

SECURITY RISK ASSESSMENT; MIDDLEBELT REGION; NIGER STATE

Prepared for: NCDC / Nigeria CoPREP.



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LIST OF ACRONYMS

| CoPREP | COVID-19 Preparedness and Response Project |
|--------|---|
| FCT | Federal Capital Territory |
| GoN | Government of Nigeria |
| NCDC | Nigeria Center for Disease Control |
| NPF | Nigerian Police Force |
| NPHCDA | National Primary Health Care Development Agency |
| NSCDC | Nigeria Security and Civil Defense Corp |
| PCU | Project Coordinating Unit |
| SMF | Security Management Framework |
| SRA | Security Risk Assessment |
| VAC | Vaccination Approval Criteria |
| WB | World Bank |
| РНС | Primary Health Center |
| GH | General Hospital |
| SF | Security Forces |
| TTP | Tactic Technique and Procedure |
| МО | Modus Operandi |
| OCG | Organized Criminal Group |
| СМТ | Crisis Management Team |
| K & R | Kidnap and Ransom |

EXECUTIVE SUMMARY.

The scope of this Security Risk Assessment (SRA) is specific to Niger, Nigeria. This assessment and report were produced in January 2022. Risk scenarios were identified, and a vulnerability analysis was conducted relative to project personnel activity. A series of mitigation measures were identified for each to reduce personnel risk to as low as practical. The recommended mitigation measures are included in this report and should provide the basis for the Security Management Framework.

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OVERVIEW OF SECURITY SITUATION.

Niger state is in the Middle Belt region of Nigeria. The state's capital is at Minna. Other major cities are Bida, Kontagora and Suleja. Two of Nigeria's major hydroelectric power stations, the Kainji Dam and Shiroro Dam, are in Niger State, and the newly constructed Zungeru Dam is also located there. The Jebba Dam is half Niger state and half Kwara state, sharing boundaries. Niger is Nigeria's largest state with a landmass of 29,484 sq. miles constituting about 10% of Nigeria's land mass (bigger than the southeast region of the Country)

The northern boundary of the state borders some of the most insecure areas of the northwest. Organized criminal groups (OCGs) operating in Kaduna, Zamfara and Kebbi states originally sought to hibernate in Niger state's northern LGAs when security force operations forced them to temporarily vacate their normal areas of operation. However, since 2019 a more permanent presence of OCGs has developed in several LGAs. Statements attributed to the State governor on 18-Jan-20221 suggest that over 300 people were killed and 200 kidnapped in the troubled northern region of the state in January 2022 alone, because the state is under policed. Aside from bandit activities, other threats of aggravated crime, kidnapping and environmental concerns have increasingly impacted the general security situation in the state. Current security force operations are also ongoing in Niger state's western most LGA of Borgu, where IS affiliated OCGs were reported to have established themselves.2

The activities of armed bandits, associated with community invasion, kidnapping and reportedly terrorism, is the most impacting threat in the state. Niger state is currently assessed as MEDIUM to HIGH risk.

TERRORISM.

Due to Niger's large ungoverned space bordering some of the most troubled states in the northwest, as well as its international border with Benin Republic to the west, it provides ideal terrain to harbour the presence of OCGs. Although there has been no recorded terrorist attack in Minna and other locations in the inner part of the state, statements attributed to governor of the state indicate the presence of Boko Haram affiliates at Shiroro general area, who were reported to have hoisted their flag in Kauri village. Additionally, in January 2022 the Federal Government declared that the Yan Bindiga Group, Yan Ta'adda Group and other similar bandit groups were proscribed as terrorists pursuant to sections 1 and 2 of the Terrorism (Prevention) Act, 20113. It is therefore a moot point as to whether the frequent bandit attacks classified under crime should now be declared as terrorism. Certainly, the Governor is making strenuous efforts to gain Federal Government financial and military support by declaring that OCGs are now demonstrating an ideological linkage with the insurgency in the North-East and media's vocabulary appears to support this.

 $^{1\} https://www.channelstv.com/2022/01/18/niger-communities-still-paying-levies-to-bandits-governor-bello-laments/$

² https://leadership.ng/niger-raises-the-alarm-over-iswap-boko-haram-camps-near-kainji/

³ https://www.premiumtimesng.com/news/headlines/504177-just-in-nigerian-govt-gazettes-declaration-of-banditgroups-as-terrorists.html

For the programme, remote communities in the impacted locations remain difficult to access. Necessarily, vaccinators may need to maintain a presence at vaccination points for hours or even days, thereby increasing chances of exposure. The possibility of an attack by a proscribed group, particularly in the north-eastern part of the state, remains possible and the risk rating MEDIUM.

CRIME

Although the crime rate within Minna city is perceived to be low, the same cannot be said for crime rates in the wider metropolis. Crimes such as robbery, theft, fraud, mugging, carjacking, sabotage of sensitive government and private installations, and other violent crimes occur in the city's outskirts. Like most states in the northwest and some parts of north central, bandit activities, usually associated with physical and sexual assault and other associated crimes, also occur in Minna. These acts, perpetrated by armed OCGs who invade settlements and communities, are especially prevalent in the northern part of the State, towards the fringes of the forests that connect Minna to Zamfara, Kaduna and Kebbi States. Such acts have led to loss of lives, displacement of people and devastation of local economies. Some of the most impacted LGAs include Mariga, Rafi, Shiroro, Munya, Washegu and Kontagora. The most recent significant incident of this nature was reported at a local market at Manigi in Mashegu LGA of the state. Due to the threat to staff on vaccination duties in local primary health care centers (PHCs) and General Hospitals in those LGAs in which these OCGs are present, this risk is currently rated **HIGH** risk.

CIVIL UNREST.

Civil Unrest is rated as LOW due to the low levels of the incident happening in the state. The Islamic Movement in Nigeria (IMN) have organised protests in the state capital in the past, but security forces have quickly dispersed these protests. The risk rating will remain LOW for Niger. The chance that civil unrest impedes access to vaccination stations, causes damage to vaccines and materials or distorts the vaccination process remains unlikely, except potentially as a result of poor site coordination and crowd management in the vicinity of PHCs.

TRAVEL RISK.

The risk of road traffic accidents is high for Niger, especially between Abuja and Minna. Niger State also hosts a major transit route to the south of the country, through Bida road and via the Jebba bridge across the Niger River. The state hosts several fuel depots which also means a high traffic of oil tankers, which regularly cause gridlock on the major roads. This set of unique issues creates challenges for the road transportation of vaccines and staff across the state; a delay in travel could lead to a disruption of the cold chain, leading to loss of vaccine efficacy or a complete batch loss. This threat is assessed as MEDIUM, but could be reduced to LOW with mitigating measures implemented.

KIDNAP.

Based on historic precedent, kidnap within Minna city centre remains unlikely, but is more likely in the hinterlands, particularly in LGAs north of the state capital. Statistically, a Nigerian is more at risk of a kidnap than a foreigner, although a foreigner is a higher value target . Kidnappers are reported to be making a fortune from kidnap in Niger, with farmers, businesspersons, civil servants as well as students being victims of this risk. A trend of kidnap of students is common in Niger State; where bandits target schools and other soft targets. Kidnap incidents that gained national attention were the kidnap of school children at Tegina and Kagara towns of Rafi LGA between February and May of 2021. Spearfish's dataset indicates 46 kidnap events in Niger state during 2021. Whilst reporting of kidnap numbers is often sensationalised by the media and sometimes exact numbers of abductees are not known, the reports suggest 394 abductees from 41 of these incidents. The majority of the

kidnaps occurred in Rafi LGA (15), with Shiroro next (6) and followed by Bosso, Wushishi and Munya (4 each).

This trend may pose a threat to vaccination points where staff gather or are on transit to vaccination points, even though insignificant reports indicate similar trend in PHCs and GHs. The majority of the kidnap cases have occurred during a community invasion by OCGs, when homes are raided and family members taken away until ransoms are paid. Some isolated cases have seen the victims being killed, even after paying ransom by family of the victim(s). This threat is rated as HIGH.

MEDICAL EMERGENCY.

The major medical safety concern for Niger is the COVID 19 pandemic. Although, the infection rate has slowed to a negligible level, a resurgence can easily occur as we have seen with the Delta and Omicron variant. Other tropical diseases like Meningitis and cholera remain a threat when staff operate in Niger's rural environments and are exposed to excessive temperature and lack of proper sewage. Considering staff duties in vaccinations which will make them first contacts with possible infected persons, this threat is rated as MEDIUM.

FIRE EVENT.

There is a low incidence of fire events reported in the capital. However, evidence of fire mitigation at the state central store and vaccine storage sites and at local GHs and PHCs is low. More needs to be done in order to ensure safety for assets (vaccines, PPEs etc). Considering the requirement for a power supply to ensure cold chain support for vaccines, adequate safety procedures related to fire must be ensured. A visit to the state central store indicated only 2 fire extinguishers are serviceable, posing significant threat to assets in the storage. Due to the low likelihood of this threat occurring, fire emergency is considered a MEDIUM threat that can be reduced to LOW with adequate mitigative measures.

ENVIRONMENT (WEATHER).

Flooding in Niger can be a major hazard during July to September due to the Niger river and its many tributaries (including Molendo, Raka and Kaduna rivers) which run through the state. Occasional overflow spill programmes activated by the dams within the state can also lead to flooding. Some of the following LGAs have a history of flooding: Bida, Mokwa, Mashegu and Shiroro as a major seasonal threat that is likely to impact the CoPREP project. This risk is rated as MEDIUM during the state period.

PROGRAMMATIC.

All programmatic planning delivery and sequencing associated with the administration and emergency response to COVID-19, inclusive of training for staff and stakeholder engagement that could impact on programming, whether in terms of delay or failure, is assessed to be LOW based on findings.

DEPLOYMENT.

Based on findings during the field visit, the risk associated with operational and logistics aspects of the programme that can affect vaccine delivery to vaccination centres and cold chain interruption impacting on vaccine efficacy, is rated MEDIUM. Both Ultra Cold Chain (UCC) and Walk-in Cold Room are seen to be connected to the national grid

33KVA and there are 2 x standby generators available. However, the process of receiving vaccines by LGA staff from the State medical store may be impacted by travel disruption or other extraneous factors.

POLITICAL.

The risk associated with activities of the polity, traditional institutions and of the activities of OCGs having the capability to warp community perceptions or contest control of certain areas, could impact negatively on vaccine roll out. For Niger state this risk is considered MEDIUM.

CORRUPTION.

With the massive roll out plan and administration of vaccines at public and private places, chances of corruption amongst staff or the production of counterfeit vaccines cannot be ruled out. Today, the local government immunization/disease officers are responsible for travel to the state hub for collection of vaccines from the state. The same process applies for how the vaccines get to the primary health care centres (routine immunization officers, RIOs). Considering that these vaccines are distributed in a controlled way, this risk is considered to be LOW.

COMMUNICATION.

Existence of several conspiracy theories about vaccine administration and the motive for these vaccines, poses risk of the programme being shunned by disbelieving communities and/or a risk to staff safety, potentially making them vulnerable to direct/indirect attack, as well as a risk of vaccines being destroyed. Due to security concerns, government approach of shutting down telecom services limiting communication poses a threat to planning and coordination as well as local network findings. To date, Munya LGA telecom service remain shut down (this has a likelihood of extending to other security compromised locations). The threat of conspiracy theories and lack of access to telecom services in some locations poses a MEDIUM risk to programme delivery.

EVALUATION OF SECURITY RISKS.

INTRODUCTION.

In carrying out this risk assessment, a wide range of information sources have been used, including but not limited to:

- 1. Feedback with programme and state government employees via an SRA checklist.
- 2. Official UK, US and Australian Government websites.
- 3. The Armed Conflict Location & Event Data (ACLED) Project website.
- 4. Nigerian National Bureau of Statistics.
- 5. UN Department of Safety & Security (Nigeria)
- 6. Open and closed commercial security sources available to the Consultant.
- 7. Discussion and peer review within the Consultant management team who collectively have a large amount of security and risk assessment experience.

In identifying the key risks, several factors were considered such as:

- 1. The threat of terrorists targeting the vaccination programme.
- 2. The threat of civil unrest in the proximity causing damage to the vaccination locations.
- 3. The risk of natural disasters, particularly flooding and earthquake.
- 4. Reputational, political, and financial risks to the donor and programmatic organisation.

The following section entitled Risk Description and Estimation will identify the risks that are considered relevant to this report. For a full description of the probability and impact scores, please refer to Annexes A and B.

RISK DESCRIPTION AND EVALUATION.

TERRORISM.

SCOPE OF RISK:

Incidence of an employee, contractor, member of the vaccination team or member of the general public being killed or injured by a terrorist attack against the vaccination location itself or nearby targets including other building in use by the programme roll out.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|--|---|
| | An attack using a parked or moving vehicle to deliver an explosive charge against the entrances or adjacent areas around the vaccination center, including lorry, car, motorized rickshaw or moped at any of the pedestrian entrances or the only vehicle entrance. This includes any congregations of people (i.e., queues at entrances). | This method has recently been used to significant deadly effect throughout Nigeria and is widely used by groups such as Boko Haram and ISWAP to attack government, civil and military targets as well as commercial interests and crowded spaces such as mosques, community centre etc. The most recent attack of this nature was the attack of Dec 2011 at Madalla, Suleja LGA |
| | An attack using a person(s) to deliver an explosive charge(s) to an entrance area, lobby, or internal space, including internal spaces in use by the vaccination programme. | Common method of delivery and extremely effective if access can be gained to the interior of a target location. This TTP was commonly used in NE Nigeria and places like Kano and Kaduna by Boko Haram, often causing injury and death in specific areas: markets, mosques, SF checkpoints, IDP camps. Secondary attacks can often follow primary attacks. No records of similar attacks have been reported in Niger |
| | An attack by single or teams of people using guns, IED's and grenades to injure or kill people at close quarters, either during the attack or by a delayed hostage scenario using the media to maximum effect | This method was commonly used in the NE and Kano. Usually, handheld grenades are initially used which sets confusion amongst civil population or SF formations before teams using guns directly attack their victims |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 2 | 4 | MEDIUM |

CRIME.

SCOPE OF RISK:

Incidence of an employee, contractor, member of the vaccination team being adversely affected by a criminal event such as a mugging, theft, extortion or act of physical violence perpetrated by organized criminal groups (OCG). Incidence of the vaccination location being targeted by organised criminal elements that has a serious impact on the programme delivery (theft of vaccine, equipment etc.) or reputation of the programme.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|--|--|
| | An attack by single or teams of people, including OCGs, using guns to injure or kill people at close quarters. This is often associated with community invasion for looting rustling and kidnap. | Directed attack on civil population and/or government security forces using small arms fire. This is common in Northern Niger and has the capability of constituting risk to staff at vaccination centers |
| | Employee, contractor, member of the vaccination team falling victim to a sexual assault by male predator(s) resulting in harassment, sexual disease, injury or death. | As common with terror bandits, sexual assault is associated with their MO. Female staff who walk on lonely roads that are unlit and/or remains controlled by armed opposition groups remain more susceptible to such incidents |
| | Infiltration of an organized criminal group into the vaccination programme, resulting in fraud, theft, loss of assets/funds, employment malpractice or general adverse publicity for both NCDC and the State Government if exposed. | Local groups, mostly youths whose leadership is not carried along or who have a perceived reservations about a program are more likely to negatively impact the programme. In some instances, even when involved they find a means of shortchanging the process causing disrepute to the implementing body (NCDC) |
| | Theft of vaccine or equipment vital for delivery that negatively impacts ability to hit required quota. Smuggling of product out of programme or other illicit use of product that impacts programme at state level. | This risk can impact on vaccine availability or staff being exposed to mugging where criminal groups capitalize on vulnerability of staff. This is common densely populated areas of the town like Dikko |
| | Instance of drug taking within program premises for individual use, or the taking place of drug dealing either retail, i.e., to users, or wholesale, to other drug dealers. Use of methanol to enhance low grade alcohol resulting in death or injury of the imbiber | Illicit drug consumption is high in Niger state. Towns that host tanker drivers and large commuter gatherings are more prone to this, as such staff must be adequately vetted |
| | A member of staff engaging in dishonest conduct, such as fraud or embezzlement of funds, equipment or vaccines from the programme itself. | Findings have revealed frauds of this nature occur in other routine immunization programs particularly at the vaccination point. No reports of this were received on CIVID-19 vaccination exercise |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 4 | 3 | HIGH |

CIVIL UNREST.

SCOPE OF RISK:

Incidence of an employee, contractor, member of the vaccination team being adversely affected by unrest caused by rioting, demonstrations, or political violence. Incidence of the vaccination location being targeted by organised criminal elements due to brand ownership of World Bank as an international donor. Any anti-vaccination movement targeting the programme in the form of local protests.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|---|
| | Employee, contractor, member of the vaccination team being caught in a localized protest/riot outside or in vaccination location or other connected location e.g., office/laboratory facilities. | Occasional protests/riots are organized against government policies or religious bodies against a perceived ill treatment. Chances that vaccination staff travelling to vaccination points get caught up in such situations even though they are directly targeted is possible |
| | Employee, contractor, member of the vaccination team being caught in a demonstration either directed towards the vaccination programme, vaccination center or close by. | Due to conspiracy theories, conduct of one member of the vaccination team or local facility staff is misconstrued, sparking up some form of demonstrations or a reaction to some medical complications after taking vaccine |
| | Employee, contractor, member of the vaccination team being affected or injured by political violence associated by an election or local issue that is associated with the vaccination programme. | The political froth leading to next year's elections is likely to generate regular and sometimes violent protests. This could lead to the escalation of security measures with the associated application of lock-down measures in tempo with the rise in threat. |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 2 | LOW |

TRAVEL RISK.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being killed or injured by an exposure to road traffic accident (RTA) when travelling to pick up vaccines from the state from the LGA as well as to from PHCs to LGA cold chain. Grievous injury could also be sustained as well as death while going for vaccination duties at vaccination centres by staff.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|--|---|
| | Employee, contractor, member of the vaccination team being killed or injured by an exposure to a road traffic accident | Over speeding, non-usage of seat belt, dangerous overtaking, use of phones while driving, bad road condition all leads to road traffic accidents. In comparison to other states in the Middlebelt, available date reveals this risk is average in Niger |
| | Incidence of a programme vehicle being stolen whilst parked and unattended, or actively hijacked from programme personnel following and encounter with an IVCP. | Communities with presence of criminal groups have risks of this nature common. Usually, the MO is to disposes residents of their vehicles and in some instances kidnap the victims. Common in areas with presence of armed criminal groups |
| | Employee, contractor, member of the vaccination team being exposed to a boat accident when crossing water bodies | Incidence of a boat accident where programme activities require the movement of personnel and assets by water. This is more common in LGAs with large water bodies or communities around dams. A recent incident of boat mishap was reported in Dec 2021 which claimed 7 lives |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 2 | 4 | MEDIUM |

KIDNAP.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being abducted/taken against his/her will during travel to vaccination points, collection/delivery of vaccines and at vaccination points.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|----------------------------------|--|--|
| | Employee, contractor, member of the vaccination team being abducted by organized criminal groups (OCGs) for ransom purposes (K&R) | Typical with organized criminal groups in most part of the northwest as well as some northcentral states, targets for this crime remain unlimited. In December 2021, local government immunization officer (LIO) for Rafi LGA was kidnapped and was only released 2 weeks later after ransom payment. The sole aim of this is to make monetary gains |
| Express Kidnap (One Chance) | The short-term kidnap of a programme member of staff in order to force the removal of available cash from ATMs. | Express kidnap is particularly prevalent where there is wealth and a high frequency of ATMs. Findings reveal Niger major cities of Minna, Bida, Kontagora and Suleja to have recorded this. |
| Abduction/ Ideological kidnap | Employee, contractor, member of the vaccination team being abducted by organized criminal groups (OCGs) to gain political or other concession. | Health workers have in the past been abducted by organized criminal groups based on their experience to render medical care to injured victims of organized criminal groups (OCGs). More likely to occur in Northern Niger. |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 3 | 4 | HIGH |

MEDICAL EMERGENCY.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being killed or infected by diseases. Incidence of the vaccination administration paused or further infecting other patients at vaccination centres.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|---|
| | Employee, contractor, member of the vaccination team being killed or infected by diseases that could cause serious resultant effect | Diseases present a documented health hazard in Niger, although they can be anticipated and treated with specific medication, hygiene and personal health and wellness care. Records of Malaria, Diarrhea, Cholera, Meningitis have been reported |
| | Incidence of sickness due to personal physiology or due to the ingestion of a sick bug, causing them to be unable to work. | Even though the work force of this project are local staff, the likelihood of ingesting food items that upsets the system is likely |
| | Incidence of a work-related accident during programme delivery which is of such severity that they are temporarily or permanently unable to continue their duties. | Accidents regularly occur in work environments and particularly where there are high numbers of people. The risk of serious accident will be reduced by proper planning, rehearsals and the strict adherence to safety SOPs. Snakes, Scorpions, & insect bites are possible at vaccination centers; – staff must be trained on first responders' treatment for these vectors. |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 2 | 4 | MEDIUM |

FIRE EVENT.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being killed or injured by a fire outbreak. Incidence of the vaccination centre being closed, damaged or destroyed by such an event. Damage to vaccine stocks or other equipment required for roll out.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|--|
| | The malicious use of fire to cause the damage or destruction of programme facilities, equipment or personnel. | The possibility that ex-staff, disgruntled staff as well as persons with reservations against the program set stores and vaccination centers on fire remain likely even though no reports of such were reported in the state |
| | The collateral involvement in a fire event causing damage or destruction of programme facilities, equipment or personnel due to the dense and chaotic nature of the urban landscape. | Uncontrolled fires at bins, power surge and lack of adequate fire safety equipment presents a real threat of fire incidents. Cold chain management requires connection to power which forms a risk of fire outbreak where there is poor, shoddy workmanship in premises or loosely connected power cables |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 2 | 4 | MEDIUM |

ENVIRONMENTAL (WEATHER).

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being killed or injured by a natural catastrophe such as tsunami or earthquake. Incidence of the vaccination centre being closed, damaged, or destroyed by such an event. Damage to vaccine stocks or other equipment required for roll out.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|----------------|---|---|
| | Employee, contractor, member of the vaccination team being killed or injured during floods caused by heavy rain. Damage or destruction to the vaccination center or surrounding areas by flooding. | At the peak of the rainy season (July to September), Niger state experiences heavy downpour that can cause sudden and serious flooding when rivers overflow their banks and drainages cannot contain water volume- about 8 LGAs are exposed to this |
| High wind | Incidence of a programme member of staff being killed or injured, or the damage or destruction of programme assets, due to very high wind gusts. | The occurs majorly during rainy season (June to October) and has the capability to carry objects with it causing harm and discomfort |
| | Incidence of a programme member of staff being killed or injured as a result of lightening. | Usually associated with storms that occur shortly before rainfalls. This has the capability to strike individuals as well as cause serious havoc to buildings, trees etc. |
| Excessive Heat | Employee, contractor, member of the vaccination team adversely affected by high heat. Impact to supplies or facilities due to elevated temperatures (e.g., lack of refrigeration to vaccine etc.). | Excess heat may cause heat-related injuries, like heatstroke; if untreated this can lead to staff death and affect functionality of cooling systems particularly when transporting vaccines with ice parks |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 3 | 3 | MEDIUM |

PROGRAMMATIC.

SCOPE OF RISK:

A failure to properly plan delivery sequencing, inform stakeholders and train programme staff in advance of project start, risks unexpected issues which will delay, alarm and potentially cause the failure of the programme.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|--|---|--|
| | A failure to insist on adherence to strict COVID protocols at vaccination centers increases likelihood of further spread. | Beneficiaries and local stakeholders must be aware of all existing protocols associated with vaccine administration |
| ID capture | A failure to capture reliable information on the numbers being vaccinated progressively throughout the programme results in doubts as to data efficacy and ultimately a loss of confidence in the process. | Poor pre-roll out communication risks stakeholders being unable to provide ID on arrival at vaccination centres. Any IT based data capture system risks interruption due to power loss and will need to be rugged to operate in the field. |
| SF Discord with civilian population | Incidence of elements of the supporting security force generating tension due to their discord with the local community. | Findings indicate a cordial relationship between communities and security forces. Mode of deployment suggests security forces from the local community and not outsiders will carry out this function |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 3 | LOW |

DEPLOYMENT.

SCOPE OF RISK:

Operational and logistical aspects of the programme roll out face risk of interruption to vaccine delivery to field sites and, potentially, risk to vaccine efficacy if vaccine storage temperatures can't be maintained.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|---|
| | Poor logistical management causing interruption of vaccine supply to the field, leading to delays in the overall program | The process that requires local government immunization officers (LIOs to) individually pick up vaccines from the central medical store could not only cause delay but probable vaccine stock out at local primary health care centers (PHCs) |
| | Incidence of power interruption leading to write off of vaccine stock due to heat damage. (According to brand, Covid 19 vaccines must be stored within a relatively narrow temperature range). | Likelihood that this occurs is slim. Cold chain arrangement has the UCCs and WICRs connected to 33KVA national grid backed by alternate source of power in 2 standby generators |
| | Any obstacles to the smooth deployment and medical delivery of vaccinations will likely create unplanned extension to the delivery time period. | Unplanned time extensions to programme delivery risk disruption elsewhere in the programme and potentially increase risk to staff due to extended presence in high- risk areas. So far, this outlook remains uncertain |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 3 | 3 | MEDIUM |

POLITICAL.

SCOPE OF RISK:

Electioneering campaign, the influence of other political actors as well as traditional institutions and the seeming contest of government's authority by terror groups could impinge on programme delivery.

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|---|
| | Electioneering campaigns causing dilution to programme communications or directly impacting the effectiveness of the vaccine delivery programme. | Typical with every build of election year, the attention of government deviates from program delivery to election preparedness |
| | Failure to apply the correct notification protocols in the lead up to vaccine delivery causing a snub to the traditional ruler in that area. A withdrawal of royal or religious approval could result in a loss of buy in by the local community. | Current COVID-19 emergency response team has traditional institutions inculcated even though their knowledge of protocols and could not be ascertained |
| | Incidence of restricted access. Programme delivery might not be possible in certain parts of the state where the legitimate government's authority is being challenged. | Even though not much of this has been reported in the state, the alleged presence of terror groups at the Shiroro general area could impact of program delivery |
| | Incidence of an employee, contractor, or member of the vaccination team not being impartial during vaccine administration | Likelihood of administering vaccine based on politics, religion, race, tribe and gender remains very unlikely |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 2 | LOW |

CORRUPTION.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team to engage in theft or fraud in order to enrich themselves as well as discriminate against vaccine administration

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|-----------|---|--|
| | A member of staff engaging in dishonest conduct, such as fraud or embezzlement of funds from the programme itself. | Fraud or embezzlement of funds could rapidly sap the tempo and vigour of the vaccine programme roll out, resulting in failure to vaccinate large parts of the population. Even though this remains likely, it could not be independently ascertained |
| | Extraction of resources from the programme by a staff member because they have been placed under duress by a third party. | Locally recruited programme staff could be placed in this situation by criminal elements within the local community. The use of local 'casual' staff who are untrained makes this likely |
| | Incentivization of programme staff to disrupt or cause the failure of the vaccine programme. | Politically motivated agents could seek to disrupt the programme in order to make the incumbent government (state or local) look weak and disorganized. |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 1 | 3 | LOW |

COMMUNICATION.

SCOPE OF RISK:

Incidence of an employee, contractor, or member of the vaccination team being killed or injured, or vaccines damaged due to the existence of any false news, traditional beliefs, conspiracy theories or vaccines rejected

RISK SCENARIOS:

| Risk name | Description of risk | Estimation |
|--------------------|---|--|
| | Poor communication and lack of timely programme advertising resulting in low take up of the vaccine amongst communities | Even though the absence of this may lead to low turnout for vaccination, findings reveal radio jingles and other forms of sensitizations at places of worships have been ongoing |
| | Failure to coordinate attendance scheduling, resulting in excessive queues with long waiting times, generating dissent and potential civil unrest. | Demand for the vaccine is said to be far lesser than supply, the likelihood of having excessive queues is slim |
| False News | Questions as to the efficacy of the vaccines against traditional medicines generating doubt and leading to low turnout at vaccine centres. | The use of social media to sow false information is a recognized problem in countries which already have high vaccine take-up. Elicitation from residents decry the existence of this |
| Counter Narratives | Anti-establishment commentary suggesting that the vaccine programme is a government plot to infect the population with unknown chemicals, resulting in stakeholder refusal to be vaccinated. | The use of social media to plant doubt and fear in the minds of the population is reported in Niger and has formed the basis for vaccine rejection in some quarters in the state |
| Telecom Shutdown | Employee, contractor, member of the vaccination team exposed to incident due to absence of telecommunication services to aid planning and deployment | Due to ongoing SF operations in the state, strategies including telecom shutdown are considered; 1 LGA (Munya) currently has no telecom services - travel and deployment in such location means increased risk for staff |

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 3 | 3 | MEDIUM |

ANALYSIS OF IDENTIFIED SECURITY RISKS (EXTERNAL AND INTERNAL).



Niger state's 3 headline risks are Crime, Kidnap and Medical Emergency. The primary concern is crime, the occurrence of which seems most probable in the state. While the criminal activities of OCGs are principally in the northern part of the state, the other recognised crimes of mugging, carjacking, aggravated robbery, home invasion and corruption remain a widespread concern throughout the state.

Even though concerns of terror groups continually grow in the state, activities of OCGs categorised under 'Crime' remain the major security threat in the state. Their activities are reported to have impacted on economic and social lives of people in the northern part of the state and the threat increasingly encroaches to the LGAs bordering the northern side of the state capital. Despite all ongoing SF operations in the state (ground troops and air components) it has continued to get worse over the past year, with some communities remaining inaccessible due to the presence and activities of OCGs. Niger state remains the most impacted in the Middlebelt region due to the activities of OCGs, owing this primarily due to its geographical proximity to the northwest region and associated remote and hard to police terrain. This remains the most prominent risk to affect vaccine roll out in the state. Attention must also be given to other risks like travel, fire, environmental as well as other internal risks like deployment and communication as they will also impact on vaccine roll out and administration. An element of these risks can be addressed by security design, but equal importance must be placed on security procedures, training, and management of staff to reduce them to the lowest level possible.

The remainder of the risks, some of which can have a significant impact, are also unlikely in the context of the current situation in Niger state. Although the tolerance for the risk is unlikely to be any higher, they should become accepted as reasonable norms of operating in such an environment. This does not reduce the requirement to manage them to the lowest level possible and management should consider the introduction of all reasonable precautions as part of its longer-term planning.

RISK MITIGATION MEASURES & PLAN.

INTRODUCTION.

A multi-layered approach to security is effective as it can mitigate risks using generic principles. This section will propose several risk controls for approval by the NCDC programme team and State Ministry of Health to address the risks identified above. As discussed initially, they will be written as objective statements, i.e., the desired state that is to be achieved, not how to achieve it. As shown below, each control's predicted reduction on its risk will be documented. This will then form the basis for the Security Management Framework, which will be written after this risk assessment has been accepted and signed off by the client.

INDIVIDUAL RISK MITIGATIONS.

TERRORISM.

RISK CONTROLS:

- 1. Project security adviser will issue advisories on any areas where specific threat is expected based on liaison with local authorities.
- 2. It is clearly impractical that staff avoids all public places, places of worship etc but duty of care suggests informing them of targets as part of security awareness training.
- 3. Avoidance of pattern setting (times, routes, locations, and vehicle/personnel profiles) is to be actively managed by project security focal point.
- 4. Information assurance ('need to know') procedures to be implemented.
- 5. Project should be very cautious with content in media actions needed for communication and sensitisation activities as there is risk of attracting the attentions of OCGs.
- 6. Security Adviser advice to staff to maintain a low profile when working in Niger.
- 7. Emergency response plan for all personnel, to include immediate action on armed attack on a public place or building with staff present.
- 8. Project security manager or security focal point to actively monitor all personnel, especially those on field work outside the office.
- 9. Identify potential safe haven locations in event of a series of attacks making movement difficult.
- 10. Identify potential evacuation routes in the event of an attack on vaccination centres or facilities frequented.
- 11. Staff to be trained on how to respond to exposure of IEDs (PBIED or VBIED) as well as active shooter incidents.
- 12. Rules of Engagement (RoE) for reaction by supporting security agency to be clearly understood by all.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 1 | 3 | LOW |

CRIME.

RISK CONTROLS:

- 1. Staff advised to always maintain a low profile.
- 2. Project security adviser to track criminal trends and events and notify organisation's Management of any significant issues that could affect the project
- 3. Security awareness training to include avoidance of pattern setting information security and management of personal profile.
- 4. Drivers are instructed not to travel in the early morning before 6:30am and after 5:30pm
- 5. Drivers to be trained on security awareness
- 6. High value movements (cash or valuable equipment) to be planned in coordination with project security adviser
- 7. Project security adviser to adequately liaise with security stakeholders (NPF, NSCDC and DSS) during coordination for movement of staff and materials to get update on trend as well as local vigilante for information at the local community
- 8. Staff are advised on how to improve site security at their individual residences and can seek personal advice from project security adviser.
- 9. Emergency response procedure through a local CMT to handle incidents on a case-by-case basis.
- 10. Staff should avoid lone walking in unlit places to avoid exposure to mugging.
- 11. Project security adviser to document locations with trend of sexual assault and make recommendations in terms of staff deployment.
- 12. Project management should work on improving acceptance within local community.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|--------|
| | 3 | 3 | MEDIUM |

CIVIL UNREST.

RISK CONTROLS:

- 1. During election periods work is suspended or reduced as much as possible in the state.
- 2. Security adviser to issue advisories to all personnel including drivers of areas to avoid, based on liaison with local authorities.
- 3. Security adviser to check all proposed routes avoid areas of potential unrest.
- 4. Security personnel working with the project at any point must have been briefed and understand the ESS 4, page 48 of the World Bank ESF. Project RoE must be based on these standards. Issues like unrest, crime, and other physical threats must adhere to these rules.
- 5. Staff to be advised must not participate in protests or demonstrations.
- 6. CMT to include immediate action on civil unrest situation developing.
- 7. Potential safe haven locations for use in event of widespread unrest in the city or vaccination centres to be identified within Emergency Response Plan (ERP).
- 8. Identify potential evacuation routes in the event of protracted unrest in Niger.
- 9. Staff to briefed on the need to avoid political or religious confrontations during induction training.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 1 | 2 | NEGLIGIBLE |

TRAVEL RISK.

RISK CONTROLS:

- 10. Enforce speed limits.
- 11. Driver selection and training based on Niger experience.
- 12. Person responsible to assess rental cars before hire and report as fit for purpose.
- 13. Use of seatbelts must be enforced on project vehicles.
- 14. Staff crossing water bodies must use life jackets (if safe to cross), else if capability of local boat riders seem uncertain consider avoidance.
- 15. Person responsible to conduct regular (at least monthly) vehicle inspection checks including spare parts and medical equipment.
- 16. Sufficient vehicles should be provided to vaccination and emergency response teams to avoid overload.
 - 17. A proper journey management system should be established for the vaccination teams that involves proper planning, monitoring and response to incident.
 - 18. Drivers should undergo a defensive driver training programme.
- 19. Cap driving hours of drivers to reduce fatigue and stress. It is noted this is difficult to enforce but it is a serious cause of RTA and the concern cannot be ignored.
- 20. A ban on all vehicle movement after dark.
- 21. Nearest Hospitals and Ambulance services MUST be identified by the project security adviser.
- 22. Contact lists for physicians within the medical facilities need to be established by project security adviser.
- 23. Remote location Med Evac plans should be understood by all travellers.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 1 | 2 | NEGLIGIBLE |

KIDNAP.

RISK CONTROLS:

- 1. Project security adviser to disseminate any new kidnap specific advice as a priority.
- 2. Kidnap awareness to be included in induction training, pattern setting, information security, reducing profile to kidnappers.
- 3. Staff to maintain a low profile always.
- 4. Hired vehicle drivers should be briefed on kidnap prevention.
- 5. K & R training and preparedness for all staff should be done at least once a year.
- 6. Travel itinerary to be kept confidential and shared on a need-to-know basis.
- 7. Person responsible for journey management to enforce proper management of staff movement in the field.
- 8. Staff Tracking and Journey Management guidelines.
- 9. K & R setup like Proof of Life should be done for staff.
- 10. K & R insurance policy and requirements to be reviewed and advised by project's management.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 3 | LOW |

MEDICAL EMERGENCY.

RISK CONTROLS:

- 11. Awareness training on measures to prevent infection, including the use of high-concentration insect repellent, COVID 19 PPE (Personal Protective Equipment), protective clothing, and netting at night.
- 12. Organisation to comply with COVID 19 protocols.
- 13. Project security adviser to issue advisories based on emerging health risks as well as COVID 19 infection numbers for Niger state.
- 14. Medical insurance cover must be adequate for private health clinics and medical evacuation.
- 15. Programme Crisis Management Plan to cover medical emergency.
- 16. Signages and information should be displayed throughout the office environments both for visitors and staff on COVID 19 prevention and response numbers.
- 17. Immediate vicinities of clinics, offices, stores and vaccination centres must be cleared and fumigated in order to minimise presence of vectors.
- 18. Staff should be trained in first response first aid including vector bites

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 1 | 2 | NEGLIGIBLE |

FIRE EVENT.

RISK CONTROLS:

- 1. Hotels, offices, stores and PHCs to assessed by project security adviser for compliance with fire safety standards.
- 2. Staff to be trained during security briefing on procedures and responses to fire emergencies.
- 3. Electricity panels should be properly labelled and secured to prevent electrocution.
- 4. Organisation's storage rooms cold chain equipment must be maintained, functional and adequate.
- 5. Main and alternate muster points identified for evacuating building.
- 6. Fire warden to ensure personnel list available to account for all personnel at office.
- 7. Emergency response plan for fire at all locations to be briefed to new personnel by fire warden.
- 8. Project vehicles to carry firefighting equipment.
- 9. Workmanship done at offices, stores and buildings must be conducted by professionals with adequate records kept.
- 10. Periodic service of firefighting equipment must be done and appropriately recorded.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 2 | LOW |

ENVIRONMENTAL (WEATHER).

RISK CONTROLS:

- 1. Project security adviser ensures that selected staff hotels are not located in flood areas.
- 2. 4x4 vehicles that can handle the terrain during severe weather should be provided to field teams where appropriate.
- 3. Project staff must also understand and adhere to the World Bank Environment and Community Health and Safety standards (ESS4).
- 4. Flood alerts to be issued to allow staff to adjust travel plans appropriately.
- 5. Provision of appropriate volume of drinking water to staff when working in excessive temperature.
- 6. Where rivers burst their banks due to excess rainfall, no attempt should be made to cross.
- 7. Lightening resistors should be installed on buildings and particularly avoid vaccination exercises during lightening under trees

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|-------|
| | 2 | 2 | LOW |

PROGRAMMATIC.

RISK CONTROLS:

- 1. Project staff should be briefed on World Bank health and safety standards contained in World Bank Environment and Social Framework handbook.
- 2. Health and Safety briefings should be given daily to remind stakeholders are aware of required protocols and procedures.
- 3. Prompt payment of staff salary as well as adequate renumeration for those involved in vaccination process will ensure staff commitment to the programme.
- 4. Project security adviser must monitor relationship between security agencies and the local community to know which agency is the most acceptable to provide security whilst also avoiding negative reactions.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 2 | 1 | NEGLIGIBLE |

DEPLOYMENT.

RISK CONTROLS:

- 1. Adequate vehicles should be provided to vaccination teams. Currently, the LGA team come to the state for vaccine pick up individually. The dispatch of teams from the state hub to LGAs and to local communities is a preferred approach.
- 2. Proper planning is required to ensure continuity of the cold chain during deployment (ice packs, cool boxes).
- 3. Generators for alternative source of power must be regularly serviced to ensure vaccine efficacy
- 4. The National Orientation Agency (NOA) should be involved in the vaccination drive. The agency should be actively involved in dispelling fake news about the virus.
- 5. The programme should have a close relationship with security personnel like the police to get security information before deployment. Areas where there may be conflict in the state should be avoided completely or only entered cautiously and with appropriate prior planning.
- 6. A proper journey management process should be established.
- 7. Staff should be briefed on security response to incidents while in the field.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 2 | 1 | NEGLIGIBLE |

POLITICAL.

RISK CONTROLS:

- 1. Due to the coming 2023 elections, the vaccination programme should be conducted as soon as possible. This is important because the closer the programme gets to the coming election the bigger the possibility that an electioneering campaign gets prioritized over vaccination.
- 2. To get adequate buy-in and increase vaccine acceptance, the influence of those traditional and religious leaders close to the people must be cultivated and employed.
- 3. Project security adviser should identify areas that are contested by armed groups and ensure project staff avoid such locations. Where access is hindered by contesting armed groups, vaccination centres should be coordinated in safer locations

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 2 | 1 | NEGLIGIBLE |

CORRUPTION.

RISK CONTROLS:

- 1. Internal control mechanisms, such as due diligence audit process, should be strengthened and transparent to ensure funds and processes are not tampered with.
- 2. Vaccine distribution chain should be adequately monitored to nip any temptation for vaccine theft
- 3. Staff must be trained to administer vaccines on basis of *'first-come first-serve'* rather than discriminating or prioritising stakeholder groups.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 1 | 2 | NEGLIGIBLE |

COMMUNICATION.

RISK CONTROLS:

- 1. There should be adequate pre-delivery sensitization on vaccine administration using radio jingles and other media in order to reach remote communities, emphasising the benefits of the vaccination programme and explaining the delivery plan.
- 2. Project security adviser should be involved in planning and site selection to avoid gatherings and excessive queues and rowdy sessions that have the likelihood of further increasing the spread of Covid.
- 3. Alternate means of communication should be provided in places where telecom has been shutdown and other staff encouraged to have multiple SIM cards to stay connected.

| Risk name | Probability | Impact | Score |
|-----------|-------------|--------|------------|
| | 2 | 1 | NEGLIGIBLE |

PRACTICAL TOOLS FOR MANAGING RISKS.

Training

- 1. Staff and security agency induction training on SOPs and ERPs
- 2. All programme and security agency personnel to be briefed on the delivery framework and RoE.
- 3. Vaccination team training and rehearsals.

Drills

- 1. Background vetting.
- 2. Covid-19 site protocol.

Equipment

- 1. Dedicated transport fleet.
- 2. Vehicle trackers.
- 3. Robust IT system and plan for data capture.
- 4. Robust cold chain containers with appropriate time specifications for temperature retention.
- 5. PPE provision (PHC sanitisation, masks, disinfectants, signage).
- 6. Staff ID badges a risk?
- 7. Dual SIM phones.
- 8. Sat phones.

Communication

- 1. WhatsApp Alert groups.
- 2. 'Constant companion' contact card.
- 3. RoE card for security personnel.

SUMMARY OF SECURITY FINDINGS.

| RISK | |
|--|---|
| | |
| | Risk Level |
| | E Critical |
| | D High |
| | C Medium |
| | B Low |
| | A Negligible |
| | |
| Negigible Minor Moderate Severe Critical | |
| Impact | |
| | |
| Threat Scenario Impact Proba | bility Risk |
| 1 Terrorism 3 Moderate 1 U | Jnlikely Low |
| 2 Crime 3 Moderate 3 | Likely Medium |
| 3 Civil Unsrest 2 Minor 1 U | Jnlikely Negligible |
| 4 Travel risk 1.9 Minor 1.1 U | Jnlikely Negligible |
| 5 Kidnap 3 Moderate 2 P | ossible Low |
| 6 Medical Emergency 2.1 Minor 0.9 U | Inlikely Negligible |
| 7 Fire Event 2.2 Minor 1.8 P | ossible Low |
| 8 Environmental (Weather) 2 Minor 2 P | ossible Low |
| 9 Programmatic 2 Minor 1 U | niikely Negligible |
| 10 Deployment 1 Negligible 2 P | ossible Negligible |
| Political 1 Negligible 2 P | Individual de la constante de |
| Corruption | mikely inequiquole |
| 12 Corruption 2 Minor 1 U | lossible Negligible |

The above risk maps are a means of demonstrating the intended reduction in risk, using the proposed controls. The intention is to be able to use these controls to build the Security Management Framework, Emergency Response Plans and the appropriate staff and security training regimen and to accept the residual level of risk left in place. These controls do not guarantee such incidents won't happen, but they reduce the chances of one happening. If one occurs, the impact is minimised, and the chances of recovery are maximised.

The above controls can be grouped into the following broad categories, which will become the basic components of the deployment process and vaccination site mitigations by priority:

- 1. Deployment and Recovery
- 2. Physical barriers and structures, including lighting and other recommend works.
- 3. Access Control using checkpoints and registration points.
- 4. Covid-19 protocols and PPE availability

- 5. Cold Chain Management
- 6. CoPREP/Security agency protocols and RoE

Security procedures, training standards and contingency plans are key parts of the overall security management. An integrated security solution using people, technology and procedures involves all three aspects, and each must be carefully coordinated with the other two to produce a seamless security environment.

This risk assessment identifies the priority risks and provides a framework against which we identify the current security shortfalls and prioritise the recommended work to mitigate the gaps.