



©UNICEF/2025/STFANUS

Mary Patrick plays with her son Salvation, who is making a recovery from malnutrition at a UNICEF-supported healthcare centre in Gombi, Adamawa State, in December 2025.

unicef 
for every child

Humanitarian Action for Children

Nigeria

HIGHLIGHTS

- In 2026, in northeast, northwest and north-central Nigeria, 8.4 million people, including 5 million children, require humanitarian assistance amid persistent conflict, communal violence, displacement, natural hazards, disease outbreaks and malnutrition. With more than 3.7 million people displaced – most of whom are children – protection risks remain high. Despite gains in combating malnutrition in 2025, approximately 3 million children in Nigeria require life-saving treatment for severe wasting in 2026.
- In line with the prioritization of humanitarian responses globally, UNICEF's response in Nigeria targets the most affected children, women and families with multisectoral nutrition, health, WASH, education, social and child protection services in eight prioritized states. Under the humanitarian reset, Nigeria has been identified as a priority country to transition to nationally- led humanitarian responses.¹ UNICEF's response therefore balances life-saving support with resilience, preparedness and anticipatory action, while advancing localization and durable solutions and strengthening state readiness.
- In 2026, UNICEF requires \$210.8 million to assist 4.5 million people, including 2.3 million children, in emergency-prone priority states in Nigeria.

KEY PLANNED TARGETS



2.5 million

children and women
accessing primary health
care



1.3 million

children 0-59 months with
severe wasting admitted for
treatment



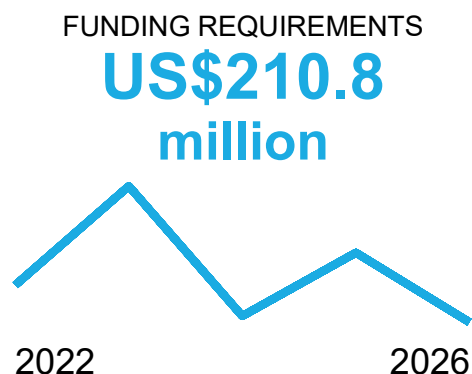
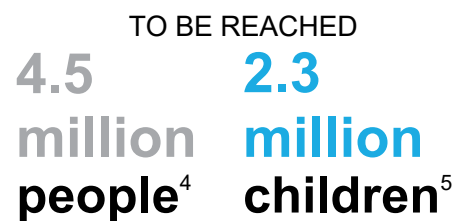
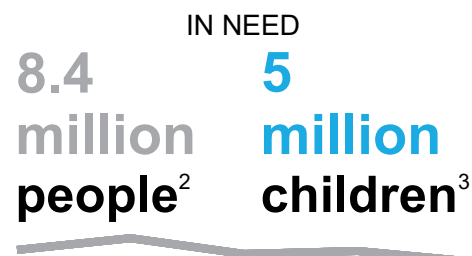
639,747

people accessing a
sufficient quantity and
quality of water



100,000

people reached through
rapid response mechanism



Figures are based on Nigeria's 2026 Humanitarian Needs and Response Plan, the North-West Nigeria Second Operational Response Plan (2025–2026) and the Nigeria Displacement Tracking Matrix NWNC (International Organization for Migration, July 2025).

HUMANITARIAN SITUATION AND NEEDS

The people of Nigeria are facing multiple, overlapping crises driven by conflict, communal violence, environmental shocks and disease outbreaks, with 8.4 million people affected in the northeast, northwest and north-central states.⁶ Needs remain high, while resources continue to decline. More than 3.7 million people remain displaced⁷ (70 per cent women and children), including over 3.4 million people in states prioritized for UNICEF's humanitarian response. Children face heightened gender-based violence, risks of recruitment by armed forces, psychosocial distress, and disrupted learning. More than 10 million children remain out of school, and those that do attend school are at risk of being kidnapped.^{8,9}

More than 11.7 million people are expected to face acute food insecurity (Integrated Food Security Phase Classification, or IPC, phase 3 or higher) during the 2025–2026 lean season, with an estimated 1.7 million in phases 4 and 5.¹⁰ The prevalence of malnutrition is high, with 3million children expected to suffer from severe wasting nationwide.¹¹ Funding cuts and ongoing humanitarian system reforms have reduced the capacity of organizations to provide life-saving assistance within health facilities, limiting access to treatment. This has left millions of people at risk of preventable illness and death.

Ongoing armed conflict in the northeastern states of Borno, Adamawa and Yobe (known as the BAY states) has disrupted the lives and livelihoods of millions of people for more than a decade. More than 5.9 million people require urgent humanitarian assistance due to persistent conflict and insecurity in those states, as well as recurrent floods and disease outbreaks.¹² The BAY states host more than 2.3 million internally displaced persons and 2.2 million returnees living in areas with limited or weak services and persistent insecurity. Up to 65 per cent of those displaced reside in camps or camp-like settings, often in overcrowded conditions with inadequate water, sanitation and health services and frequent open defecation, increasing people's exposure to outbreaks of cholera and other diseases, particularly during the rainy season. Beyond internally displaced persons, vulnerable populations in BAY states remain confined to garrison towns due to armed non-state actor presence in surrounding areas, which has hampered people's access to farmland, livelihoods, basic services and humanitarian assistance.¹³

In northwestern Nigeria, armed banditry and communal violence in Katsina, Kebbi, Sokoto and Zamfara states have disrupted agricultural production, markets and access to basic services and have displaced nearly 1.4 million people, 80 per cent of whom reside in host communities. This has stretched already limited essential services.¹⁴ Attacks on schools, including abductions of teachers and students, cause frequent closures and prevent the consistent education of hundreds of thousands of children.¹⁵ Additionally, flooding in 2025 has damaged homes and farmlands in Kebbi and Sokoto, worsening public health emergencies.

In Benue state, long-standing farmer–herder clashes, communal violence and recurrent flooding have led to the displacement of more than 480,000 people who continue to reside in displacement sites or in host communities.¹⁶

Overall, despite progress in state emergency response capacity, preparedness and early investments in anticipatory action, humanitarian needs remain severe in Nigeria and unevenly addressed, a situation exacerbated by insecurity, chronic underfunding and recurrent environmental and conflict-related shocks.

SECTOR NEEDS¹⁷



7 million
people in need of
health assistance¹⁸



1.8 million
children in need of
nutrition assistance¹⁹



1.8 million
children in need of
access to school²⁰



4.8 million
people lack access to
WASH²¹

STORY FROM THE FIELD



Aisha Abubakar, 30, feeds her two-and-a-half-year-old son, Mohammad, ready-to-use therapeutic food at the UNICEF-supported Ngelzarma Primary Healthcare Centre in Yobe State, November 2025.

After weaning, Aisha Abubakar's son, Mohammad, became ill, requiring referral and hospitalization for two weeks in Damaturu, Yobe State. Aisha was forced to sell her goat to cover costs of treatment. Upon their return home, his condition worsened again and she rushed him to the local clinic, the Ngelzarma Primary Healthcare Centre, where many children faced similar conditions. Mohammad was able to receive treatment close by, with careful and consistent monitoring, eventually regaining his strength and health. In conflict-affected northeast Nigeria, malnutrition remains widespread due to disrupted livelihoods and poor services. With the support of UNICEF and the Government of Canada, the clinic provides life-saving treatment, including ready-to-use therapeutic food, giving children like Mohammad a chance to recover.

HUMANITARIAN STRATEGY

In 2026, UNICEF's humanitarian response in Nigeria is shaped by a constrained funding environment that has required deliberate hyper-prioritization. UNICEF's response focuses on eight priority states,²² where humanitarian needs are most acute and risks to children are highest, and where UNICEF's engagement adds scale, value and impact, including in contexts where government service delivery requires support. The response emphasizes multisectoral programming, operational agility and strengthened access strategies. Other states facing elevated risks of flooding, disease outbreaks and sudden shocks will be addressed through capacity strengthening on emergency preparedness. Geographic prioritization is informed by a joint risk analysis conducted with local and national authorities.²³

UNICEF will secure treatment for severely wasted children living in areas affected by armed conflict, armed violence, natural hazards and recurrent shocks as a core life-saving priority. In high-risk areas with recurrent shocks and serious needs related to malnutrition, children's nutritional status is in danger of further deterioration without sustained, integrated support. UNICEF will prioritize early detection and prevention of malnutrition through multisectoral and integrated programming while delivering life-saving treatment services for children with wasting.

UNICEF will deliver integrated WASH interventions to ensure access to safe water, sanitation and hygiene for crisis-affected children and families, including through expanded and sustained water supply, gender- and disability-sensitive sanitation, hygiene promotion and provision of essential WASH supplies. UNICEF will prioritize interventions in high-risk areas and coordinate with health responses to prevent and control outbreaks of cholera and other diseases.

UNICEF will strengthen child protection and education by supporting psychosocial services in conflict and displacement settings, training teachers, establishing community-based protection committees and reintegrating children associated with armed forces and groups. The response will promote safe, inclusive learning opportunities – particularly for out-of-school children, adolescent girls and children with disabilities – while ensuring continuity of learning where it is disrupted.

Protection from sexual exploitation and abuse, accountability to affected populations and gender- and adolescent-responsive programming will underpin all responses, which will also promote disability inclusion. UNICEF will increasingly strengthen humanitarian–development–peace nexus programming. UNICEF will sharpen preparedness through enhanced early warning mechanisms, investment in anticipatory action, contingency partnerships, supply pre-positioning and community engagement.

In the BAY states, subject to funding availability, UNICEF will continue as provider of last resort in sectors it leads; and, in coordination with intersectoral mechanisms and partners, rapid response mechanisms will deploy to hard-to-reach areas.

As the humanitarian reset advances, UNICEF will work closely with the Government, United Nations agencies and partners to support localization and a carefully sequenced transition towards greater national leadership, ensuring children are not exposed to preventable harm.

2026 PROGRAMME TARGETS



Health (including public health emergencies)

- 2,497,185 children and women accessing primary health care in UNICEF-supported facilities
- 1,315,951 children vaccinated against measles, supplemental dose



Nutrition

- 1,258,500 children 0-59 months with severe wasting admitted for treatment²⁴
- 2,827,000 primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- 934,000 pregnant women receiving micronutrient supplements containing iron
- 1,007,451 children who received Small Quantity Lipid-based Nutrient Supplements (SQ-LNS)



Child protection and GBViE

- 314,385 children, adolescents and caregivers accessing community-based mental health and psychosocial support
- 173,104 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 3,700 children who have exited armed forces and groups provided with protection or reintegration support
- 200 unaccompanied and separated children provided with alternative care and/or reunified
- 348,476 children and caregivers benefiting from information on childcare and child protection including on grave child rights violations
- 4,594 children with disability provided with comprehensive multi-sectoral case management support



Education

- 801,192 children accessing formal or non-formal education, including early learning
- 613,756 children receiving individual learning materials
- 4,984 teachers and facilitators trained in basic pedagogy and/or mental health and psychosocial support
- 17,388 School management committees trained on effective school governance, inclusive education, and child-friendly learning environments



Water, sanitation and hygiene

- 639,747 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 752,784 people accessing appropriate sanitation services
- 167,713 people reached with critical WASH supplies
- 995,004 people reached with hygiene promotion sessions



Social protection

- 40,000 households benefitting from social assistance from government funded programmes with UNICEF technical assistance
- 20,000 households reached with UNICEF-funded humanitarian cash transfers



Rapid Response Mechanism

- 100,000 people reached through rapid response mechanism



Emergency preparedness

- 200,000 people reached through emergency preparedness



Cross-sectoral (AAP, SBC, and PSEA)²⁵

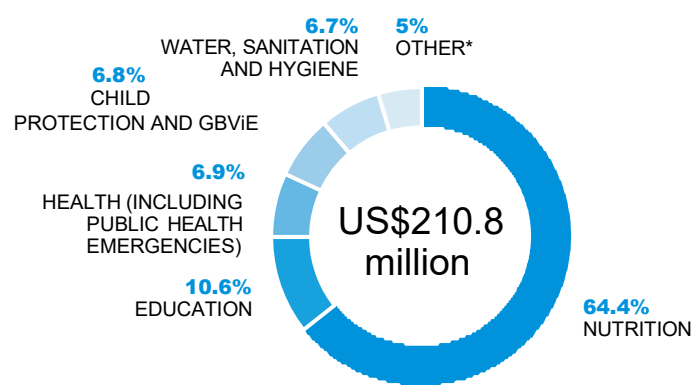
- 2,016,852 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- 284,920 people engaged in reflective dialogue through community platforms
- 149,146 people sharing their concerns and asking questions through established feedback mechanisms

FUNDING REQUIREMENTS IN 2026

UNICEF urgently appeals for \$210.8 million in 2026 to address the humanitarian needs of 4.5 million people, including 2.3 million children, in eight priority states in Nigeria. More than \$124 million (59 per cent) of the total requirement is directed to conflict-affected areas in the BAY states, covering UNICEF's contributions to the 2026 Humanitarian Needs Response Plan. The other \$86 million is for life-saving interventions in northwestern and central states. Malnutrition remains a key driver of humanitarian needs, with the prioritized northern states accounting for two thirds of the wasting burden. The nutrition sector ask is therefore more than \$135 million – 64 per cent of the total funding requirement.

To maximize efficiencies and impact, UNICEF and partners will capitalize on integrated and multisectoral responses including impactful rapid-response mechanisms in hard-to-reach areas in response to outbreaks, displacements and other shocks. This leverages UNICEF's comparative advantage and links life-saving assistance with resilience and system strengthening.

Nigeria continues to face an extremely complex humanitarian situation. Severe funding reductions in 2025 forced difficult prioritization decisions, leaving critical gaps in treatment coverage and placing hundreds of thousands of children at heightened risk. In 2026, sustained humanitarian financing is essential – not as a substitute for government leadership, but as a time-bound accompaniment to maintain life-saving services while supporting a responsible transition. Alongside immediate support, UNICEF will concentrate efforts in fragile, high-risk areas where continued multisectoral engagement is vital to prevent deterioration and safeguard recent programme achievements. Robust humanitarian investment in 2026 is critical to protect children now and to enable a safe, credible transition towards stronger national ownership of the humanitarian response.



*This includes costs from other sectors/interventions : Cross-sectoral (AAP, SBC, and PSEA) (1.6%), Emergency preparedness (1.1%), Social protection (<1%), Rapid Response Mechanism (<1%).

Sector	2026 requirements (US\$) ²⁶
Health (including public health emergencies)	14,600,000
Nutrition	135,700,000 ²⁷
Child protection and GBVIE	14,400,000
Education	22,400,000
Water, sanitation and hygiene	14,100,000
Social protection	2,100,000
Cross-sectoral (AAP, SBC, and PSEA)	3,300,000
Rapid Response Mechanism	1,800,000
Emergency preparedness	2,400,000
Total	210,800,000

Of the \$210.8 million funding requirement, approximately \$124 million is aligned to the 2026 Humanitarian Needs and Response Plan (HNRP), while \$86 million is required for additional UNICEF activities outside the HNRP.

ENDNOTES

1. In March 2025, the United Nations Emergency Relief Coordinator announced the humanitarian reset, responding to sharp global reductions in humanitarian funding. Under the reset, eight countries – including Nigeria – are being encouraged to accelerate transition towards nationally led responses, with tighter severity-based targeting and lower planning ceilings, reinforcing the importance of pairing life-saving assistance with investments in resilience, preparedness and national operational readiness to avoid increased humanitarian risk.
2. The total number of people in need in UNICEF's 2026 Humanitarian Action for Children appeal is estimated at 8.4 million people, of whom 5 million (60 per cent) are children. These needs extend beyond the scope of the 2026 Humanitarian Needs and Response Plan, which focuses exclusively on 5.9 million people in need in priority local government areas in the three conflict-affected northeastern states of Borno, Adamawa and Yobe (the BAY states). The remaining 2.5 million people in need in this Humanitarian Action for Children appeal reside in four northwestern states (Katsina, Kebbi, Sokoto and Zamfara states, where 587,000 internally displaced persons and 1.4 million people in host communities require assistance) and in one north-central state (Benue) where approximately 480,000 internally displaced persons require assistance.
3. Children represent 60 per cent of people in need based on 2026 Humanitarian Needs and Response Plan disaggregation, so 5 million children in need.
4. In 2026, the UNICEF appeal aims to reach a total of 4.5 million people. This includes a total of 2.3 million children: 1.3 million admitted to treatment for severe wasting; 800,000 accessing education services; and 200,000 accessing healthcare. In addition, 2.1 million women, including pregnant women, will access infant and young child feeding counselling and 120,000 men will benefit from hygiene promotion. The target population includes 97 per cent women and children, of whom 3.4 million are women and girls. Of the 4.5 million people to be reached, a total of 2.3 million people will be reached in five states (Benue, Katsina, Kebbi, Sokoto and Zamfara and states) outside the scope of the Humanitarian Needs and Response Plan (which encompasses the three states of Borno, Adamawa and Yobe). The 2.3 million people to be reached in the five non-HNRP states include 980,000 children who will benefit from admission to treatment for severe wasting, access to primary healthcare and access to education, 1.3 million women receiving infant and young child feeding counselling, and 40,000 men benefiting from hygiene promotion. The interventions also emphasize vulnerable groups, including 136,000 elderly people and 454,000 people with disabilities (10 per cent of the total number of people to be reached), including 228,000 children with disabilities. Furthermore, the planned outreach incorporates cross-cutting targets, with 4.4 million women and children to be reached through integrated programming. These figures reflect the appeal's commitment to inclusive, life-saving support, ensuring equitable access to essential services while addressing the needs of the most at-risk populations.
5. UNICEF aims to reach at least 2.3 million children through the 2026 appeal. This includes 1.3 million admitted for treatment for severe wasting; 800,000 accessing education services; and 200,000 accessing healthcare. In line with inclusive programming, the response specifically targets 228,000 children with disabilities, ensuring tailored and equitable access to essential services. Outside the scope of the 2026 Humanitarian Needs and Response Plan, in five states (Benue, Katsina, Kebbi, Sokoto and Zamfara), a total of 980,000 children will be reached with treatment for severe wasting and access to health and education services.
6. Figures are based on Nigeria's 2026 Humanitarian Needs and Response Plan, the North-West Nigeria Second Operational Response Plan (2025–2026) and the Nigeria Displacement Tracking Matrix NWNC (International Organization for Migration, July 2025) <https://reliefweb.int/report/nigeria/nigeria-north-west-and-north-central-displacement-report-round-17-july-2025>.
7. Including 2.3 million people identified in the north-east (International Organization for Migration Displacement Tracking Matrix NE Round 51), and 1.4 million in north-west and north-central Nigeria (International Organization for Migration Displacement Tracking Matrix NWNC Round 18).
8. UNICEF, Immediate Action Needed to Protect Nigeria's Children and Schools, press release, Abuja, 9 September 2024, available at www.unicef.org/nigeria/press-releases/immediate-action-needed-protect-nigerias-children-and-schools.
9. UNICEF, Note to Correspondents – Reported abduction of children and teachers from a secondary school in Niger State, Nigeria, news note, Dakar/Abuja, 22 November 2025, available at www.unicef.org/nigeria/press-releases/note-correspondents-reported-abduction-children-and-teachers-secondary-school-niger.
10. Cadre Harmonisé, Nigeria: Results of food and nutrition insecurity (FNI) analysis for current period (March to May, 2025) and projected period (June to August 2025) for twenty-six (26) States and the Federal Capital Territory (FCT) of Nigeria, 7 March 2025, available at <https://fcluster.org/nigeria/document/results-food-and-nutrition-insecurity>.
11. 2026 Humanitarian Needs and Response Plan, SMART survey and Integrated Food Security Phase Classification (IPC) analysis conducted in 2025, presenting estimates for October 2026 through to September 2026.
12. 2026 Humanitarian Needs and Response Plan.
13. IOM Displacement Tracking Matrix, IDP and Returnee Atlas: July 2025 – Mobility tracking, round 50, North-East Nigeria, July 2025.
14. North-West Nigeria Second Operational Response Plan (2025–2026) and the Nigeria Displacement Tracking Matrix NWNC (International Organization for Migration, July 2025).
15. ACAPS, Nigeria: Conflict dynamics and humanitarian implications in North East, North West, and North Central, thematic report, 18 November 2025, available at <https://reliefweb.int/report/nigeria/acaps-thematic-report-nigeria-conflict-dynamics-and-humanitarian-implications-north-east-north-west-and-north-central-18-november-2025>.
16. Nigeria Displacement Tracking Matrix NWNC (International Organization for Migration, July 2025).
17. Sector needs are calculated on the basis of the 2026 Humanitarian Needs and Response Plan for the northeast; North-West Nigeria Second Operational Response Plan (2025–2026); and outcomes of the SMART/IPC analyses as well as numbers and sectoral assessments for internally displaced persons for Benue State in north-central Nigeria.
18. Health sector needs are based on the 2026 Humanitarian Needs and Response Plan 2026 figure of 4 million in need in the northeast, in addition to 3 million in the northwest per the North-West Nigeria Second Operational Response Plan (2025–2026).
19. While the estimated nationwide burden of severe wasting is 3 million children, in line with prioritization efforts we include here the severe wasting burden for priority humanitarian states: Borno, Adamawa and Yobe (the BAY states) and Katsina, Kebbi, Sokoto and Zamfara. Specifically, nutrition sector needs are based on the SMART/Cadre Harmonisé severe wasting burden of 920,000 in northeast states and 925,000 in northwest states.
20. Education sector needs are based on the 2026 Humanitarian Needs and Response Plan (1.6 million children) along with 180,000 children covered in the North-West Nigeria Second Operational Response Plan (2025–2026).
21. WASH sector needs are based on the 2026 Humanitarian Needs and Response Plan (4.4 million people) and North-West Nigeria Second Operational Response Plan (2025–2026) (414,000 people).
22. Note that as in previous years, the 2026 Humanitarian Needs and Response Plan covers only prioritized local government areas in Borno, Adamawa and Yobe (the BAY states). Nigeria's humanitarian needs and response plans outside these areas are captured through the North-West Nigeria Second Operational Response Plan (2025–2026), Cadre Harmonisé and are responded to in coordination with authorities following Displacement Tracking Matrix emergency trackers, surveillance bulletins and other alerts. The eight priority states in the UNICEF Humanitarian Action for Children appeal therefore include Borno, Adamawa and Yobe (the BAY states) as well as Benue, Katsina, Kebbi, Sokoto and Zamfara.
23. Nigeria National Emergency Management agency (NEMA), Nigeria Hazard Risk Countrywide Analysis 2024, available at <https://nema-risk-analysis-report-2024-unicef.hub.arcgis.com>.

24. In 2026, UNICEF aims to address 80 per cent of the burden of severe wasting in priority states, whilst remaining needs will be covered by sector partners and government domestic resources as we move increasingly into the humanitarian reset transition and state leadership in the nutrition response. Furthermore, UNICEF has increased geographic coverage of treatment for severe wasting to accommodate areas with significant nutrition deprivations in high-severity areas affected by violence and high numbers of internally displaced persons, coupled with global acute malnutrition rates above 10 per cent.
25. The indicator for protection from sexual exploitation and abuse represents the total number of women and men targeted by all UNICEF-supported community-based interventions in all programmes.
26. UNICEF funding requirements for 2026 include \$124 million (59 per cent) to address humanitarian needs in Nigeria's northeastern states in line with the 2026 Humanitarian Needs and Response Plan, and \$86 million for life-saving humanitarian interventions in northwestern and central states.
27. Thanks to the generous contribution of donors, UNICEF has mobilized about \$40 million worth of nutrition supplies for emergency response in the eight states covered in this 2026 appeal, including resources carried forward from 2025. This allows UNICEF to reach about 824,000 children (65 per cent of the target) suffering from severe wasting. The overall gap in funding for treatment of severe wasting is therefore \$73.2 million.