



#### People affected

**800 000** more people lacking basic health services

**14.8 million** affected by crisis

**3.4 million** people targeted for health services

#### Impact on the health sector

**More than 50%** health facilities poorly or not functioning

**14%** rate of severe acute malnutrition

**4X** mortality rates higher than emergency thresholds

**2** cases of polio

#### Funding needs

Health Sector (HRP 2016)

**US\$ 25 million** requested

**US\$ 5 million** requested by WHO

**US\$ 0.7 million** received by WHO

WHO (for Scale-up Plan Borno State)

**US\$ 8.1 million** requested

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Borno State, August 2016 (WHO/ R. Holden )

#### At a glance

- Health needs of 800 000 people in north eastern Nigeria, formerly held by militant insurgency groups, must urgently be addressed.
- Estimated mortality rates in some areas are 4 times higher than emergency thresholds. The health situation may be much worse.
- The rate of severe acute malnutrition is estimated to be 14%.
- On 17 August, Nigeria reported 2 polio cases in Borno state, 2 years after the last recorded case in the country.
- Insecurity is a major operational constraint, and the risk for humanitarian workers is significant.

#### Current situation

Conflict since 2009 has caused widespread devastation in north eastern Nigeria, generating a crisis that affects more than 14.8 million people in Adamawa, Borno, Gombe and Yobe States. Recent developments liberated some 800 000 people in Borno State, but access remains difficult. They are mostly women, children and elderly. Many have lacked access to health care services for more than two years.-

The working environment in the affected areas is extremely challenging. Resources and capacities to meet the enormous health service gaps are grossly inadequate. Insecurity is a major constraint, with a number of recent attacks on humanitarian staff by insurgents. The annual wet season is also peaking and there are forecasts of major floods in the coming weeks. Access to the 15 local government areas require military escort over long distances on poor roads.



#### Major health risks:

Conflict-related injuries

The spread of diseases including measles, polio and malaria

Severe malnutrition

Limited access to essential health services

#### Health risks

More than half of the health facilities in Borno State, the area most severely affected, are not functioning. Initial assessments reveal urgent health problems among the population in 15 local government areas (LGA) formerly held by insurgency groups.

Estimated mortality rates in some of the areas are four times higher than emergency thresholds. The rate of severe acute malnutrition is estimated to be 14%.

In addition, Nigeria reported two polio cases in Borno state on 17 August, two years after the last recorded case in the country. One of the cases is from an LGA that is still inaccessible to health service delivery, while the other is from a newly accessible LGA. Measles cases have also been reported in the area, and a severe measles outbreak is likely, which further complicating a challenging humanitarian environment.

#### Action taken by WHO and Health partners

WHO is scaling up its emergency response activities, together with partners, to assist hundreds of thousands of people in desperate need of health services. The immediate goal is to urgently reduce the rates of death and disease by rapidly scaling up life-saving health services. WHO will work closely with local officials and specialist agencies to address the health risks posed by malnutrition, disease outbreaks, and long-term lack of access to basic health services.

WHO recently deployed expert staff to Nigeria for emergency operations, coordination, diseases surveillance and data management. A team is on the ground in Borno State to help with the polio outbreak response. The government has already launched emergency polio vaccination activities, with support from WHO and partners. WHO has also dispatched emergency drugs and supplies with more efforts planned, including a scaled-up measles vaccination campaign to reach some 4.5 million children.

#### Funding needs

Funding needs for the health sector in Nigeria are estimated at **US\$25 million** as part of the overall 2016 "Humanitarian Response Plan" which is currently being reviewed with partners in light of the latest events.

Given the rapidly escalating humanitarian needs identified by increased access in newly liberated areas, WHO has developed an immediate **Scale-Up Plan for Borno State**, where the needs are the most extreme. WHO funding needs for the Scale-Up plan in Borno State for the period September-December 2016 are **US\$ 8.1 million**.

#### Recent contributors to WHO's work in Nigeria

WHO would like to acknowledge financial support from CERF for the Organization's response to the ongoing crisis in Nigeria in 2016.