

## Malnutrition among Internally Displaced Persons Children: A Consequence of Armed Conflicts in Nigeria

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### Abstract

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Armed conflict are occurrences that humanity across the world and over time have had to contend with as a result of man's activities, actions, and choices. This has led to migration and displacements in many parts of the world. Although disasters and insurgencies are no respecter of persons, yet women and children are the most vulnerable group affected. Victims of displacement are faced with a shortage of basic amenities such as essential food materials and nutrients, clothing, shelter, poor sanitation, poor hygiene among other necessities. This study, therefore, discusses malnutrition in internally displaced person camps in Nigeria, as one of the consequences of armed conflict on children. This study focuses on children (0-17 years). A case-study method and unstructured in-depth interview is used to gather information for the study. Malnutrition on the other hand is caused by inaccessibility of children to have access to quality diet and micronutrients supplements. The findings showed that children in IDP camps in Adamawa, Borno, Yobe States are mostly affected by malnutrition. The study concludes that the root causes of displacement and malnutrition has to be addressed so as to prevent further humanitarian crisis both in the three North-East-States (Borno, Adamawa and Yobe) of Nigeria and the world at large.

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### Introduction

The world has had to content with the menace of insurgencies as seen in the cases of Hezbollah in Lebanon, Taliban in Pakistan, the Syrian Islamic Liberation in Syria as well as the Al-Qaeda in Afghanistan to mention a few. Africa has had and is still having her fair share of insurgencies that has severely ravaged the continent since many of its states gained independence. The National Movement of Azawad (MNL), Al-shabaab in Somalia, the Lord's Resistance Army in Central African Republic, the M23 Rebels in Democratic Republic of Congo, the Al-Qaeda in the Islamic Maghreb (AQIM) in Mali are some of the armed groups that over the time have threatened the security and general development of the region. The activities of these group have wrecked unimaginable havoc on the people, causing a rise in humanitarian crisis in form of displacement of people, refugee incursion into neighboring countries, spread of disease, gender and sexual based violence as well as food insecurity within the continent and the world at large. (Hughes, 2012).

Armed conflict is a menace and a phenomenon that cannot be ignored. The prevalence of armed conflict in the world has resulted into movement of people from areas of danger to an environment where they feel secured, thereby making them either to become internally displaced person (IDPs) or refugees (ICRC, 2009). Thousands of children die and are displaced annually as a result of armed conflict. Causes of the death of children could range from bullet wounds, bombs, and landmines injuries, inability to gain access to medical facilities as a result of diseases, insufficient food supply leading to malnutrition, and sometimes knife wounds. Armed conflict also affects all aspects of a child's growth and development (physical, mental, emotional, and psychological).

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The inability to get sufficient food supplies which is borne out of destruction of agricultural activities, the separation of families, the disintegration of communities, displacement of the people, as well as a lack of access to good health services, clean water coupled with clean and hygienic environment as a result of armed conflict are all factors that have expedited the increase in the rate of malnutrition among children who are victims of armed conflict (UN, 1996).

Other hazards that children are exposed to due to the aforementioned are diseases such as cholera, tuberculosis, malaria, pneumonia and diarrhea amongst others. During armed conflict, pediatric and health services in general are often unavailable. The former has also separated families, splinter groups/communities, broken down trust among people and disrupted educational services all of which has undermined the foundation of the child's life (UNICEF, 2016).

In her recent history, Nigeria has had to deal with armed conflict. The first was the militant attack in Niger Delta region, the activities of the militant group such as Niger Delta Vigilante, Joint Revolutionary Council, and the Niger Delta People Volunteer Force as well as the Movement for the Emancipation for the Niger Delta. The activities of these various militants groups impacted on the social and economic wellbeing of the Nation. Just when the Nigerian government appeared to have resolved the militant crisis in Niger Delta, the Boko Haram insurgency or Jama'atu Ahlis-Sunnah Lidda'awati Wal Jihad ("People Committed to the Propagation of the Prophet's Teachings and Jihad") to give it its real name, (Montclos, Marc-Antoine Pérouse de n.d.) surfaced on the Nigerian soil. With the terrorist group emerging, the Nigerian state started experiencing a new series of armed conflict due to the activities of Boko Haram, an Islamic terrorist organization that has its roots in North-East Nigeria and the farmers-herders crisis (Olusegun and Ogunfolu 2019). Amnesty International (2019) reported that the situation in North-East Nigeria became a non-international armed conflict as of May 2013, due to several "factors including the level of intensity of hostilities and the fact that Boko Haram is a well-organized force which controls territory and has a clear command structure." Likewise, in the Middle Belt region, competition between pastoralists and farmers has caused tensions, culminating in significant levels of fear, violence and displacement. Conflict also emerged in several states in the North-West, linked to banditry and criminal violence.

The quandry of IDPs is an urgent matter that needs to be addressed in Nigeria, as the increase in violence and armed conflict has inevitably caused the displacement of thousands of people in Nigeria. The Internal Displaced Monitoring Center (2019) revealed that in the first half of 2019, about 142,000 new displacements were recorded, 140,000 by conflict and 2,000 by disasters. From the above, one could safely establish a nexus between the increased rate of IPDs and the armed conflict in Nigeria. Women and children are usually more affected by such conflicts as women are forced to flee their homes and left to fend for themselves, while the men flee and search for greener pastures (Adebayo Tosin, 2018). A study conducted by UNICEF revealed that as a result of recent spates of attacks by the Boko Haram insurgents, half a million children have had to flee to safety in the past five months, bringing the total number of displaced children in the region to 1.4 million, United Nations Children's Fund (UNICEF). UNICEF furthered that each of these children running for their lives is a childhood cut short," said Manuel Fontaine, UNICEF Regional Director for West and Central Africa, in a statement (United Nations, 2019). Unfortunately, with the rising number of IDPs in Nigeria, little attention has been paid towards providing the displaced with adequate and convenient safe havens in the waves of attacks. Even those who have access to IDPs camps are living in dehumanizing conditions, and many are struck with poverty, and malnutrition. The IDPs constitute the most vulnerable population of the Nigerian citizenry. To buttress this, Olanrewaju and Olanrewaju (2019) opined that they are marginalized, disadvantaged, and disenfranchised from mainstream society. As such, internal displacement is obviously a human condition that portrays vulnerability and the inability of victims to ensure their self-provision of needs and protection at least during the period of displacement. Olanrewaju and Olanrewaju further opined that IDPs are exposed to illness, injury, emotional distress, dependency and loss of capacity for economic independence, as well as loss of livelihood.

Internal displacement has been a frequent occurrence in societies experiencing civil strife and armed conflicts. Internal displacement may occur as a result of natural disasters such as flood, earthquakes, tsunamis and tornadoes; economic hardship, human rights abuse, maladministration and unstable government policies and practices (Ferris, 2008). Other causes could include natural resources, armed conflict or situation of violence, poverty, effect of climate change, scarcity of resources, political instability and weak governance and social systems. Kellengberge (2009).

According to ECHO-Factsheets (2015), and the Internally Displacement Monitoring Centre (IDMC) 2015, there are over 38.2 million IDPs in the world. According to Machel (2009), 1 billion children under the age of 18 live in countries affected by armed conflict while an estimated 300 million children are under the age of five (5). Furthermore, 18.1 million children as at 2006 are victims living with the effect of displacement with a record showing 5.8 million Refugee children and 8.8 IDP children. UNHCR Global Trend (2014) and IDMC Global overview report (2015), show that most of the IDPs are children, women and elderly people.

Almost sixty million people are forcibly displaced worldwide, of which 38.2 percent of them are IDPs. In Africa, an estimated 12 million people (almost half of the world's IDP population) are internally displaced because of protracted armed conflicts, massive human rights violations and natural disasters.

Nigeria, a country situated in the Western part of Africa has been faced with armed conflicts, natural disasters, communal clashes, post electoral violence, religious and ethnic violence and terrorist activities that have engulfed the Nigerian State and hampered the nation's growth. The North-Eastern part of Nigeria has been home to the terrorist group called the Jama'atu Ahlis Sunna Lidda'awati wal-jihad commonly known as the Boko Haram since 2011 (UNHCR, 2015). There are some other militant groups in Nigeria which derive their support based on ethnic affinity. They include the Movement for the Emancipation of the Niger Delta, and the Movement for the Actualization of the Sovereign States of Biafra. These groups in their bid to communicating their needs to the Nigerian government has unleashed terror on the nation most especially in the regions where they are situated (North-East, South-South, and Eastern regions) in Nigeria, thereby leading to mass exodus of people from their original place of origin and abode to a place where they can be better secured, have some level of comfort, refuge, and succor thereby disrupting their live and means of livelihood (Golwa, 2013). The IDPs upon their movement from their original place of abode have had to contend with living in camps, transitional centers and collective centers with its attendant challenges. These group of people faces risk such as discrimination, and sexual and gender-based violence. In Yobe State Nigeria for example, IDPs were displaced because of insurgency and most of them are from Borno state. The UNHCR report indicates that majority of the IDPs in Taraba and Bauchi States were displaced because of communal clashes. The latter in the case of Bauchi State is as a result of the high percentage of people displaced in the Middle Belt region that have migrated to Bauchi State as a result of communal clashes (UNHCR, 2018).

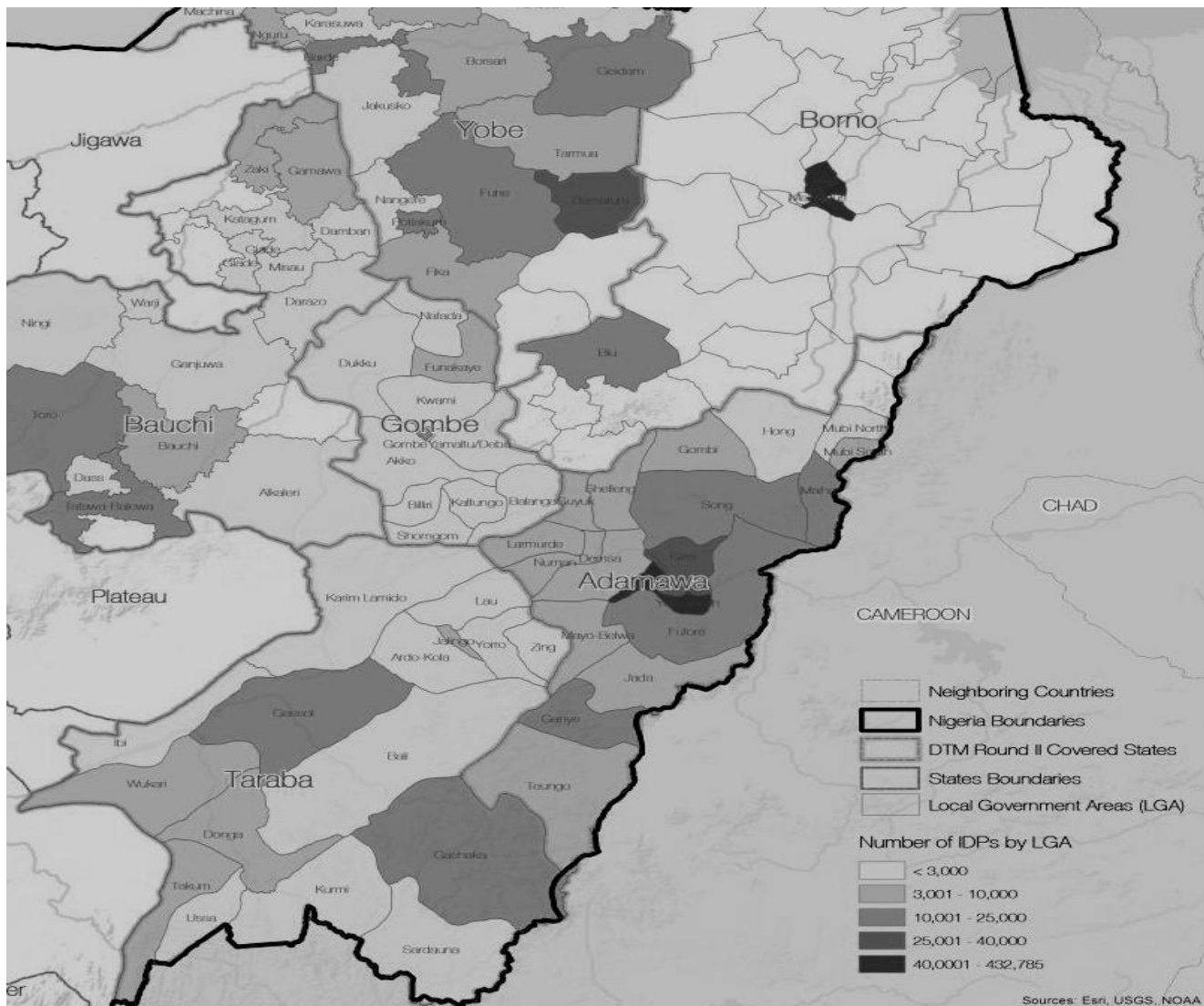
This paper therefore highlights challenges confronting children in IDP camps. It specifically discusses the consequence of armed conflict on children who are part of the internally displaced person's population in the northeast states (Adamawa, Borno, and Yobe) of Nigeria by exploring malnutrition as one of the key consequences of armed conflict on internally displaced children in Nigeria's northeast IDP camps.

## **Methodology**

This study adopted several methodologies including qualitative methods which include: Case-study method and unstructured in-depth interview. The case-study method was used to select the location, and the group of IDPs to be studied. The study selected three (3) northeast states of Nigeria namely: Borno, Adamawa and Yobe. The study also focused on children (0-17 years). Malnutrition is identified as a key effect of armed conflict on children and it also forms the thematic scope of the paper. This is because these states were badly hit by the insurgency, and they have the highest number of IDPs population badly affected by malnutrition. The period under study is between 2014 to 2018. Secondary information is derived from published and unpublished materials, newspapers, magazines, journals, documents from international agencies, non-governmental agencies (NGOs), government agencies working on IDPs and malnutrition in the three northeast States under appraisal and the internet. A visit was paid to some IDPs camps where there were interactions between children and the families of those affected.

## **Statistics showing IDP Population in North East Nigeria**

Alobo and Obaji (2016) indicate that 87% of IDPs in the North-East Nigeria are discovered to be living and cohabiting with relatives and friends staying in a relatively safe environment with the remaining 13% living in camps or camp-like settings. On the other hand, 12% of the IDP population in Adamawa and 18% of IDPs in Borno live in camps or camp-like setting with a total of 43 displacement sites been identified in Adamawa, Borno and Taraba States, and a total of 154,008 individuals within 19,348 households residing in those camps. Further study showed that females constitutes 62% of the IDP population while 38% of the population is male. Children under the age of 17 also constitute half of the total number of individuals residing in sites while 3.33% are single headed-households, 2.26% are breastfeeding mothers, 1.22% are pregnant women while 1.61% of the IDPs have been identified as unaccompanied and separated children.



**Figure. 1 Map of Nigeria Showing IDP Camps (Source: Esri, USGS, NOAA)**

The IDPs population is composed of 53% women and 47 % men. 56% of the total IDPs are children between ages 0 and 5 years, while the remaining 42% are adults. The DTM report also show that 92% of IDPs were displaced by insurgency and they come mainly from Borno, Adamawa, and Yobe States. The Borno State IDPs comprise of 62% of the total IDP population while Adamawa and Yobe States constitute 18% and 13% respectively. Based on another assessment conducted from November to December 2015 by the International Organization for Migration (IOM) and Displacement Tracking Matrix (DTM) team in 207 Local Government Areas (LGA) covering 13 States of Northern Nigeria: Abuja has 13,481 IDPs, Adamawa State has 136,010 IDPs, Bauchi State has 70,078 IDPs, Benue 85,393, Borno 1,434,149, Gombe 25,332, Kaduna 36,976, Kano 9,331, Nassarawa 37,553, Plateau 77,317, Taraba 50,227, Yobe 131,203, and Zamfara 44,929 (IOM/NEMA). Of the total figure of IDPs, the assessment indicates that 12.6% were displaced due to communal clashes, 2.4% by natural disaster and 85% as a result of insurgent attacks by the Islamic extremist. The decrease in the percentage of IDPs who are displaced by insurgency from 95.3% in August to 85% in December 2015 and the increase in the number of displaced persons by communal clashes from 4.6% to 10.1% in October was due to the inclusion of five additional States witnessing communal violence aside from insurgency by the Islamic extremist. Also, UNICEF (2018) reports that an estimated 1.76 million people are internally displaced in the three north east States of Adamawa, Borno and Yobe with Borno State having the highest number of IDPs.

**Chart 1: Affected Population in North-East Nigeria (IOM, April 2015)**

	<b>Total</b>	<b>Male</b>	<b>Female</b>
Total affected population	1,301,763	624,846	676,917
Children affected (Under 18)	743,173	356,162	387,014
Children 1 to 5 (approx.)	262,956	126,141	136,815
Children <1	111,171	52,201	58,970
Children <5 SAM Caseload (est.)	75,855	38,688	37,171

Source: Nigeria Humanitarian Situation Report (1 July 2015)

**Chart 2: Estimated Displacement Population because of Conflict (IOM Displacement Tracking Matrix Round 1X, April 2016)**

	<b>Total</b>	<b>Male</b>	<b>Female</b>
Total Displaced Population	1,739,766	822,213	917,553
Children (Under 18 years)	938,778	441,901	496,877
Children (Under 5 years)	450,947	207,728	243,219
Adults (18 years - 25 years)	680,596	316,637	363,959
Adults (60 years and above)	120,392	63,675	56,716

Source: Nigeria Humanitarian Situation Report (April/May 2016)

### **Challenges Confronting Children in Nigeria's IDP Camps**

This study revealed that, children who have become IDPs in Nigeria and live in camps and are faced with numerous challenges which includes the following:

1. Lack of access to basic amenities which in turn exposes the children to various forms of abuse, forceful enlistment of children by insurgents as child soldiers, suicide bombing and sex slavery.
2. Discontinuation in the learning and education of children. Research showed that children are being disadvantaged in education because of the destruction of schools as well as the several kidnaps and killings of students and teachers.
3. Abuse of the fundamental human rights of children which has in turn caused the killings of people and triggered great health issues.
4. Inadequate amenities needed for their survival. Report by NEMA shows that there are over 750 unaccompanied and separated children in IDP camps.
5. Insufficient and inadequate accommodation which in most cases do not stand the test of time and weather. Many existing shelters have been damaged or destroyed as a result of conflict. This has resulted in IDPs living in churches, mosques, town halls, abandoned and incomplete buildings, as well as other forms of makeshift camps which are inappropriate for accommodating the large influx of the displaced populations.
6. Insufficient intake of necessary nutrients, limited access to food and irregularity in the distribution of foods and nutrients needed for the growth and development of a child in IDP camps has caused a high rate of malnutrition in Nigerian IDP camps among children.
7. Inappropriate waste management and irregular electricity. This explains the frequent occurrence of hygiene-based epidemics in camps.
8. Paltry access to medical health care has surged an increase in the outbreak of diseases and deaths among children in IDPs. There is also the case of a lack of access to vaccinations. The number of cholera cases among IDPs, for example, is on the increase. Some ailments are undiagnosed as there is no health checks carried out in these camps.

### **Discourse on Child Malnutrition in IDP Camps in (Borno, Adamawa And Yobe States) Nigeria**

Malnutrition is one of the many impacts of armed conflict on children across the world. According to Blössner and Oni (2005), malnutrition has been defined as a deficiency of nutrients. Malnutrition is further defined as deficiencies, excesses or imbalances in a person's intake of energy or nutrients. It includes undernutrition which may be in form of wasting (low weight-for-height), stunting (low height-for-age) and underweight (low-weight-for-age) because of insufficient vitamins and minerals, or overweight which may be in form of obesity and diet-related noncommunicable diseases. Malnutrition can also be in form of a condition whereby insufficient micronutrients which results in micronutrient deficiencies such as lack of important vitamins and minerals or excessive micronutrients. Malnutrition could also be a condition of overweight which could lead to health complications such as obesity, heart diseases, stroke, diabetes and some types of cancer.

Insufficient nutrient rich foods, poor feeding practices such as inadequate breastfeeding for babies, erroneous food intake, and inability of a child to get enough nutritious foods are some of the causes of malnutrition (WHO, 2018). Malnutrition affect people of all ages across the world. Children of all ages are not spared of the malnutrition and its attendant consequences. Blössner and Onis (2005) described malnutrition as a cause of child mortality amongst children most especially between 0-5 years. In 2001, estimates of 10.8 million children are malnourished in developing countries and poor diet or severe and repeated infection has been accrued to be factors responsible for the malnutrition. Furthermore, across the world, 1.9 billion people are overweight, while 462 million persons are underweight. An estimated 41 million children under the age of 5 are either overweight or obese while an estimated 159 million and 50 million children have stunted growth or are perceived as wasted respectively (WHO, 2016). In Africa, there was a rise in the number of malnourished children in 1999-2000 from 2.6 million children to 32 million. This figure depicts that 25 percent of children under the age of 5 years in Africa are underweight and malnourished during that period. Political instability, underdevelopment, lack of education, high level of infections and diseases, as well as armed conflicts have been accrued as factors that are responsible for the high rate of malnutrition especially among children (WHO, 2004).

In Nigeria, malnutrition has become a common occurrence, and most especially in the Nigerian IDP camps. This is because of insufficient intake of necessary nutrients, limited access to food and irregularity in the distribution of foods and nutrients to IDPs. Children are the most affected population confronted with malnutrition in the Nigerian IDPs camps. Child malnutrition in IDPs camps has caused multiple strings of challenges and they included diseases, deformities, stunted growth and infections with its attendant problems and in severe cases death. Children have been the most affected malnourished IDP population.

#### **Child Malnutrition in IDP (Borno, Adamawa And Yobe States) Camps in Nigeria**

The high prevalence of malnutrition in the Nigeria IDP camps has become a severe issue in the various IDP camps in Nigeria. According to Borno State Emergency Management (2016), an estimated 450 children, aged between one and five years old died of malnutrition in Borno State. The report further shows that about 6,444 severe cases of malnutrition were recorded in IDP camps in Borno State, and an estimated 25,511 children have mild to moderate symptoms of malnutrition. The Nigeria Humanitarian Report (2015) recorded that 20,002 children under the age of five were diagnosed with Severe Acute Malnutrition (SAM) in the States of Adamawa, Borno and Yobe. Infants and young children under the age of 5 years are the most vulnerable group of people that are affected by malnutrition because they require enough nutritional components which are needed for growth and development. The more malnourished a child is, the sicker he is and the higher his risk of contracting diseases and death if not properly treated. Furthermore, in 2015, 98 out of 450 deaths were children's death while 6,444 malnutrition cases were reported. Obina (2016) reported that 30 people die daily in Borno State IDP camp. UNICEF provided treatment to 106,122 children diagnosed with severe acute malnutrition (SAM). Specifically, in Borno State (45,694), Yobe (34,337) and Adamawa State (26,091) children. 50,655 children were screened between January 2015 and May 2015 for malnutrition. Also, an estimate of 20,002 children between January and May 2015 between 0-5 years were admitted into a therapeutic feeding programmes in Adamawa, Borno and Yobe States. 15,281 children were discharged from the program, while a total of 12,294 (81 percent) of the children recovered and were reported cured.

In 2016, UNICEF study showed that 160,000 children suffered from Severe Acute Malnutrition in Borno, Yobe and Adamawa States. UNICEF further estimates that 400,000 children in north east Nigeria will suffer severe acute malnutrition in the same year. UNICEF therefore project that one in every five children without treatment of malnutrition may die of severe acute malnutrition. Similarly, in 2018, an estimated 52 million children under the age of 5 were classified as wasted, 17 million as severely wasted, 155 million as stunted, and 41 million overweight or obese (WHO, 2018). UNICEF (2018), reported that there are an estimated 137,217 children with severe acute malnutrition.

Malnutrition has been attributed to inaccessibility of children to have access to quality diet and micronutrients supplements. In IDP camps, children are exposed to poor feeding practices such as inadequate breastfeeding, offering the wrong food and not ensuring that the child gets adequate nutritious food. The food mostly served in IDP camps are adults in nature thereby denying children access to adequate and appropriate foods. Furthermore, children do not most times have access to the required micro-nutrients, vitamins and minerals required to meet their daily required nutritional intake. This in turn affect the health, growth and the physical development of children. The effect of inadequate nutrition includes stunting, recurring infections, chronic diseases, low immunity, late development and death. Adequate and enough nourishment should be provided for children in IDP camps.

Breastfeeding should be encouraged, and mothers should be properly nourished with the provision of adequate dietary intake for lactating women in order to allow the production of healthy milk for suckling babies.

### Summary and Conclusion

One of the most direct impacts of armed conflict is the disruption of food cultivation, processing, and food supplies. Farmers, who most often are women and older children, become fearful of working on plots of land too far from their homes. This in return reduces the landmass for cultivation, water sources, irrigation systems and drainage systems. Restrictions on movement, therefore limits access to such necessities as seeds, fertilizers and restrains the farmers from taking their produce to the market causing food insecurity. Furthermore, internally displaced persons across the globe and in Nigeria's northeast geopolitical zone experience extreme challenges in the form of lack of access to shelter, food, clothing, threat of death from violence or conflict, forced conscription of children into armed groups, insecurities and basic amenities such as health, nutrition, water, sanitation, hygiene, diseases and even deaths. Also, women and children are always the most vulnerable group in periods of violence and armed conflict. Study has shown that children (male and female) suffer most in a period of conflict and displacement. Malnutrition, on the other hand, can affect human beings at any stage of life. Malnutrition is a common disease among the IDPs, most especially among children. Children (0-17) are mostly affected by malnutrition because of their inability to have sufficient and adequate nutrients needed for growth and development. Malnutrition is an epidemic and as such should be treated as one as it has led to the deaths of countless lives amongst the IDPs and most notably among the children. Thus, with every epidemic, this has the potential of becoming less, and ultimately leading to the deaths of countless lives. Thus, it is therefore imperative, that measures be taken towards tackling the root causes of internal displacement and malnutrition. Policies formulated should aim at the adequate provision of nutrients (micro and macro), and balanced diets for the children in the IDP camps. To achieve this, it is, therefore imperative relevant stakeholders such as government agencies, international non-governmental organizations, UN agencies, and local partners are involved in the formulation and implementation of these policies as children constitute the highest population of IDPs who are affected with malnutrition in the three-north east states under review.

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