increasing frequency throughout the country, and none of the clinics visited had post exposure prophylaxis (PEP) kits.

The people displaced by the flood are especially and increasingly vulnerable to a variety of illnesses and ailments (detailed below) due to their living conditions and the disruption to the normal routine by which they traditionally maintained their state of health. The sudden influx of people with their corresponding health issues has taxed and superseded the capacity of the clinics in the area to treat them.

The NRCS Health and FACT Team conducted a rapid assessment of the communities affected by floods. All the camps assessed reported a high number of cases of the following diseases: malaria; diarrheal disease; respiratory tract infections; skin infections/ rashes; injuries (trauma, bites). Other health concerns noted were: outbreak of Measles and Chicken Pox; lack/ insufficient anti-malarial/malaria treatment (ACT) and antibiotics; insufficient health personnel; ORS not available; high risk of sexually transmitted infections (STIs) and adolescent pregnancies (no condoms/ contraceptives available in the camps); women are giving birth in camps with no skilled birth attendants'; sexual and gender based violence (SGBV); no post-exposure prophylaxis (PEP) in clinics; lack of basic hygiene materials. The population to be assisted include 50,000 displaced people and targeted clinics providing health care in the areas with a high density of displaced people.

NRCS has a history of distributing and hanging mosquito nets throughout the country and as they have good evidence of increased impact in reducing malaria from past distributions, this should have noticeable impact on malaria prevention. ORS distribution will be included as part of the targeted health promotion and disease prevention program. Group sensitization sessions on prevention of dehydration due to diarrheal diseases will include how to use ORS as a component of this campaign. As the displaced population is quite scattered throughout the states and communities, group and

house-to-house distributions and demonstrations are recommended, over traditional oral rehydration points typical to epidemics.

In the most likely scenario, those displaced by the floods will remain displaced and thus need assistance for the coming three to four months; even if they return to their areas of origin their homes will not be habitable without significant renovation if no further releases from the dams are necessary. While the situation is fluid, with movements in the population noted on a daily and weekly basis, more investigation is underway to see where people are moving to and where and how they will be living once they return. With the flood waters still high in many downstream areas, those who return to their area of origin in the 'downstream' areas to pursue their livelihoods, will most likely encounter their houses and/or fields still under water.

The major risk to the success of the operations is the volatility of the security situation in the country which could limit access to the disaster-affected people—more on this in the security section.

The proposed operation

The NRCS is represented in all affected states and have mobilized resources at the branch level, but this centralized response will focus on the most affected areas in the 11 identified states of Adamawa, Niger, Kogi, Delta, Bayelsa, Rivers, Anambra, Edo, Taraba, Plateau and Benue with materials and support for emergency shelter and recovery, basic household items, provision of water and sanitation facilities in camps, household water purification tablets in certain identified areas, first aid, sensitization on flood related health risks; water, sanitation and hygiene promotion activities, targeting 50,000 people.

Overall operational goal: To provide shelter, cash/voucher assistance, water, sanitation, hygiene and health support to 50,000 disaster-affected people (approximately 7,142 households) for twelve months. Relief and early recovery efforts will target 4,000 households, while health, hygiene promotion and sanitation measures will reach the additional 3,142 households. To do this, a principal operational centre will be established in Benin City. This will serve as the base of operations for activities in Kogi and Edo states, as well as providing focused support to the operations conducted out of NRCS Branch offices in Adamawa, Anambra, Taraba and Delta state. Support for operations in Delta, Bayelsa and Rivers states will be supported by the Benin City operational/logistical centre, with the possibility of opening a secondary operations base out of NRCS Branch office in Port Harcourt under the supervision of the NRCS South-South Liaison officer.

Delta and downstream area: The disaster-affected population's survival and immediate needs are met through the provision of emergency shelter and non-food items (NFIs), as well as services in water, sanitation, hygiene and health promotion, along with focussed assistance to clinics and traditional birth attendants serving a large number of displaced people.

Upstream areas: As these people are/will be returning home in the near future, a package of additional shelter materials and appropriate technical assistance will be provided to assist them in rebuilding their homes.

The Nigeria Red Cross in coordination with the IFRC have decided to use percentages of overall assessment needs, and spread the assistance over 11 states. The distribution plan for 4,000 HH (and in according percentage the Health and Hygiene Promotion sensitization campaigns) across the eleven states breaks down thus:

Nigeria Floods: Distribution Plan			
State	# displaced	%	# of families
Adamawa	15,879	5.54	221
Taraba	12,440	4.34	173
Plateau	1645	0.57	23
Benue	7801	2.72	109
Kogi	30709	10.7	428
Niger	1789	0.625	25
Edo	39602	13.83	553
Anambra	43350	15.13	605
Delta	29635	10.34	413
Bayelsa	73917	25.8	1032
Rivers	29635	10.34	413
Totals	286,402	99.935	3,995

The Nigerian Red Cross has also decided to implement a modest Cash Transfer Program (CTP). The IFRC will facilitate technical support to analyze feasibility and recommendations for this program.

Emergency Shelter and Non Food Items

Outcomes: The immediate shelter and settlement needs of 4,000 households in the five targeted states within 3 months are met	
Outputs (expected results)	Activities planned
Output 1 - 4,000 identified families receive basic NFIs (Sleeping mats, blankets, kitchen sets, jerry cans, buckets, soap and mosquito nets) including cash and/or cash voucher assistance	<ul style="list-style-type: none"> • Identification and registration of beneficiaries • Procurement and distribution of non food items • Monitor, evaluate and report on distribution
Output 2 - 2,000 Families who are in the process of returning home receive shelter assistance in rebuilding their homes	<ul style="list-style-type: none"> • Identification and registration of beneficiaries • Procurement and distribution of shelter materials • Sensitization of the volunteers for the emergency sheltering activities • Support the beneficiaries with erection of temporary shelter, providing technical support and raising awareness of proper construction practices. • Monitor, evaluate and report on distribution • Evaluation of the emergency sheltering response and organize a lessons learned workshop

Emergency health and care

The major component of this Health and Care program is the community health and hygiene promotion sessions which will be conducted by NRCS volunteers. Through the provision of mosquito nets and

other basic health items, along with discussions of the signs and symptoms of the various infections and diseases to which the disaster-affected people in these conditions are prone, and basic means and ways to avoid contracting them, this program seeks to maintain their state of health as much as possible during their time of displacement. Focused assistance to clinics serving these populations and to traditional birth attendants active in the same areas will also have immediate, positive results

The health status of 50,000 beneficiaries (7,142 households) in 10 States within 6 months is improved through disease prevention and health promotion activities at the community level	
Outputs (expected results)	Activities planned
Effective case management and prevention of malaria	<ul style="list-style-type: none"> • Sensitize displaced communities on dangers of malaria and its symptoms • Distribute mosquito nets (part of relief distributions) and sensitize targeted households as to their use
Effective case management and prevention of diarrhoea	<ul style="list-style-type: none"> • Sensitize communities on signs and symptoms of dehydration • Sensitize targeted beneficiaries on prevention of diarrhoea (linked with hygiene promotion activities in WatSan) • Distribution of ORS to targeted households (HH) in conjunction with demonstration sessions on ORS use
Effective case management of skin and Upper Respiratory Tract infections	<ul style="list-style-type: none"> • Sensitize targeted beneficiaries on symptoms and signs of respiratory distress and skin infections • Referrals to clinics
Prevention of sexually transmitted infections (STIs)	<ul style="list-style-type: none"> • Sensitization of targeted communities on methods of transmission and ways of prevention • Distribution of condoms
Clinics in and around camps are able to effectively manage cases of sexual and gender-based violence	<ul style="list-style-type: none"> • Provision of Post-Exposure Prophylaxis kits to targeted clinics • Community Sensitization on resources available to those affected by SGBV, and importance of early referral to clinics
Targeted beneficiaries are reached with information, education and communication (IEC) messages on health promotion and disease prevention	<ul style="list-style-type: none"> • Volunteers trained in epidemic control carry out house-to-house and group education sessions to targeted beneficiaries in disease prevention and health promotion
Health problems related to childbirth and ante-natal care are reduced	<ul style="list-style-type: none"> • Mobilization for immunization campaign • Referral of pregnant women to clinics or to traditional birth attendants • Sensitization on methods of/ and contraceptive use; and prevention of adolescent pregnancy

Water, sanitation, and hygiene promotion

Immediate reduction in risk of waterborne and water related diseases in targeted communities through the provision of safe drinking water, sanitation facilities, and knowledge on basic hygiene practices to reduce the risk of contracting waterborne diseases are provided through social mobilization for 7,142 households within 12 months	
Outputs (expected results)	Activities planned
Hygiene-related goods (NFIs) which meet SPHERE standards are provided to and used by the target population	<ul style="list-style-type: none"> • Affected and targeted households receive sensitization in hygiene and sanitation practices, water treatment and receive appropriate relief items (target 50,000 people) • Households receive: water treatment chemicals, soap, jerry cans, buckets

Sanitation facilities are provided to affected and targeted households and communities according to emergency SPHERE standards	<ul style="list-style-type: none"> • Build 200 latrines according to emergency SPHERE standards • Maintain latrines through establishment of community sanitation groups, including appropriate vector control
Provide affected and targeted communities with safe drinking water (5,000 – 10,000 people)	<ul style="list-style-type: none"> • Install water treatment unit and water distribution points in camp and produce water • If needed, install mass water system with sedimentation and chlorination • Deployment of water and sanitation kit 2 (provides water treatment at household level for up to 2,000 beneficiaries) and kit 5 (designed for the treatment and distribution of up to 75,000 litres of water a day for a population of up to 5,000 people).
Hygiene promotion activities which meet SPHERE standards in terms of the identification and use of hygiene items provided to target population.	<ul style="list-style-type: none"> • Hygiene promotion activities provided to targeted population

Disaster Risk Reduction

Outcomes: Floods and landslide risk is reduced for targeted communities	
Outputs (expected results)	Activities planned
Output Flood and landslide affected communities are better prepared to predict, respond and recover to disasters.	Planned activities <ul style="list-style-type: none"> • Train 50 volunteers on Vulnerability Capacity Assessment (VCA) guidelines and tools. • Conduct VCA with communities in targeted districts. • Conduct shelter risk mitigation training for 25 volunteers involved in the shelter activities. • Develop community hazard maps for each of the communities • Develop community contingency plans and community based early warning systems. • Carry out public awareness and public education for DRR activities.

Logistics

Though operations will be focused in eleven states, it is envisioned that two operational hubs will be set up: the first, serving: Edo, Kogi, Adamawa, Taraba, and Benue states will be based out of NRCS office and warehouse in Benin City; the second operational and logistical hub for operations in Rivers and Bayelsa states will be at the NRCS office and warehouse in Port Harcourt.

A mixed procurement strategy will be put in place where the majority of all relief, shelter and WatSan items will be purchased locally, while the remainder of the items will be procured through Dakar. A regional logistical officer from the Dakar office arrived on October 30th 2012 and will work with operations logistics officer to put in place and expedite the standard IFRC procurement procedures of request for quotations (RFQs), cost benefit analysis (CBA), etc. to allow for the cost and time efficient procurement of the needed relief supplies.

The majority of suppliers are in Lagos, and a logistics mapping reveals that there is a surfeit of suppliers and transporters in Lagos to choose from; moreover, NRCS warehousing both in Lagos and Benin City will be more than adequate in terms of space and security.

With a semi-reliable internet and mobile phone connection both in the Abuja office and in the sub offices this should be adequate to enable sufficient and timely communication for all logistics matters.

As the NRCS does not possess sufficient vehicles needed to carry out the operations, and as there are currently no vehicles available in Dakar, 5 vehicles will be rented locally (two hard top pickups) for the duration of the mission.

Operations will be supported logistically in the following four areas:

- 1) Procurement
- 2) Ware housing
- 3) Transport
- 4) Capacity-building of NS homologues

Procurement: According to the operational needs, in terms of material and items, in general there are two types of NFIs:

Local purchases	In kind (regional)
<ul style="list-style-type: none"> - Bucket, plastic, 14L with clip cover - Jerry can, foldable, 20L - Soap, bars 100g - Blanket, woven, 50% wool - Sleeping mats, plastic - Mosquito Net, LLIN - Shelter Tool Kit (IFRC standard) 	<ul style="list-style-type: none"> - Tarpaulins woven plastic - Kitchen Set, family type A - Shelter, Tool Kit - WatSan Kit-5 - WatSan Kit – 2

Communications – Advocacy and Public information

A communications strategy will be elaborated to support the operation focusing on two priorities:

- 1) Advocacy on part of disaster-affected people as to size and impact of the floods, and with an eye to,
- 2) Improve image of NS.

A 10 day visit by Regional IFRC Communications officer with photographer will serve to broadcast how NRCS is responding to the disaster and to build the capacity of NRCS communications department, promoting the activities of the operation nationally and internationally.

Capacity of the National Society

The Nigerian Red Cross Society has witnessed challenges in the governance/management relationship since 2006 which have now been settled. Last December, the Federation relocated its West Coast Regional Representation from Abuja to Abidjan, This left the ICRC as the only Movement partner in country. The ICRC has opened 3 sub-delegations across the country and is operational in the last 4 years mostly working directly with the state branches where they have projects. Recently, a cooperation delegate has been deployed to improve the relationship with the national society and in a recent meeting between FACT TL, ICRC HoD, NRCS SG and DMC a commencement of bi-weekly Movement coordination meetings was agreed to. During the past three years all HQ staff have been replaced, mostly with staff from state branches. Therefore support in coordination is seen as a precondition for the operations to be successful. The Nigerian Red Cross has a presence with volunteers in all branches trained in first aid and basic relief duties. Furthermore, they can mobilize 10 National Disaster Response Team (NDRT) members to support their emergency activities. A number of personnel have also received the shelter kit training. The branches of the NRCS operate with semi autonomy, and some branches have been interacting with donors and responding to the emergency

independently, or in parallel with NRCS HQs, and with varying levels of capacity, according to their resources.

Disaster Management (DM); Health and Care; Dissemination and Communication and Organizational Development are the 4 core programs of the NS. Disaster Preparedness/Response and Restoring Family Links (RFL) activities are the bedrock of the DM plan, while infectious disease prevention and control; HIV/AIDS; Water and Sanitation; non-remunerated blood donor recruitment; maternal, neonatal and child health as well as health in emergencies constitute the core of health and care components of the NRCS. On the other hand, promotion of respect for human dignity and diversity is rooted in the systematic dissemination of the RCRC Principles and International Humanitarian Law (IHL), advocacy, partnering and networking and capacity building. Volunteers' management, resource mobilization, branch development and strategies for strengthening the HR and financial management are priorities of the NS

Capacity of the IFRC

The IFRC has mobilized Global Disaster Response Tools to support the response operations of the Nigerian Red Cross. To date there has been 2 rotations of Field Assessment and Coordination Teams (FACT) and deployment of 1 Head of Emergency Operations (HEOps).

The current IFRC human resource plan is as follows: Considering the Health interventions planned and the epidemiological situation as attached we will need Health person on ground to support this and provide guidance to NS.,

HR planning table			
Position Title	Sector Area	Time (months)	Specific roles, responsibilities, tasks
Operations Coordinator/Representative	Operations	12	Representation of IFRC and coordination of all facets of operations
Relief RDRT	Relief	3	Develop relief plan, implementing and monitoring distributions
Logistics RDRT	Logistics	6	Oversee all areas of logistics needed to support operations, focusing on developing local procurement procedures according to IFRC standards
Shelter Delegate	Technical assistance	6	Oversee implementation of emergency shelter strategy
WatSan Delegate	Water and Sanitation	6	Oversee implementation of water and sanitation activities
WatSan RDRT #1	Water and Sanitation	3	Oversee production of potable water in one or possibly 2 sites
WatSan RDRT #2	Water and Sanitation	3	Oversee HP ToT and implementation of HP campaign
Regional Logistics Officer	Logistics	4	Surge support to logs department in local purchasing
Regional Finance Officer	Finance	3	Assist in putting together budget and manage daily finance/admin support to mission
Finance Delegate	Finance	9	
Reporting Delegate	Reporting	9	Fulfil all PMN (Pledge Management Note) and standard IFRC reporting.
Cash Transfer Programming Officer	CTP	3	Fulfil all PMN and standard IFRC reporting.

Security

The overall security situation in Nigeria is volatile and representing one of the highest levels of crime in the world. While the capital Abuja has lower levels of violent crime than other big cities, across the

south of the country, there has been an increase in violent crimes, which can pose significant risks to RC/RC personnel as they can involve indiscriminate shooting and the use of explosives. The risk is particularly high in Ogun state, which has one of the highest rates of armed robbery and violent crime in the country.

Due to the crime rates, exacerbated by high levels of militant activities, the situation is being monitored closely by the Zone Security Team, while the country team is currently developing the security plans in accordance with IFRC's Minimum Security Regulations (MSR) and will be supported by a security support mission at the nearest opportune time.

Jagan Chapagain
Acting Under Secretary General
Programme Services Division

Bekele Geleta
Secretary General

Contact information

For further information specifically related to this operation please contact:

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For Resource Mobilization and Pledges:

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For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

In IFRC Zone: Robert ONDRUSEK, PMER/QA Delegate, Africa; Phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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EMERGENCY APPEAL

22-11-12

Nigeria Floods (MDRNG014)

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	309,300			309,300
Shelter - Transitional	200,000			200,000
Construction - Housing				0
Construction - Facilities				0
Construction - Materials	242,714			242,714
Clothing & Textiles	183,495			183,495
Food				0
Seeds & Plants				0
Water, Sanitation & Hygiene	164,109			164,109
Medical & First Aid	60,035			60,035
Teaching Materials				0
Utensils & Tools	179,480			179,480
Other Supplies & Services	30,810			30,810
Emergency Response Units				0
Cash Disbursements	148,810			148,810
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	1,518,753	0	0	1,518,753
Land & Buildings				0
Vehicles				0
Computer & Telecom Equipment	9,881			9,881
Office/Household Furniture & Equipment				0
Medical Equipment				0
Other Machinery & Equipment				0
Total LAND, VEHICLES AND EQUIPMENT	9,881	0	0	9,881
Storage, Warehousing	744			744
Distribution & Monitoring	6,548			6,548
Transport & Vehicle Costs	229,088			229,088
Logistics Services				0
Total LOGISTICS, TRANSPORT AND STORAGE	236,380	0	0	236,380
International Staff	688,000			688,000
National Staff	25,500			25,500
National Society Staff	144,643			144,643
Volunteers	272,999			272,999
Total PERSONNEL	1,131,142	0	0	1,131,142
Consultants	4,286			4,286
Professional Fees				0
Total CONSULTANTS & PROFESSIONAL FEES	4,286	0	0	4,286
Workshops & Training	125,326			125,326
Total WORKSHOP & TRAINING	125,326	0	0	125,326
Travel	95,500			95,500
Information & Public Relations	27,107			27,107
Office Costs	48,969			48,969
Communications	25,405			25,405
Financial Charges	20,000			20,000
Other General Expenses				0
Shared Office and Services Costs				0
Total GENERAL EXPENDITURES	216,981	0	0	216,981
Partner National Societies				0
Other Partners (NGOs, UN, other)				0
Total TRANSFER TO PARTNERS	0	0	0	0
Programme and Services Support Recovery	210,779	0		210,779
Total INDIRECT COSTS	210,779	0	0	210,779
Pledge Earmarking & Reporting Fees				0
Total PLEDGE SPECIFIC COSTS	0	0	0	0
TOTAL BUDGET	3,453,527	0	0	3,453,527
Available Resources				
Multilateral Contributions				0
Bilateral Contributions				0
TOTAL AVAILABLE RESOURCES	0	0	0	0
NET EMERGENCY APPEAL NEEDS	3,453,527	0	0	3,453,527

