



Border monitoring: Nigerian refugee returnees at Amchide border between Cameroon and Nigeria, April 2020

# **NORTH-EAST NIGERIA PROTECTION MONITORING REPORT** MARCH - APRIL 2020



















## I. OPERATIONAL CONTEXT AND MAJOR DEVELOPMENTS





12,698 нн 27,508 Ind

(source UNHCR)

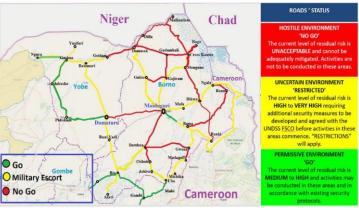


241 HH 1,324 Ind

(source NCFRMI)

Table 1: Population of concern as of end of April 2020

The security situation in Borno Adamawa and Yobe (BAY) States marked by a lull during March 2020 has deteriorated due to repetitive attacks on military positions, IDP camps in Local Government Areas (LGAs) during April 2020 with severe impact on communities and persons of concern (PoC). In addition, Chadian Military operations resulted in pushing back Non State Arm Groups (NSAG) from Chad to neighbouring countries including Nigeria, Niger and Cameroon, thereby contributing to the deterioration of the security situation in these countries of the Lake Chad Basin Region.



1: Main supply roads by April 2020, BAY states Source: UNDSS

In April 2020, in particular and contrary to the situation prevailing in March 2020, the Maiduguri-Damaturu axis connecting Borno and Yobe States turned into a "no Go" status due to increased insecurity caused by intensified operations of NSAG along this main supply route, critically hindering humanitarian access.

The northeast environment already impacted by security-related challenges has been further hit by the COVID-19 pandemic outbreak in Nigeria during March and its spread to Northeast in April. Measures put in place first to prevent and respond, then to contain the spread of the pandemic including border closure and the lockdown have had an adverse impact on humanitarian response and affected population access to their rights.

As seen in the previous years, NSAG activities increase during the Holy Month of Ramadan is expected as the month is considered the month of Jihad by the Islamist groups.

In Borno State, major incidents included attacks on schools and health facilities in violation of Security Council Resolution 1261 (1999) in Biu LGA in March and attacks and kidnapping of IDPs by NSAGs while out of the camps to fetch firewood and while traveling on the main supply route between Monguno and Maiduguri. Attacks on military bases and civilian soft targets as well as attempts to infiltrate camps in Dikwa, Ngala, Banki, Gwoza have also been reported. In Adamawa State, breaches to peace include attacks on civilians by NSAG in the north particularly in Krinshinga and Gulak wards of Madagali LGA and criminal activities such as kidnapping, robbery, and clashes between Herders-Farmers in the South of the State. In Yobe State, the clearance operation by the Multinational Joint Task Force (MNJTF) around the Lake Chad Basin (LCB) to flush out insurgents has pushed out the group to Gaidam, Kananma LGAs.

Despite the very complex situation, some positive developments are worth mentioning: In Damasak, the General Hospital has reopened, and WFP resumed the distribution of cooking oil as part of the food basket during General Food distribution after 4 weeks suspension during March. In a bid to prevent the disruption of the provision of basic humanitarian supplies for the affected population during COVID-19 prevention and response, BAY State governments exempted vehicles carrying humanitarian supplies from movement



restrictions. These have supported persons of concerns' access to health care, food, and other humanitarian supplies.

### II. PROTECTION BY PRESENCE

Since the confirmation of the first index case in Borno State protection by presence has been challenged by governments' measures to contain the spread of the pandemic. Regardless of the challenges, UNHCR and its partners (GISCOR), Nigeria Bar Association (NBA), National Human Rights Commission (NHRC), Nigeria Immigration Service (NIS), BOWDI, FHI 360 in collaboration with BAY States Government have taken all necessary steps to "stay and deliver" using the establishment of its community-based structures such as Protection Action Groups (PAG) recruited among IDPs and host communities, locally recruited protection monitors and protection desks; they are at the center of protection service delivery for COVID-19 prevention and response.



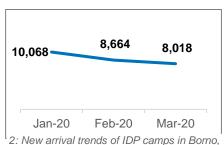
The number of people reached in April (21,889) by protection services has significantly dropped compared to the 27,105 reached in March. This decrease is attributed to the preventive measures such as social distancing, and restriction on large gatherings put in place to contain the spread of the pandemic.

#### III. POPULATION MOVEMENTS

In March and subsequently in April, two major population dynamics were observed.

#### a. Internal displacement

Movement of populations within BAY States towards IDP camps and host communities continued despite the total lockdown and the ban of interstate travel. Secondary or multiple displacements of IDPs due to several factors sometimes interrelated such as insecurity as a result of NSAGs activities and military operations, the quest for livelihood activities including the need to access farmlands in anticipation of the forthcoming rainy season and family reunification. A total of 8,018 individuals arrived in Banki, Monguno, Bama, Gwoza, Ngala, and camps in Jere and MMC in Borno State whereas 165 individuals arrived in Mubi North in Adamawa State.



2: New arrival trends of IDP camps in Borno, as of end March 2020

A considerable decrease in population movements into IDPs camps have been observed since January, understood as due to restrictive measures put in place to contain the pandemic, including restriction on freedom of movement within the state, particularly in April.

### b. Cross- border movements from neighbouring countries

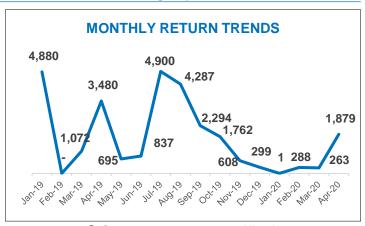
Despite official closure of borders, cross-border movements mainly from Cameroon, Niger and Chad were reported. In March and April, a total of **2,142 Nigerians refugees** from Cameroon (1,643), Niger (488) and



Chad (11) spontaneously returned to Nigeria. The main areas of return include Bama, Banki, and Pulka, Gamboru-Ngala and Damasak in **Borno State**.

Their return was triggered by insecurity in the country of asylum as a result of NSAG attacks, fear of attacks or military operations.

It is worth mentioning that as part of Nigerian refugee returnees from Cameroon, 82 households comprising of 298 individuals all refugees' returnees from Cameroon (Kolofata) endured challenges in accessing the Nigerian territory due



3: Spontaneous returnees to Nigeria

to border closure at Amchide due to measures put in place to curb COVID-19 pandemic. Advocacy and support to the government for the implementation of COVID-19 health screening contributed to enabling access to the territory.

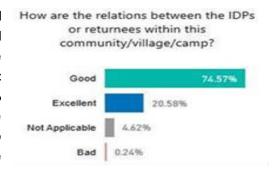
Similarly, 3HHs/ 8 individuals returned to Mubi North in **Adamawa State** from Cameroon. Insecurity and absence of civil authorities in their areas of origin in Borno, as well as lack or limited access to basic services, contributed to their return in IDP camps or host communities.

The rise in the numbers of spontaneous returns from neighbouring countries between March and April seems peculiar especially as borders were closed during this period. Meaning that despite the closure, borders especially at Damasak remained generally accessible, in addition to cross border movement trough unofficial borders as observed in Ngala and Pulka. Also, the recent military operations in the LCB region seems to have triggered increased return movements of Nigerians during April. UNHCR has also conducted advocacy for access to territory as well as right to return.

Finally, the arrival of 43HHs/184 individuals asylum seekers from Niger into Damasak in Nigeria was reported in March, bringing to 241 HHs/1,324 individuals the total number of asylum seekers living in host communities in Damasak, pending government decision on their status.

## IV. PEACEFUL COEXISTENCE

Peaceful coexistence among IDPs of various religious, ethnic, and other backgrounds remained generally good as expressed by 74% and 20% of key informants repetitively in Borno and Adamawa states at the end of April. Likewise, coexistence between IDPs and host communities was reportedly good as well according to 69% and 19% of key informants respectively. However, risk factors such as the presence of Ex-combatants among the population, limited access to natural resources, and varying cultural practices among others have been highlighted for their potential to jeopardize the existing tranquillity.



In Borno State the presence of IDPs formerly associated with NSAG and demobilized have been reported to be a risk factor for peaceful coexistence in Gwoza, Mungono, and Bama. In Damasak, tensions between Chunguluski and Fulatari Communities rooted around the denial of access to River Dam for fishing by Chunguluski Community resulted in a deadly conflict between the two Communities. Moreover, tensions at waterpoints, mostly due to the scarcity of water, were reported in Gwoza, Pulka, and Monguno. These tensions were exacerbated April with the increased need to access water to practice

Relations btw IDP/Returnee and Host Comunity

Good 69.96%

Excellent

Not Applicable

Bad

preventive measures against COVID-19 Pandemic, in addition to drinking needs.

*In Adamawa*, former children and women associated with NSAG in Madagali complained to be rejected by family members and the community. In addition, culturally approved discrimination against all blacksmiths in the community caused disharmony in Madagali/Michika, meanwhile in Angwa Kara the non-inclusion of host community members in the provision of humanitarian assistance created tensions between IDPs and host communities.

Generally, sensitizations involving community leadership structures; the scale-up of service provision in sectors such as WASH susceptible to affect the social cohesion; the implementation of community programmes benefitting both IDPs and host communities remain powerful tools to address existing sources of conflict and foster peaceful coexistence. However, due to the multifaceted and complex implications of insurgency, Government-led Dialogue and reconciliation initiatives; inclusive and gender-sensitive reintegration programs, as well as de-radicalization programmes targeting the youth, need to be considered for sustainable peace.

### V. COMPLAINT AND FEEDBACK MECHANISMS

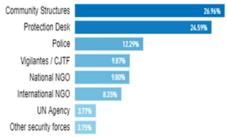
Several complaints and feedback mechanisms exist in camps and host communities. In Borno State, community structures and protection desks have been reported as the most preferred complaint and feedback mechanisms by 27% and 24% of key informants respectively. This reflects the importance given to transparency and accountability to affected populations through establishing a true partnership with community structures in protection delivery and enabling feedback on services provided.

The recourse to community structures also appeared to be due to the lack of awareness among communities on available hotlines as reported by 44% of the 1,114 people received at the protection desk in April 2020.

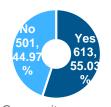
In the absence of the stakeholders, particularly during the period of lockdown, the need to strengthen the capacity of community structures to be abreast of protection concerns existing in the community; to identify, report and develop self-protection mechanisms remains fundamental.

The central role played by Protection desks in protection service delivery justified by the need to maintain presence and deliver in full compliance with WHO preventive measures has been noted since the outbreak but particularly in April.

Who do you go to, if you have a protection concern?



Are PoC aware of the Hotline



4: Community awareness on available hotlines – April 2020

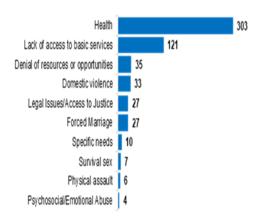
## VI. ACCESS TO FUNDAMENTAL RIGHTS

According to 83%, 72%, 48%, 53% of key informants interviewed during the reporting period, access to rights such as food, adequate shelter, health and education respectively. Most of the rights of IDPs and host community members already affected by the ongoing crisis have been further impacted by the measures put in place since the outbreak of COVID-19 and particularly in April with the implementation of the lockdown.



The right to return as well as the right to seek asylum have been impacted by the closure of the borders with neighbouring as a COVID-19 preventive measure. As a result, during the month of April 298 Nigerian refugees returning from Cameroon were stranded at Amchide at the border between Cameroon and Nigeria for three days before admission on the territory after advocacy and observance of COVID-19 control measures.

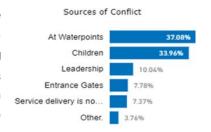
Persons of concern **right to health** has been impacted by the lockdown. During the month of April, **in four LGAs, 27% of 1,114 IDPs** received at the protection desks reported health concerns as a result of the lockdown that affected health partners presence in the



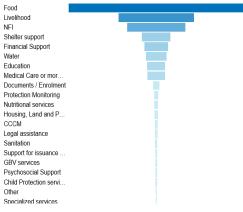
field and subsequently the scale-down of health-related services as seen in IDP camps in Jere, Bama and Banki. The restriction of movement out of the camps due to the lockdown also hindered access to health care including secondary healthcare outside the camps or in other LGAs. Finally, population in camps and host communities complained about the lack of isolation/holding centers for the quarantine of persons arriving from high-risk LGAs or countries as a threat to their health. This was reported in Bama, Monguno, Ngala and Damasak. Measures have been put in place to scale-up health services and to construct holding centers in Banki, Damasak, Ngala and Gwoza

The right to water for drinking purposes has also been claimed during the period under review to enable the implementation of WHO preventive measures such as regular hand washing. Shortage of water causing long queues and conflicts at water points has been noted in Pulka and Gwoza among other areas, as reported by 37% of key informants. Alternatives such as accessing water in host communities have been rendered impossible due to the lockdown and prohibition of movements out of the camps especially in MMC, Jere and Konduga LGAs.

The **right to employment and livelihood** opportunities and the right to food: The pre-existing limited access to employment and income generating activities and sustainable livelihoods in camps that prompted IDPs to move out of camps to other LGAs, states or to neighbouring countries to access means of livelihoods including markets, farmlands have been impacted by COVID-19 measures such as closure of borders and the restriction on movement putting pressure on already limited and further scaled-down assistance in camps. This has had implication on the right to food, especially in locations where food distribution has been delayed or is not systematic. As such cases of denial of resources, domestic violence and other negative coping



Priority needs



mechanisms in the community were reported at protection desks in April and believed to be a result of inability to access food and livelihoods. In Banki, Gwoza and other locations This has also been reflected by the three priority needs that remains food, livelihood and NFIs.

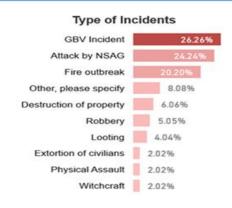
Other rights such as the right to education, to safe access to cooking fuel have been also affected and will be developed under separate sections

#### VII. INCIDENTS AND PROTECTION CONCERNS



A total of 99 **incidents** were reported and captured in March and April **through the protection monitoring tools in Borno State**. A number of other incidents especially SGBV have been reported through other systems. The figures presented here therefore do not provide a comprehensive picture of incidents during the reporting period. Overall, underreporting of incidents have been observed mainly due to the lockdown that impacted activities in covered LGAs.

In addition to SGBV incidents, that will be developed in a separate section, reported cases included attacks by NSAGs 24%, Fire outbreaks (20%), destruction of property (6%), Robbery 5% looting 4% among the major ones as reflected in the chart.

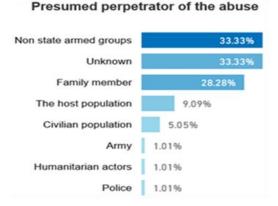


The typology of incidents across the 2 months remains unchanged as GBV incidents, fire outbreak and attacks by NSAGs continue to be the three main reported incidents. **LGAs that have been affected** include Dikwa 35%, Bama 27%, Gwoza and Mobbar 8% each, Jere with 7%, Damboa 4 %, Konduga and Maiduguri 2 % and Kala balge 1% have also registered incidents. Maiduguri Metropolitan Council appears to be the safest place with less incidents recorded. This could be attributed to the increased presence of security personnel including

military HQ, Police and UNDSS to implement the COVID-19 measures.

The alleged perpetrators are NSAG in 33 % of cases; family members 28%; the host population 9%; civilian 5%; state security actors (1%) and humanitarian actors (1%).

While incidents of attacks, robbery, looting are mostly attributed to NSAGs and other non-identified perpetrators, for SGBV incidents involving family members the majority perpetrators are reportedly intimate partners. Incidents of extortion of civilians are reportedly attributed to members of security forces at entry points after official closure of the borders.



**Survivors** remain largely civilians, among whom majority were IDPs. With regard to gender, women and girls were the most affected.

Persistent attacks by NSAG and attempts to infiltrate the camps has resulted in heightened fear and panic among IDPs. This led to the relocation of IDPs to camps in Banki and Dikwa which are perceived to be safer. In addition, they continue to cause secondary and multiple displacements of populations into camps and host communities in search of safety. These movements have been seriously challenged in April with restrictions on movements due to COVID-19 preventive measures.

The combination of insecurity and COVID-19 related factors at the end of the reporting period gave rise to cases of stigmatization of those who were forced to flee their areas of origin and in COVID-19 high-risk areas and arrived in IDP camps without prior health screening and quarantine.

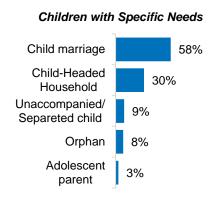
Finally, **fire outbreaks** in March and April in Monguno, Ngala, Dikwa among other locations has led to the loss of lives, destruction of shelters and properties thereby exposing the victims to further protection and health risks, including but not limited to exposure to COVID-19. Even though causes of the continuous outbreak remain unclear, some factors such as the dry season, poor site planning, shelters in inflammable material as well as makeshift shelters inside and around the camp, the negligence of populations among others have been raised to explain the phenomenon.



Continuous engagement of all stakeholders including community-based structures in prevention and remedial actions remains essential. In addition, CIM-COORD meetings at local and state levels will continue to be used for advocacy on concerns relating to human rights violations involving security actors as well as for its continuous advocacy on the improvement of the overall security situation. Finally, multisectoral efforts on strengthening fire outbreak prevention, mitigation and response existing procedures are to be pursued.

## VIII. CHILD PROTECTION

The findings of the vulnerability screening conducted during the reporting period in 10 LGAs in Borno state revealed that 58% of vulnerable children experienced child marriage (these figures are different from child/forced marriage cases identified during the reporting period and developed under the SGBV section), 30% of vulnerable children were child-headed households; 9% unaccompanied and separated children; and 8% orphans. This highlight the fact that the ongoing crisis continues to negatively impact children separated from their biological parents or caregivers and find themselves with parental responsibilities that further expose them to abuse and exploitation.



Children associated with armed forces and armed groups (CAAFAGs) have also been identified in Banki, Bama, Gwoza, Monguno, Dikwa. These children face concerns around acceptability and stigma by host community members and in some instances their family members. They have been referred to relevant child protection service providers available including but not limited to UNICEF, IOM DDRR programme, NEEM Foundation, plan international and Restoration of Hope Initiative (ROHI) are working in collaboration of the Ministry of Women Affairs and Social Development. Sensitization of stakeholders and community members have also been conducted to change the community perception of these children. Ensuring children's access to education and vocational training programmes and empowering their parents or caregivers to meet their basic needs could contribute to mitigating the risks of recruitment or the radicalization of children and youth.

The absence of the civil status offices in most LGAs with subsequent difficulties to register children at birth puts children at high risk of statelessness and hampers their access to basic social services, including access to education exposing them to further violation of their rights. Children of IDPs, and returnees are at heightened risk. In April, the protection of children was further affected by the lockdown leading to scale down of services by state entities responsible for the issuance of birth certificate as a result to contain the COVID-19 pandemic thereby compromising, UNHCR and other stakeholders programmes aiming at supporting birth registration and documentation.

**In Adamawa**, an increase in the number of children identified as Almajiri begging on the street has been observed as it was the case in Yobe state where about 125 Almajiris aged between 4-15 years reportedly indigene of **Yobe states** were returned to Damaturu from Gombe State. The returned children were received and isolated at Government Secondary School, Damaturu pending tracing of their relatives/families for reunification purposes by Yobe State Emergency Management Agency (SEMA). These children remain extremely vulnerable to the COVID-19 disease in the absence of measures taken to protect them.

Effective responses to child protection cases continue to be challenged by the lack of child-protection specialized services among humanitarian actors but more importantly state line ministries which capacity remains limited. The lack of a legal framework remains a critical gap as the Child Rights Act is yet to be enacted in Borno State.



IX.





SGBV incidents

## SEXUAL AND GENDER BASED VIOLENCE PREVENTION AND RESPONSE

Sexual and gender-based violence (SGBV) continues to pose significant risks to the well-being of Internally Displaced Persons and returnee population in the Borno state despite efforts by humanitarian community and state governments.

From March to April 2020, 326 SGBV incidents were reported to UNHCR and partners in 12 local governments areas (LGAs).

Analysis of available information from LGAs in Borno State shows that Bama followed by Pulka and Monguno LGAs have registered the highest number of incidents with 35%, 11,6% and 10,7% respectively.

99%

Perpetrated on female

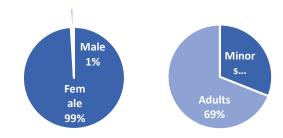


31%

Perpetrated on minors.

Based on current statistics, majority of SGBV incidents continue to occur among women and girls with minimal cases reported among Men and boys. During the reporting period, women and girls were the most affected with a sex ratio of 99%.

The overall age ratio showed a rate of 31% of person under 18 who have been affected by SGBV incidents.



There is an increase in reported SGBV incidents from January to April 2020. This is due to the volatile security environment associated with ongoing insurgency.

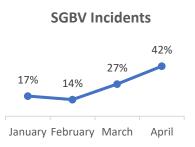
Moreover, the weak economic environment coupled with pre-existing socio-cultural norms and the recent outbreak of COVID-19 Pandemic continues to have an impact on the lives of the affected population and may also worsen the protection environment.



are child/forced

The main SGBV incidents that were reported are Child and forced marriage, denial of resources, opportunities and services, physical assault, Survival sex/Sexual Exploitation and Abuse,

Sexual assault, Psychological/Emotional Abuse, Rape, and Female Genital mutilation (FGM).

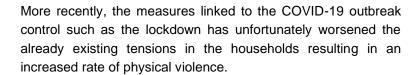


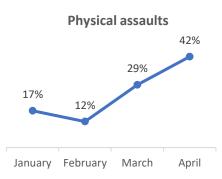
Child and forced marriage counted for 35% of reported incidents. This situation is clearly associated with the social-cultural constraints but furthermore to the lack of adequate legal framework around the child/forced marriage in the North East and particularly in Borno State. In addition, the possible impact of COVID-19 outbreak coupled with other contributing factors such as negative cultural norms may significantly bearing on the current phenomenon which makes it important to conduct more advocacy with traditional and religious leaders for a change of practice. There is also the need to continue equipping the community gender-based structures with correct information on the benefits of delaying child marriage.

**Denial of resources, opportunities, and services** has been reported as the second highest of SGBV incidents with a 27% rate. It is known that poor access to humanitarian services and other basic needs and essential services such as cash for food SIMCARDs and lack of economic opportunities for Men, women, boys and girls have contributed to the occurrence of SGBV incidents in IDP and returnee communities. Some women have reported being denied access to health care by their husbands.



**Physical assault** perpetrated in majority of case by intimate partners have increased from January to April 2020. This is linked to limited economic opportunities and basic needs such as critical gender-based material (sanitary pads, etc.) for some young women and girls who have been forced into negative coping mechanisms in order to feed their families.





**Incidents of survival sex/Sexual Exploitation** represented 7% of SGBV cases reported between the period of March and April 2020. Although biting poverty and attendant lack of economic opportunities, significant efforts have been made to reduce the risk of survival sex/sexual exploitation and abuse through continuous awareness, sensitization, and skill acquisition programs.

Women and girls have reported **incidents of rape** while collecting firewood as well as the risk of abduction. Safe access to fuel and energy remains a major concern for IDPs particularly women. During the reporting period, the case of rape represented 4% of SGBV reported incidents. There have also been rape incidents reported inside the IDP camps occurring in incomplete shelters, under trees, around latrine areas, and during the night. There is a lack of enforcement by the civil authorities as perpetrators continue to shrive with impunity.

SGBV prevention, risk mitigation and multisectoral response are still challenged by the absence of specialized gender-based service providers in some LGAs including the absence of the judiciary that hinders access to justice for SGBV survivors.

It is important to note that the current analysis of the SGBV trend in Borno State may not bear a conclusive picture of the overall situation as the onset of the COVID-19 outbreak and subsequent lockdown has limited access to affected populations and information; increasing the number of under-reported incidents.

### X. PERSONS WITH SPECIFIC NEEDS

The vulnerability screening exercise conducted in March and April in 10 LGAs (Bama, Dikwa, Kala/Balge, Mobbar, Gwoza, Maiduguri, Ngala, Konduga, Damboa and Damaturu) reached 17,038 individuals. Some **2,681 individuals** representing **16%** of the screened population were identified with specific needs. The below categories have been identified.



49 % female-headed household, 47% lactating and 14% pregnant



Children with specific needs - See child protection and SGBV sections



**54%** elderly-headed household and **38%** vulnerable elderly unable to care for themselves.



29% chronic illness and 21% persons with physical disability

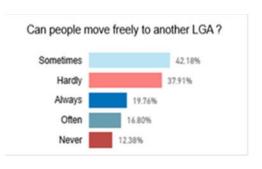
Identified cases were referred mostly to health service providers for medical support (56%), for SGBV services (14%), food (6%), family reunification and shelter support (5%). The high number of women headed-household suggests that programmes enabling women empowerment and SGBV mitigating activities are implemented and wherever possible, scaled-up. While elderly and chronically sick are confronted with limited access to specialized services due to the absence of service providers, services for persons living with the mental



disability exists but mainly target adults. These are critical gaps that need to be filled, as the elderly are at heightened risk of COVID-19 and disabled are most likely to face challenges with regard to access to health services especially in locations where health services are not covered. Pre-existing stigma and non-inclusion of the people living with disabilities in the decision-making process remain a challenge that UNHCR and partners are working to reverse positively through promoting their engagement in decision-making processes and skills training. Overall, the prioritization of persons with specific needs in service delivery remains a challenge.

#### XI. FREEDOM OF MOVEMENT

Ensuring freedom of movement enables the enjoyment of a full range of other civil and political rights as well as socio-economic and cultural rights. In the northeast context, freedom of movement is essential to access safety and security; enjoy family reunification; access employment and other means of livelihood; access cooking fuel for domestic use; access services not available in the camp/LGA/ and country, and to access durable solutions mainly return or voluntary repatriation among others.



Monitoring of freedom of movement during the reporting period has shown that compared to previous months (January to March 2020) **freedom of movement out of camps** in the same LGA in average has deteriorated since the outbreak of the COVID-19 and particularly in April, with the first case confirmed in Borno State. The measures rapidly put in place by the state government to prevent and respond to the pandemic including the lockdown, have resulted in the restriction of movements out of the camps, hindering IDPs in camps access to means of livelihood, cooking fuel, water and other basic services not available in camps. Furthermore, **freedom of movement from one LGA** to another has been seriously compromised by COVID-19 restrictions, leaving IDPs, returnees and others in need to travel for vital reasons without alternative measures.

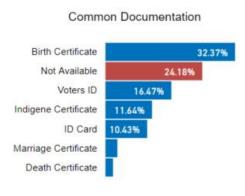
Whether out of the camp, to other LGAs, States or neighbouring countries, border closure and complete lockdown have added to the hardships attributed to the pre-existing factors such as insecurity, lack of documentation, landmines or UXO to further aggravate the already dire socioeconomic gaps created by the crisis and reported in Borno State, particular MMC between January and February 2020. Vulnerabilities and dependency on humanitarian assistance are susceptible to further deterioration if the lockdown persists.

While restrictions on freedom of movement are justified by the imperative of public health, concerted efforts at all levels must be taken to ensure such restrictions remain consistent with the obligations contained in the International Covenant on Civil and Political Rights (ICCPR) 19 Article 12(3).

## XII. ACCESS TO LEGAL DOCUMENTATION

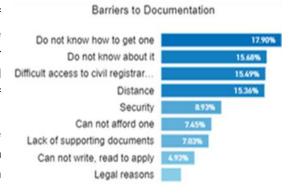
Access to legal documentation and civil status documentation remain a challenge in the BAY states, particularly in Borno State as indicated by **24%** of informants.

In addition to IDPs, refugee returnees from neighboring countries, since January 2020, have particularly mentioned the lack of documentation, necessary to ensure access to services and to enhance the protection of their children. Persons with specific needs are also affected as reported **by 65% of the 2,681** vulnerable screened during the reporting period.



Pre-existing obstacles to birth registration and acquisition of national identity documents have been exacerbated by the ongoing crisis compelling populations to flee leaving behind or losing personal documents. Furthermore, the absence of civil administration in the LGAs pose a challenge in terms of accessibility especially for the physically disabled.

Similarly, the lockdown imposed as a measure to curb the COVID-19 pandemic have resulted in the closing or scale-down of services in MMC, including those in charge of birth registration and documentation (NPC) and issuance of identity card-NIMC,



aggravating the already existing gaps. With regard to birth registration, despite the wide range of programmes to ensure that children enjoy their rights, little focus seems to be put on guaranteeing right of the child to be registered at birth.

There is the need to create conducive environment to enable access to legal and civil status documents to prevent human rights violations emanating from existing gaps such as the risk of statelessness and lack of access to basic social services including education, employment, access to financial institutions and other cash based services; the restriction of freedom of movement and risks of arbitrary arrest and detention. Solution-oriented actions aiming at strengthening the capacity of responsible Government entities (NPC and NIMC) for more sustainability in ensuring that no IDP, returnee and other affected population are left behind in the pursue of the sustainable Development Goals 16.9.

## XIII. HOUSING LAND AND PROPERTY (HLP)

Housing, Land and Property (HLP) issues have impacted the lives of IDPs and other affected populations who have been uprooted from their housing and lands and have seen most of their properties lost or destroyed as a result of the insurgent crisis.

Among prevalent HLP issues recorded from key informants, 20% of them reported theft/fraud of property records; 16 % secondary occupation, and 16% the lack of ownership documents. In addition, destruction of houses/property and destruction of crops were reported by 12.5% and 9.81% of respondents respectively while 7.5% indicated forced evictions and 5.9% land disputes as reasons behind separation from their property.

Findings of return intention surveys conducted in January and March 2020 in MMC Borno State revealed that the destruction of houses, land occupation and secondary occupation in areas of origin were among the major obstacles hindering IDPs return to their areas of origin. At the end of April, **86% of 27,508** refugee returnees from Cameroon, Niger, and Chad mentioned the destruction of houses in areas of origin and subsequently the need for shelter as part of their three priority needs.

In Damasak particularly, women have been swindled off by land grabbers who ended up to multiple sales of the same land. Issues of property inheritance involving widows and children have also been reported. These cases have been referred to the Nigerian Bar Association implementing the Access to Justice Programme for legal representation before the court. A total of 03 **HLP** cases referred are pending at Bakassi and Gubio Road camp mobile courts in Borno State. The follow-up of these cases is hindered by the suspension of court sittings as a measure to contain the COVID-19.

## XIV. COVID-19 PREVENTION AND RESPONSE



UNHCR in collaboration with its partners is implementing programmes in adherence to the WHO directives such as avoiding crowds, social distancing, hand washing among others, and ensuring that IDP, returnees and other affected populations are included in the local and state COVID-19 prevention and response plans and strategies.

The main axis of intervention includes border monitoring with the deployment of 8 monitors at four (4) entry points in Damasak, Banki, Ngala, and Pulka, to monitor population movements and protection related concerns in the context of COVID-19, and to identified protection concerns including COVID-19 related. This will inform UNHCR advocacy to relevant authorities as well as to other stakeholders for the reinforcement of preventive measures at the borders and ensure that PoCs enjoy access to the territory, the right to seek asylum and the right to return. Awareness-raising campaigns on COVID-19 pandemic and preventive measures conducted at entry points are continuously increasing awareness on the pandemic and preventing risks of stigmatization of the population arriving in communities.

To reinforce its advocacy COVID-19 surveillance at Point of entry has been supported with the deployment of **6 nurses in Damasak, Banki and Ngala (two at each entry points)** to collect recommended WHO health related data on a daily basis and conduct temperature screening. Since the first week of April, health-related information is shared daily with the relevant health platforms. The construction of isolation centers in Banki and Damasak and Ngala is ongoing to reinforce the existing preventive and control mechanisms.

UNHCR and partners, in collaboration with other stakeholders are also supporting Local government-led COVID-19 Task Force initiatives and activities to prevent and respond to the pandemic.

As a tangible impact, communities developed protective measures such as the decreasing number of persons gathering at the community square (majalisa) and the change in the greeting style. The use of masks by those who can afford is also visible. On another hand, some livelihood programmes in tailoring skills such as UNHCR/AUN programme in Bama and Gwoza are producing locally made facial masks to make them available and accessible to IDPs at an affordable cost.

However, skepticism about COVID-19 pandemic, high-risk behaviors, and counter-productive messages including the practice of giving hot water and onions to children as a preventive measure to COVID-19 have been observed, suggesting more efforts to counter these practices.

#### XV. COORDINATION

In its capacity as the Protection Sector lead, UNHCR continued to coordinate protection meetings at State and LGAs levels to ensure the Centrality of Protection and effective mainstreaming of protection in all protection intervention/activities conducted.

Meetings were held online through virtual, modality such as WebEx, Zoom and teleconference with exceptionally face to face with observance to social distancing and avoidance of crowds among other directives by WHO. At the deep field holding a Protection Sector Working Group (PSWG) meetings was challenging during the reporting period, due to the lack of or interruption of internet connectivity. UNHCR and other stakeholders are working to resume local PSWG meetings online.

Other meeting attended included CIMCOORD meetings at local and state levels, GBV related meetings such as GBV sub-sector, GBV IMS and PSEA network meetings.

Finally, cross-border meetings (online) with UNHCR offices in Niger, Cameroon and the LCB cross-border call took place for information sharing, identification of common concerns in a view to identify common solutions. The question of the harmonization of monitoring systems was also discussed as a necessity due to cross-border implications of the insurgency. Below are the coordination meetings held during the reporting period.



## XVI. XVI. GLOBAL CHALLENGES AND RECOMMENDATIONS

	Challenges	Recommendations	Affected areas	Responsible	Priority
		General recommendations		stakeholders	
1	Insecurity due to continuous attacks and military operations	Advocacy to CIM-COORD at all levels for the improvement of the overall security environment	All locations	PSNE CIMCOORD	High
2	Absence of civil authorities and the Judiciary to mitigate against right violations in displacement areas and areas of return	Advocacy to the State Government for the return of civilian authorities, return of rule of law and the Judicial system	All Local Government Areas (LGAs) in Borno	PSNE OHCT	High
3	Camp and reception centers congestion of IDP camps	Operationalize the decongestion strategy Prioritizing the most vulnerable	Bama, Banki, Gamboru-Ngala, Gwoza- Pulka, MMC and Munguno	SEMA/NEMA CCCM/Shelte r/NFIs Sector PSNE	High
COVID-19 specific					
4	Access to the territory - right to seek asylum and the right to return challenged by border closure	Advocacy to State government for an enhanced access to the territory subject to implementation of COVID-19 preventive measures at entry points	Banki, Ngala, Pulka and Damassak entry points	PSNE OHCT	High
5	Lack of isolation/Holding centres at entry points and IDPs camps	Build Isolation centres for suspected cases in IDP camps to reduce spread in case of infection.	IDP camps at entry points as a minimum	Health Sector CCCM/Shelte r/NFIs	Urgent
6	Lockdown and impact of humanitarian actors presence and scale down of humanitarian assistance	Advocacy for the provision of more passes to humanitarian actors. Scale-up humanitarian assistance in camps.	All locations and most particularly in lockdown affected locations (MMC, Jere, Konduga, Pulka and Gwoza).	PSNE OHCT Military and other security actors	Urgent
7	Insufficient knowledge, sensitization and awareness of the dreaded virus COVID-19 to the affected population in Jere LGA	More sensitization materials e.g. posters, handbills, awareness, teaching aids, training materials to be made available.	Jere LGA IDP Camps	NEMA/SEMA PSNE Health sector	Urgent
8	No or limited access to health care in the LGAs/camps as a result of the scale- down of activities due to the lockdown.	Improve access to the health system especially during COVID 19 prevention and response	Jere, Bama and Banki IDP camps	SEMA/NEMA Health Sector	Urgent
9	Limited or no access of alternative cooking energy	Advocacy for multisectoral efforts to cover the needs in alternative cooking energy source	All locations Dikwa, Banki and Gwoza	SEMA/ NEMA PSNE ISWG	High
10	The Child protection Act is not enacted	Advocacy for the enactment the CP bill	Borno State	PSNE CP-SS	High

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