



Situation Report

Nigeria: Humanitarian Crisis

1-30 November 2025

Highlights

- Heightened insecurity and service disruption:** Recent escalations in large-scale attacks by non-state armed group (NSAG) continue to threaten civilian safety, leading to new displacements and increasing the risk of gender-based violence (GBV)—including sexual violence—for women and girls. The uptick in insecurity, including IED incidents and illegal checkpoints, has severely undermined humanitarian assistance, resulting in the withdrawal of humanitarian actors and suspension of critical health activities.
- State protection measures:** To address the rising security concerns, northern Governors have committed to mobilising N228 billion (US\$155 million) annually to combat banditry and focus on the protection of women and girls across northern Nigeria.
- Digital literacy and youth empowerment:** In November, 300 young people graduated from the UNFPA-supported transformative Digital Literacy Programme, which empowers vulnerable youth with essential income-generating skills, reducing their susceptibility to exploitation. UNFPA and partners also celebrated the 16 Days of Activism across the BAY States (Borno, Adamawa and Yobe), emphasising digital spaces as a new frontier for GBV. In total, 12,500 individuals—including students, school teachers and other vulnerable community members—took part and provided with key information. 2,500 dignity kits and 1,000 sanitary pads were also distributed to adolescent girls during the events.



7,800,000

Total people affected¹



1,950,000

Women of reproductive age²



347,770

Estimated pregnant women²



375,880

People targeted w/ SRH services



281,000

People targeted w/ GBV programmes

¹ [2025 Humanitarian Need and Response Plan \(HNRP\)](#)

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.

Situation Overview

The protracted crisis in Borno, Adamawa, and Yobe (BAY) States continues to expose women and girls to severe protection and health risks. Fourteen years of conflict, insecurity and displacement have disrupted health services, livelihoods, and access to care, leaving millions — particularly pregnant women, adolescent girls, and survivors of violence — dependent on humanitarian assistance. Climate shocks and disease outbreaks further compound vulnerabilities in a region of an estimated 16 million people.

Areas like Bama, Banki, and Ngala LGA in Borno State in north-east Nigeria are experiencing a severe deterioration in security, marked by large-scale and evolving armed tactics by NSAGs, including the use of drones and simultaneous and predatory attacks. This surge in insecurity has severely restricted humanitarian and commercial movement, leading to service disruptions in protection and camp management.

Women and girls in north-east Nigeria face intensified risks of abduction and prolonged captivity. Following a school kidnapping incident in Niger State in November, the government in Yobe State took the protection measure of temporarily closing boarding schools to safeguard students from similar attacks.

Limited access to maternal and child health services, alongside high fertility rates and early childbirth is resulting in an alarmingly high maternal mortality rate of 1,848 per 100,000 live births. Furthermore, an estimated 245,000 acutely malnourished pregnant or breastfeeding mothers across northern Nigeria are at risk, a danger projected to worsen severely across the BAY states during the upcoming 2026 lean season due to projected malnutrition increases.

In this volatile context, where women and adolescent girls face barriers to accessing life-saving SRH services and GBV support, UNFPA's mandate to ensure safe childbirth, access to reproductive healthcare, and survivor-centred protection services remains critical.



UNFPA Response

Sexual and reproductive health: 10,889 individuals were provided with SRH services, including antenatal care, skilled deliveries, postnatal care, treatment of sexually transmitted infections (STIs), HIV testing and counselling services, as well as treatment of other medical conditions. To address the high maternal mortality rate, 3,282 pregnant women were reached with antenatal care and skilled delivery. UNFPA continued to collaborate with State Ministries of Health and Primary Health Care Development Boards to ensure access to modern contraception.

Gender-based violence: 4,922 women and girls received GBV services across Adamawa, Borno, and Yobe States, including case management, mental health and psychosocial support (MHPSS), referrals to specialized services, security and legal assistance, and temporary shelter support. Additionally, 21,620 individuals were reached with awareness and information dissemination on prevention and response to GBV.

Adolescents and youth: 11,452 young people participated in peacekeeping and environmental protection initiatives, as well as various vocational skills programmes across UNFPA-supported facilities in the BAY States. These programmes, often linked to dedicated GBV facilities, include tailoring, hairdressing, soap making, and basic computer literacy. Furthermore, expanded skills and digital literacy programmes were also adapted to engage a greater number of adolescents, including those not currently enrolled in school. In November, 300 youth graduated from the Digital Literacy Programme, of which 95% started with no prior computer knowledge. These initiatives aim to empower vulnerable youth and survivors of GBV with marketable and income-generating skills, fostering economic independence, accelerating resilience, and reducing their susceptibility to exploitation and abuse.

Results Snapshot



10,889

People reached with SRH services
90% female, 10% male



65

Health facilities supported



4,992

People reached with GBV prevention, mitigation, and response activities
89% female, 11% male



38

Safe spaces for women and girls supported



11,452

Youth received vocational training to support income-generating activities



5

Youth spaces supported by UNFPA

Coordination Mechanisms

Gender-Based Violence:

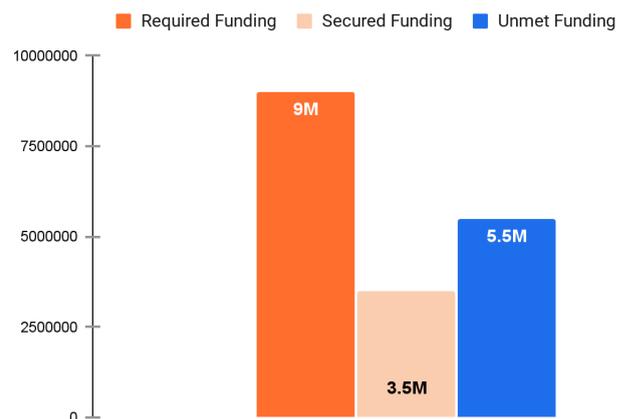
The GBV Area of Responsibility (AoR) sub-sector coordination team supported Benue State to establish a GBV Technical Working Group composed of government agencies, non-governmental and civil society organizations, and other humanitarian actors to coordinate GBV prevention and response efforts in the State. The GBV sub-sector coordination team has supported the planning and coordination of the 16 Days of Activism across Borno, Adamawa, Yobe (BAY) States.

From 24–26 November 2025, the Call to Action (CtA) team, hosted by UNFPA, participated in the Maiduguri Sub-Office 2025 humanitarian programme annual review and the 2026 planning meeting. The team ensured that key lessons learned, strategic achievements, and persistent challenges identified in 2025 were reflected in the prioritization of actions for the 2026 humanitarian response through CtA partners. In addition, the CtA Secretariat published an updated *Roadmap 2022–2025*, incorporating commitments from new partners to the initiative. Five local NGO partners joined the CtA during the year, underscoring the initiative’s continued relevance and strong partner engagement.

Funding Status

In 2025, UNFPA requires US\$15.7 million to deliver critical SRH and GBV services to those most affected by ongoing humanitarian crises in Nigeria. As of November 2025, UNFPA has received US\$3.7 million from the Government of Norway, the Government of Japan, the Government of Canada, the Government of the USA and the UNFPA Emergency Fund (EF).

However, UNFPA still faces a significant funding gap of US\$11.9 (76.2 per cent). This shortfall jeopardises UNFPA’s ability to respond to SRH and GBV needs, and puts the lives of women and girls in Nigeria at risk.



Disclaimer: Funding available is based on cash received during the current year as well as funding rolled over from previous years, and transfers from/to other UNFPA departments. It does not include funds from agreements that have been signed but not yet received.

Current Donors

- UNFPA Emergency Fund
- Government of Canada
- Government of Japan
- Government of Norway
- Government of United States

For more information

Muriel Mafico
Representative
mafico@unfpa.org

Adewole Ajao (Media Enquiries)
Communications Specialist/Officer
ajao@unfpa.org