

Protection and Conflict Trends in 2017

Recommendations to mainstream protection in Nigeria Humanitarian Response Plan 2017

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Main conflict and protection trends for 2017

Nigeria will remain in situation of non-international armed conflict in the year 2017. Whilst food insecurity and nutrition needs will prominently surface, the main driver of the humanitarian crisis in the North East will be the ongoing Boko Haram conflict and the counter-insurgency measures. The Nigerian military, vigilantes and its Multinational Joint Task Force (MJTF) partners will likely to maintain **strong counter-insurgency posture** which will further consolidate gains achieved in 2015 and 2016. Boko Haram's shifting tactics and the military response thereto will likely result in fresh displacements, protection risks and abuses to civilians. Many IDPs in camps and host communities have experienced trauma and neglect during the course of the conflict. Affected civilians, IDPs and returnees will all require continued community-based psychosocial interventions and other targeted services. Continued loss of territory by Boko Haram will diminish its capacity to raise resources; and plan and execute classical insurgency methods. **Boko Haram will resort to new tactics and approaches.** The spiritual and religious foundations of Boko Haram will be further eroded as the organization increasingly engages in opportunistic and criminal activities to raise money and carry out new tactics of attacks including using civilians as "suicide bombers." Humanitarian actors will face risks of kidnapping and attacks. IDP sites will be considered 'high visibility' targets; inviting further restrictions by security actors to movements in and out of IDP camps.

The increased humanitarian needs in 2017 require robust life-saving intervention by all actors. Humanitarians will likely continue to focus on IDPs in camps and those settlements and sites in the newly accessible areas. Despite these enhanced focus, humanitarian's ability to meet the vast majority of the needs of the civilians even in IDP camps will be considerably limited. In the newly accessible areas, considerable reconstruction and rebuilding initiatives are needed to restore essential services, reconstruct shelters, support civilians to work on their farms and implement livelihood activities, restore law and order, support co-existence and peace building initiatives, address potential conflicts and tensions and mitigate security risks from mines and other explosives. Inadequate access assistance may result in riots, frustration, negative coping mechanisms and sexual abuse and exploitation. Children will be exposed to street begging and other forms of abuse and neglect.

Women, children, the elderly, persons with disability and minority groups require specific attention. Initial assessments have revealed that some of the households who are returning to newly accessible LGAs are female-headed due to the fact that the 'husbands' have either disappeared, killed or been afraid to return. There are also reports of children engaged in "reconstruction activities." This reveals the specific protection risks faced by men especially young adults and the burden and vulnerability experienced by women who have returned back to their LGAs without them. **As several reports and assessments have revealed, limited access to humanitarian assistance and services has contributed to negative coping mechanisms and sexual abuse and exploitations including in IDP camps in Maiduguri.**

Return of displaced population will be a major phenomenon in 2017. Many IDPs particularly from camps in Maiduguri will move into the newly accessible areas including through government-facilitated programs. As of September 2016 more than 1 million civilians, including 152,000 Nigerian refugees, have returned. **While some IDPs will be able to return to their homes; others will be stranded in secondary displacement.** The number of IDPs returning or those who are involved in secondary displacement will likely increase as the Nigerian Military and MJTF secure many new areas and the security situation gradually improves. Organized movements of IDPs into their LGAs may likely be exposed to security risks. Some IDPs will not be returning back to their areas of origin or their homes; and instead may join IDP settlements in LGA headquarters. This secondary movement requires new approaches in understanding trends in displacement; humanitarian response in new sites and engagement with communities to ensure that return solution to areas of origin are achieved. Risks of potential tension and conflict between those who are returning and others who never left will likely be visible due to perceptions of association with Boko Haram. The security and safety of civilians who have never left can be undermined as a result of "negative perception of association with Boko Haram." A strong co-existence and peace building initiative and access to justice programs will be needed.

Host communities will continue to extend their solidarity with IDPs. As of October 2016, more than 80 percent of the displaced populations are outside of official camps, living with host communities. Many IDPs particularly those who are in host communities will encounter limitation in accessing basic services including education, health and food assistance. Coupled with the current economic climate and the socio-economic disruption resulting from the insurgency, the capacity and resource of host communities will be diminished. Tensions between host communities and IDPs will be exacerbated; and there be a negative perception towards humanitarian programs that solely target IDPs.

There are **opportunities for durable solutions for the displaced populations and the affected population.** The "Buhari plan" brings together several initiatives by the government, allowing opportunities for the government to invest resources. However economic decline and recession will be an ongoing challenge faced by Nigeria which will significantly hamper government's capacity to fully implement its reconstruction plans and activities.

Recommendations to ensure centrality of protection

The HRP strategic objective for Nigeria HRP 2017 identifies protection mainstreaming as a central strategic element of the joint plan. The IASC guidance on the Centrality of Protection and protection policy requires all actors to ensure the mainstreaming of protection across their response. The following recommendations are intended to support all sectors in mainstream protection:

- **Gender, protection and vulnerability** concerns should be part of the planning phase –you are not likely to reach everyone at the same time: consider who (by gender and age) are the most vulnerable and what assistance is most appropriate when prioritizing your work.
 - **Communication with the community** about (a) their needs and (b) for information sharing about options is crucial for designing appropriate responses. It is important to meet not only with traditional community leaders who are often men, but also women, youth, children, elderly, and disabled who may not regularly be part of the decision making process. This helps to *minimize the risks that the project may miss its target*.
- **Do no harm:** The way you provide assistance must not expose people to danger. Avoid unintended consequences for instance by supporting social cohesion when also assisting the communities (in GCA and NGCA) surrounding your main beneficiaries. Some areas like the contact line may have both IDPs and local population in equal need.
- Ask if the location for your activity is suitable or if you can find a better site to conduct your work, i.e. ask is it a good idea to provide services near the contact line at logistics centers where there is an increased risk for shelling, Explosive Remnants of War (ERW) or in an area with a high degree of military presence which may put some vulnerable groups at further risk, for instance adolescent and young women who may be exposed to sexual violence.
 - **Protection actors have identified serious SEA around camps and in the newly accessible areas.** How do you ensure that the staff hired under your project has been properly trained to prevent sexual exploitation and abuse, or on behavior related to ERW? Men and boys are particularly at risk of ERW concerns and you should consider how to address this.
- **Non-discrimination:** Ensure that all vulnerable groups of women and girls, men and boys, have access to the assistance. E.g. if Non Food Items (NFIs) are handed out in a place where a person in a wheel chair cannot enter, then in practice this means that the service has not been provided.
- **Prioritization:** Are you supporting those most in need? E.g. are you starting with those it is easier to reach or those who need it the most? Again humanitarian response in Maiduguri and in host communities remain seriously inadequate.
- **Coordination of the response:** To ensure accountability to the affected population it is important that you have coordinated with the local community and the local authorities. Do you have a mechanism in place to avoid duplication with other providers and organizations working on related issues, such as responding to needs in institutions where

Annex

Protection mainstreaming recommendations to Sectors

The following is a list of some of the key protection mainstreaming considerations Sectors in Nigeria should take into account when planning for 2017 programming.

WASH:

- Ensure, the **location** of EH facilities and routes to them are away from actual or potential threats such as violence; especially the risk or threat of gender-based violence (GBV), and attacks from armed groups.
 - *Consider installing lights near the latrines, especially if these are communal or away from homes. If lighting is not possible, consider alternatives such as providing torches for each household. Be careful not to put individuals at risk with valuable assets.*
 - *Do not place facilities near possible perpetrators. N.B. The police and armed forces are often seen as perpetrators of violations. Whether they provide a reassuring feeling or instill fear depends on the location. It is important to consult the community and potential beneficiaries about their preferences.*
- Make **infrastructure** adaptations such as ramps and railings to EH facilities so that all individuals and groups can access and use facilities in safety and dignity. Use discussion groups and observation to detect/discuss this and ask the community to come up with solutions.
 - *Physically separate and label the latrines “male” and “female”.*
 - *Ensure latrine design accounts for children (e.g. size of pits may present a safety risk for children).*
 - *It is preferable that latrines and showers can be locked from the inside to ensure privacy. Discuss with beneficiaries what they would prefer. Example: Children in one country were reluctant to use traditional sliding locks and had alternative ideas (e.g. wood and nails).*
- **EH facilities design** must preserve the safety and dignity of its users.
 - *Ensure separate toilet and bathing facilities for males and females. Make sure they are clearly marked in pictorial form and work with the community to ensure they are used by the indicated sex.*
 - **Consider that women and children are the most likely to be collecting water**, and might be waiting in the sun for hours for a turn to fill their jerry can. Establish safe and shaded waiting areas where possible.
 - *Schedule water collection times to limit overcrowding at the water points; collection in shifts.*
 - Consult displaced communities as well as host communities about EH needs so as to **avoid community tensions**. Make sure that there is no tension or inequality that could lead to violence and harassment of one group or another.

CCCM:

- Carefully examine risks of violence, especially gender-based violence (GBV), to boys, girls, men and women in their daily activities (e.g. fetching water, going to the market or to school, collecting firewood or getting fuel), and work with them and protection actors to identify preventive measures and responses.
- Ensure that effective security measures are in place, especially at night, such as police and/or community patrols where possible, adequate lighting or other security measures. Monitor high-risk security zones regularly and at different times of day (e.g. around showers, latrines, child-friendly spaces, schools and routes to schools, health facilities, water collection points, etc.).
- Be aware of existing tensions between different ethnic, religious or other groups and consider cultural practices within the affected community. Regularly monitor and discuss with beneficiaries if they feel pressured, directly or indirectly, to return to their place of origin or relocate, or if they feel prevented from leaving the camp.

- Set-up referral systems in partnership with protection actors to provide an appropriate response and specialised assistance to persons with specific needs. Apply standards on data management and implement measures to secure referral data i.e. to ensure that personal data and lists of beneficiaries of specialist protection interventions are kept confidential and stored in a secured manner to avoid unintended uses.
- Set-up feedback and complaints mechanism to receive and investigate requests and grievances regarding CCCM interventions, facilities and services at the displacement sites, as well as allegations of intimidation, coercion, violence and sexual exploitation and abuse experienced by women, girls, boys and men in receiving assistance. Respond to all complaints, regardless of whether corrective measures can/need to be put in place.
- Ensure that camp/site managers and coordinators have signed a code of conduct stating their commitment to respect and foster humanitarian standards and the rights of beneficiaries. Train managers and coordinators on the code of conduct and effectively monitor their adherence to the code. Compliance with the requirement to have a code of conduct is a non-derogatory criterion for the selection of all service providers.
- In partnership with protection actors, identify dedicated focal points and raise awareness about Prevention of Sexual Exploitation and Abuse (PSEA) by UN staff members, related personnel and partners. Provide clear information on the fact that beneficiaries do not have to provide services or favors in exchange for receiving services or accessing facilities.

Health:

- Ensure that the health services are **respectful and inclusive of cultural and religious practice**.
 - *Consider the Power Dynamics between health staff and the patient. How can this affect the patient's responses, behavior, and general attitude towards the staff and services provided?*
 - *Consider separate waiting areas (male/female).*
 - *Employ female health staff members with skills and experience working with women.*
 - *Employ health staff members with skills and experience working with children.*
- Ensure that **confidentiality and privacy** is respected in any form of consultation, counseling or personal information sharing.
 - *Ensure examination rooms are well separated from public spaces or the waiting area.*
 - *If separate rooms cannot be provided, consider establishing a dry-wall or at least put up a curtain.*
 - *Ensure that an information sharing protocol is established so that a survivor of abuse will not need to repeat their story, potentially exposing them to further trauma; and all efforts are made to ensure her confidentiality.*
 - *Do not collect information which is not needed to contribute towards promoting the well-being of the individual.*
- Do not share **identifiable information** unless consent has been given by the beneficiary (e.g. names, addresses, or traits and characteristics about the case that can lead to identification, etc.).
 - *If requesting consent to collect and use data, make sure it is properly informed and that the beneficiary has the capacity to give consent (e.g. children or persons with intellectual disabilities may give consent without fully understanding or having the capacity to do so).*
 - *Make sure that data storage is secure and that contingency plans are in place to secure, move or destroy the data in the event that the area must be evacuated.*
- Put in place guidelines and mechanisms for monitoring and reporting instances of abuse and exploitation.
- Ensure that the health facilities are accessible to all.
 - *Discuss with all representative samples of society (e.g. men, women, girls, boys, the elderly, ethnic groups, persons with disabilities) that should have access to the services we provide. If necessary, adapt the location to reduce the distance and to ensure that the most vulnerable/marginalised have access.*

- Ensure that health **staff** know how to respond to the specific needs of victims of grave human rights violations, including rape and physical abuse.
 - *Staff should be trained and capable of providing psychosocial support to reduce trauma. If staff are not trained, they should have the information to refer patients to these services. To avoid trauma and reduce the chance of being singled out in the health center, victims of grave human rights violations should be prioritised.*
 - *Train health staff to identify and respond to traditional harmful practices.*
 - *Set up referral networks for services required in response to instances of abuse and exploitation in line with best practice.*

Shelter/NFI:

- Provide efficient lighting throughout site/settlement, with special attention to public and communal areas such as sanitation facilities.
- Respect minimum space standard in shelters to minimise risks of exploitation and abuse.
- Plan separate bathrooms and toilets for men and women, avoid dark and isolated areas.
- Include partitions and door locks (when culturally relevant) to better protect women and girls, particularly single women and female-headed households.
- Take into account local material, existing capacities and the environment. Whenever possible, locally acceptable and available materials and labor should be used to benefit the local economy, while not depleting local resources

Food Security:

- Food, cash, vouchers or livestock interventions may make people more vulnerable to certain protection problems, such as attacks. The ownership or management of these types of assets, which may be particularly valuable in an emergency, may place people at greater risk of violence, abduction or abuse. Analysis of the local security environment, including in relation to ownership patterns, recent history of looting or raiding, husbandry practices and the need to access livestock services or markets, is necessary to identify high risk practices and activities.
- A food assistance system that enables displaced beneficiaries to live among host families or in a dispersed manner should be prioritised, in spite of the greater logistical constraints it may entail. Avoid turning food aid into a pull factor for encampment.
- Coping strategies contributing to food security and dignity should be supported, while bearing in mind that some of them may carry costs or incur risks that increase vulnerability, so these should be avoided.
- If some individuals, for example older persons or persons with disabilities, cannot access the services, ensure that special arrangements are made to bring food or cash to them. It should not be assumed that friends and family will do it. Coordinate with specialised organisations, to identify individuals with limited mobility and include them in the program assistance.
- Consult men, women, boys, girls, the elderly, and persons with disabilities to understand their needs and preferences for location, design, and methodology of assistance. Direct observation and discussion groups with representatives of the community to identify the adaptations that are needed for the most vulnerable.
- A complaints feedback mechanism should be established with a view to improving programming, assisting in understanding beneficiary and community perceptions, promoting beneficiary empowerment and assisting in the early detection of problems such as targeting, misconduct including sexual exploitation and abuse, food diversion and fraud.



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