

DREF operation update

 International Federation
of Red Cross and Red Crescent Societies

Nigeria: Floods

DREF operation n°
MDRNG008
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NGA
Update n° 1
07 January, 2011

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

Period covered by this update: 15 October to 19 December, 2010.

Summary: CHF 301,288 (USD 312,896 or EUR 224,373) has been allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the Nigeria Red Cross Society (NRCS) in delivering immediate assistance to some 15,000 beneficiaries most vulnerable and conduct in-depth assessment. Unearmarked funds to repay DREF are encouraged.

The rainfall in Sokoto, Jigawa and Kebbi States, north of Nigeria during August and September and the overflow of some rivers and release of water from dams caused heavy flooding in the same communities especially those bordering the Republic of Niger. Thousands of persons were affected by the floods with many rendered homeless as their houses were submerged by flood water while farms including crops and livestock were washed away. More than 40 persons lost their lives while public infrastructure like roads, bridges and schools were damaged. The Nigerian Red Cross Society (NRCS) with support from the International Federation's DREF carried out a comprehensive assessment of the situation in the three most affected states of Sokoto, Jigawa and Kebbi to determine the immediate needs of the affected populations.



A Red Cross team leader carrying out community entry meeting with community elders. NRCS

The outcomes of the assessment showed that the most affected population is in need of immediate food, non-food items, shelter, water and sanitation and livelihoods. With government agencies providing relief food items, the NRCS has procured non-food items (NFIs) including blankets, sleeping mats, jerry cans, tarpaulins, mosquito bed nets, hygiene kits among others and these items are presently being distributed to target beneficiaries in the affected states. The National Society (NS) is also procuring backyard gardening tools and seeds to assist identified most affected families in restarting their livelihoods. The Red Cross is carrying out sensitization activities on good sanitation and hygiene practices in these states. The NS has also been collaborating with MSF-Holland which has been providing medical assistance in some of the camps. MSF-H is involved in the distribution of NFIs in some communities using the services of Red Cross volunteers. As the operation is ongoing, there is a need to scale up health and sanitation activities in the affected communities to curb the outbreak/spread

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of epidemics such as cholera which had been affecting some of these communities prior to the flood disaster. The bad state of the roads and the inaccessibility to some of the affected communities have been major challenges to the operation. However, with support of some of the community people through the use of their carts, the Red Cross is gradually accessing these communities with relief items.

The Nigerian Red Cross Society seeks for an extension of one month at no extra cost to complete activities under the livelihoods support which were affected by other activities in the National Society towards the end of the year as well as other unfolding emergency events in the region. The extension period will also be used to complete the replenishment of prepositioned NFI stock used during the operation. This operation will now be completed by 7 February, 2011. In line with Federation reporting standards, the Final Report (narrative and financial) is due 90 days after the end of the operation (by 7 May, 2011).

The Nigerian Red Cross Society and the International Federation express their appreciation to ECHO for its support towards replenishing this DREF allocation. It is noted that other major donors to the DREF include the Irish, Italian, Netherlands and Norwegian governments. Details of all donors can be found on <http://www.ifrc.org/what/disasters/responding/drs/tools/dref/donors.asp>

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The situation

The heavy rains in the north of Nigeria and neighbouring Republic of Niger during the months of August and September 2010 have caused severe flooding in some states in Nigeria especially those bordering the Republic of Niger. The flood situation in Sokoto State was worsened by the collapse of Goronyo Dam and the over flow of Rima River during the first week of September 2010. Many houses were submerged and hectares of farmland including livestock and crops washed away by flood water which also claimed 40 lives and displaced thousands of families in 50 communities of 11 Local Governments areas out of the 23 that made up the state. According to the NRCS after an in-depth assessment of the situation with support from the International Federation 2,972 families were displaced; 10,214 farms destroyed; 1,524 water wells contaminated by flood water; and 1,786 toilet facilities were damaged by flooding. The floods also damaged some public infrastructure like bridges, roads and schools including the Usmanu Dan Fodio University. In Jigawa State, 7,789 farms including backyard gardens were destroyed while 161 houses were completely washed away and 21 partly damaged. The displaced persons in the affected states are sheltered in temporary camps, school premises and some are staying with relatives and friends.



Access to some of the affected communities was a challenge/NRCS

Although the rains have stopped and water has started receding, access to some of the affected communities is still a major challenge due to the difficult terrain and collapse of bridges. However, findings from the Red Cross comprehensive assessment showed that health and sanitation facilities in many of the IDPs camps are insufficient or non-existent leading to increased cases of cholera, diarrhoea, skin diseases and malaria in these camps. This is likely to worsen with the commencement of the harsh Harmattan weather. The Red Cross assessment team also noticed signs of malnutrition amongst the children in some of the camps. Hence, there is the need for increased health and good hygiene sensitization in the camps and in the communities. Priority should also be given to the provision of more ORS, water treatment tablets, construction/rehabilitation toilet/latrines

and potable water facilities. With the destruction of houses and farmland causing severe psychological trauma to the most affected households, there is the urgent need to scale up assistance in livelihoods and shelter to the most affected population.

Coordination and partnerships

Coordination has been a major challenge in the affected states. Apart from the Red Cross and MSF-H working in close collaboration, other international and national humanitarian agencies have been channelling their support through the respective state authorities. MSF-H has been visible in providing medical support and distribution of blankets, mosquito nets, soap and jerry cans in some of the IDPs camps in accessible communities in Sokoto State and some 20 trained Red Cross volunteers have also been assisting in these

intervention activities. The organization is also collaborating with the Red Cross in information sharing and assisting in preventing duplication of tasks in the temporary camps. Other organizations including UNICEF donated non-food items to state government for the affected population. The Federal Government of Nigeria on its part donated some amounts of money to the affected states to provide relief assistance to the flood victims. The Nigerian military authorities are also assisting in installing Foldable Floating Bridges (FFB) to ease movement in the affected areas. The military is already providing free medical services around the bridge area. The National Refugee Commission and the National Emergency Management Agency (NEMA) donated some food and non-food items to the government in Sokoto State.

Red Cross and Red Crescent action

The NRCS State Branches in Jigawa, Kebbi and Sokoto provided initial response by mobilizing and deploying 350 volunteers in the affected communities to assist in the evacuation to safer areas and provide first-aid service. The Red Cross also provided psychological support to the affected population and has been collaborating with other actors especially MSF-H in information sharing and support through the volunteers who have been working with the MSF-H in relief distribution. The NRCS has trained 80 additional volunteer on assessment, beneficiary identification and registration, code of conduct, crowd control, media relation, and relief management among others. With support from the International Federation DREF, the NS carried out a comprehensive assessment of the situation in Jigawa, Sokoto and Kebbi States reaching communities where other humanitarian agencies could not reach. ICRC in collaboration with the Sokoto State Branch of the NRCS carried out a one-day rapid assessment of the situation in Sokoto State. The Red Cross has also been providing data on the situation to the Sokoto State Ministry of Health.

The first distribution commenced with the flood victims grateful to receive the Red Cross assistance. According to 86 year old Umaru Maigari, the Chef of Daga community, “this assistance will help us for a long time, as in fact it is the first time ever in my life time I have seen such an intervention from the humanitarian actors towards flood victims. We are given a whole shelter kit and kitchen set thereby restoring our human dignity and these tarpaulins will not only serve as protection against all impediments but also for drying my millets after harvest.”

Progress towards outcomes

Relief distributions (food and basic non-food items)	
Outcome: Some 3,000 most affected households have received specific quantity and quality of non-food items based on the assessment and selection criteria from Red Cross.	
Outputs	Activities planned
Relief items are procured and distributed to 3,000 most affected families and selected through established Red Cross selection criteria.	<ul style="list-style-type: none"> • Procure and distribute 3,000 blankets and 3,000 sleeping mats to 1,500 most affected households; • Mobilize and brief 250 Red Cross volunteers on registration and distribution strategies of the Red Cross; • Conduct a rapid emergency needs assessment in the target communities; • Control supply movements from point of dispatch to end user; • Monitor and evaluate the relief activities and provide report on distribution of relief items.

Progress: The NRCS with the Federation deployed two RDRT and 10 NDRT members that carried out an in-depth assessment in Jigawa and Sokoto States with 120 Red Cross volunteers. The assessment team with logistics support from the IFRC West Coast Office was able to reach affected remote communities. The assessment revealed the real extent of the flood impact and basic emergency needs of the affected population which the Red Cross is addressing through this operation. The Sokoto State Commissioner for Health was at the state branch of the NRCS for data collection because the Ministry knew that the Red Cross had reached many vulnerable affected communities that the Ministry could not access.

The NS has procured non-food items and prepositioned them in the target communities for distribution to the identified most affected vulnerable persons in Jigawa, Sokoto and Kebbi States. The registration of the target beneficiaries and the distribution of ration cards have been completed during this reporting period.

The NS has trained more than 100 volunteers on various aspects of assessment, beneficiary targeting, code of conduct, crowd control, relief management as well as media relation. Distribution of NFIs to target beneficiaries has commenced in Sokoto State where at least four communities of about 500 families were reached at the time of this operation update and the Red Cross distributed 501 blankets and 501 sleeping mats.

Challenges: Difficult terrain, flooded roads, paths and damaged bridges coupled with insufficient 4 x 4 wheel drives/utility vehicles to assess the flooded areas, as well as lack of secondary data on some affected communities, are some of the challenges encountered in this operation. However, with the cooperation and support of community members, their carts were being used for transportation.

Livelihood (agro-pastoralists)

Outcome: The food needs of the affected population are improved through the support of household coping mechanisms with the provision of agro-pastoral materials and seeds to 800 most vulnerable households.	
Outputs	Activities planned
800 most vulnerable households have increased access to agro-pastoral materials and seeds to produce for markets and domestic consumption to reduce food scarcities within the most vulnerable households.	<ul style="list-style-type: none"> • Conduct a rapid emergency needs assessment in the target communities; • Procure and distribute backyard gardening tools (hoes, cutlasses, boots, racks) and seeds to 800 target households; • Mobilize and brief 250 Red Cross volunteers on registration and distribution strategies of the Red Cross and advising on good practices on quick crops; • Monitor and evaluate the livelihood activities and provide report on distribution of agricultural items.

Progress: One of the main outcomes of the assessment carried out in Sokoto, Jigawa and Kebbi States shows that there is need to concentrate more on empowering people affected with means to restart their livelihoods, as most of them are farmers. Some have commenced making efforts in that direction but will need seeds and farming/gardening tools. A survey of the soil and adaptable seeds has been carried out with the support of the ARI (Agricultural Research Institute) to determine the type of intervention for the farming communities. Water sources have also been surveyed for support of backyard gardening to supplement the daily intake/food basket as most of the farmland and crops were destroyed.

Challenges: The affected people want all their needs to be met immediately and simultaneously or in parallel with health needs: livelihoods support, water and sanitation, temporary shelter among others. These needs are disproportionate to the available resources making it difficult to meeting them all while prioritizing in an emergency phase without offending the beneficiaries. There is a low esteem of affected people due to various traumas experienced and uncertainty over their future. The Red Cross volunteers continue to ensure that psychological support are provided to alleviate their trauma.

Emergency Health

Outcome 1: To contribute to the prevention of communicable diseases among 3,000 most vulnerable families in the affected three states.

Outputs	Activities planned
The risks of communicable diseases are reduced for the most affected communities and the health status of the community is improved	<ul style="list-style-type: none"> • Procure and distribute 24,000 sachets of ORS to 3,000 most affected families in the three flooded states; • Train 150 volunteers on health preventive measures on diarrheal and communicable diseases; • Provide Information, Education and Communication (IEC) materials for health, water, sanitation and risk reduction sensitization activities; • Conduct health sensitization activities to the most affected communities in the three affected states.

Outcomes 2: To reduce the morbidity and mortality attributable to malaria among 3,000 flood displaced families.

Expected results	Activities planned
3,000 most flood affected families are reached by volunteers with messages regarding malaria and distribution of LLIN, usage, and correct hanging.	<ul style="list-style-type: none"> • Procure and distribute 6,000 mosquito nets to 3,000 most affected families; • Disseminate key messages concerning LLIN use and malaria (targeting pregnant women and caretakers for children under 5); • Procure nails and strings for mosquito nets hang up campaign for 3,000 affected families.

Progress: 120 Red Cross volunteers have been trained on health promotion and appropriate hygiene practices. The operation has procured mosquito nets for distribution in target communities. At least 1,002 LLINs have been distributed to 501 families in four communities in Sokoto. Sensitization and demonstration of the usage of bed nets were being carried out by Red Cross volunteers and the community health officers.

Challenges: There is lack of adequate bed space to hang the treated mosquito bed nets for pregnant women, children under five as displaced families stay in thatch huts of one room. There is also lack of health facilities in the affected communities. The fear of misuse of ORS as symptoms of other ailments could be taken for cholera, hence these have been centralized with the community health committee to supervise and distribute whenever appropriate.

Water, sanitation, and hygiene promotion

Outcome: The risks of waterborne diseases are reduced through hygiene promotion, health education and provision of drinking water in target communities in the affected states.

Outputs	Activities planned
3,000 most affected families in the flooded states have access to clean water, hygiene and sanitation facilities.	<ul style="list-style-type: none"> • Mobilize and train 250 Red Cross volunteers on good hygiene, water purification method and health promotion; • Procure 12 first-aid kits to be used by volunteers in the affected areas; • Procure and distribute 250,000 water purification tablets and 3,000 pieces of jerry cans to 3,000 most affected households; • Procure and distribute 12,000 bars of soap, 500 kitchen sets and 6,000 mosquito nets to the targeted most affected households; • Sensitize the target communities on water

	purification, good hygiene and health practices; <ul style="list-style-type: none"> • Provide first-aid services to the affected communities.
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Progress: The NRCS has procured water treatment tablets to be distributed in the target communities. The mobilized Red Cross volunteers have been trained on how to use the water treatment tablets. They in turn are expected to transfer the knowledge to the target beneficiaries through demonstration and house-to-house follow-up visits.

Challenges: Insufficient clear water that can be treated with supplied aqua tabs is a major obstacle. With displaced families in dire need of drinking water, filtration and/or boiling of river and stream water before being treated with aqua tabs may not be regularly practised. . There are some families with large numbers of members and this is distorting the number of aqua tabs to be provided as the quantity of drinking water used is higher in such households. The Red Cross is considering the possibility of establishing a community borehole with centralized treatment. Meanwhile, the operation has decided to carry out the distribution of aqua tabs using married women as lead criteria as most of the households are polygamous with large numbers of children.

Emergency shelter	
Outcome: To provide emergency shelter to 1,200 most vulnerable households in the affected communities.	
Outputs	Activities planned
Shelter kits and tarpaulins are procured and distributed to 1,200 displaced families.	<ul style="list-style-type: none"> • Carry out shelter damage needs assessment in the affected communities; • Develop beneficiary selection criteria and register beneficiaries; • Procure and distribute 1,200 shelter kits to the target beneficiaries in the three states; • Support beneficiaries in emergency shelter reconstruction in the affected communities.

Progress: The NRCS has procured 1,200 shelter kits and 1,000 tarpaulins to be distributed in the target communities. Red Cross volunteers were trained in modus operandi of setting up temporary shelters using the procured shelter kits and tarpaulins. They in turn are expected to transfer the knowledge to the target beneficiaries through demonstration and house-to-house follow-up visits.

Challenges: Many beneficiaries are using shelter kits in the traditional way to reconstruct their houses and this has led to increased need of tarpaulins. There are insufficient tarpaulins which are desperately needed especially in the most affected state of Sokoto where they are yet to be delivered. The delay in supply from the RLU is due to high demand from different operations.

Logistics

The West Coast Regional Representation provided two four-wheel drive vehicles for the operation during the assessment period and hired trucks for the prepositioning of the relief materials. This has effectively assisted the team in reaching many communities though the roads are in deplorable state. However, it remained a challenge and almost impossible to reach some of the remote communities by vehicle hence the use of carts became an alternative. Affected communities have been willingly providing their support with their carts to transport relief materials to the distribution points. With the commencement of the relief distribution, there is a need to increase the number of vehicles for the operation so as to scale up activities and enhance timely delivery of service to the target beneficiaries.

Communications – Advocacy and Public information

The NRCS continued to collaborate with local media in Jigawa and Sokoto States to increase the visibility of the Red Cross during the operation.

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.

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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