



Adamawa and Borno - COVID-19 Risk Related Indicators

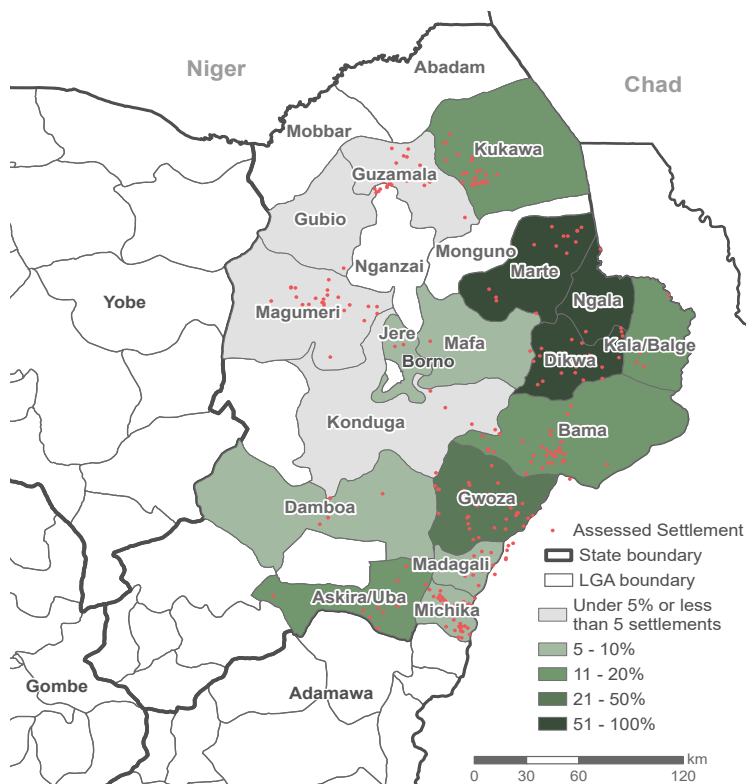
Assessment of Hard-to-Reach Areas in Northeast Nigeria

June 2021

Introduction

The continuation of conflict in Northeast Nigeria has created a complex humanitarian crisis, rendering sections of Borno and Adamawa states as hard to reach (H2R) for humanitarian actors. Previous assessments illustrate how the conflict continues to have severe consequences for people in H2R areas¹. In addition, general insecurity, compounded by the lack of access to basic services and infrastructure, such as healthcare and information sources, leaves people living in H2R areas highly vulnerable to the spread and impact of COVID-19. The first confirmed cases in Borno and Adamawa states were announced on 20 April and 22 April 2020², respectively. Due to the limited access to H2R areas, it is unlikely that there will be confirmation of an outbreak in these areas. It is therefore highly important to evaluate the situation of the population in H2R areas in order to monitor changes and inform humanitarian aid actors on immediate needs of the communities.

Proportion of settlements assessed, June 2021.



of key informant interviews: **359**
of assessed settlements: **288**
of assessed LGAs: **17**
of assessed LGAs with sufficient coverage¹: **13**

COVID-19 precautions in IDP camps

Precautions for new arrivals

Hand-washing and temperature screenings for new arrivals at IDP camps could help slow the spread of COVID-19. To assist in monitoring the implementation of these procedures, REACH began asking KIs, who had recently left H2R areas, if they were asked to wash or sanitize their hands or had their temperature measured when they arrived at the IDP camp.

Among KIs with direct knowledge of an assessed hard-to-reach settlement,



37% reported they were asked to wash and/or sanitise their hands when they arrived at the IDP camp.



30% reported their temperature had been measured when they arrived at the IDP camp.

Methodology

Using its Area of Knowledge (AoK) method, REACH monitors the situation in H2R areas remotely through monthly multisector interviews in accessible Local Government Area (LGA) capitals. REACH interviews key informants (KIs) who are either 1) newly arrived internally displaced persons (IDPs) who have left a H2R settlement in the last month, or 2) KIs who have had contact with someone living in or transiting through a H2R settlement in the last month (e.g. traders, migrants, relatives, etc.)³.

If not stated otherwise, the recall period is set to one month prior to the last information the KI has had from the hard-to-reach area. Selected KIs are purposively sampled and are interviewed on settlement-wide circumstances in H2R areas. Responses from KIs reporting on the same settlement are then aggregated to the settlement level. The most common response provided by the greatest number of KIs is reported for each settlement. When no most common response could be identified, the response is considered as 'no consensus'. While included in the calculations, the percentage of settlements for which no consensus was reached is not always displayed in the results below.

Due to precautions related to the COVID-19 outbreak, data was collected remotely through phone based interviews with assistance from local stakeholders. Results presented in this factsheet, unless otherwise specified, represent the proportion of settlements assessed within an LGA. Findings are only reported on LGAs where at least 5% of populated settlements and at least 5 settlements in the respective LGA have been assessed. The findings presented are indicative of broader trends in assessed settlements from 1st June to 25th June 2021, and are not statistically generalisable⁴.

Proportion of assessed settlements where it was reported that people had heard about COVID-19, by LGA:

Adamawa

Madagali	89%	<div></div>
Michika	73%	<div></div>

Borno

Askira / Uba	100%	<div></div>
Bama	2%	<div></div>
Damboa	0%	<div></div>
Dikwa	0%	<div></div>
Gwoza	22%	<div></div>
Jere	0%	<div></div>
Kala Balge	29%	<div></div>
Kukawa	92%	<div></div>
Mafa	0%	<div></div>
Marte	40%	<div></div>
Ngala	50%	<div></div>

In **92%** of the assessed settlements, sick community members were reportedly **not** being separated from others.

¹REACH hard to reach factsheets from [January to May 2021](#)

²Nigerian Centre for Disease Control Twitter feed

³Where possible, only KIs that have arrived very recently (0-3 weeks prior to data collection) were interviewed.

⁴Due to changes in migration patterns, the specific settlements assessed within each LGA vary each month. Changes in results reported in this factsheet, compared to previous factsheets, may therefore be due to variations in the assessed settlements instead of changes over time.

⁵The most recent dataset on [grid3.gov.ng/datasets](#) has been used as the reference for settlement names and locations, and adjusted to account for deserted villages based on information shared by OCHA



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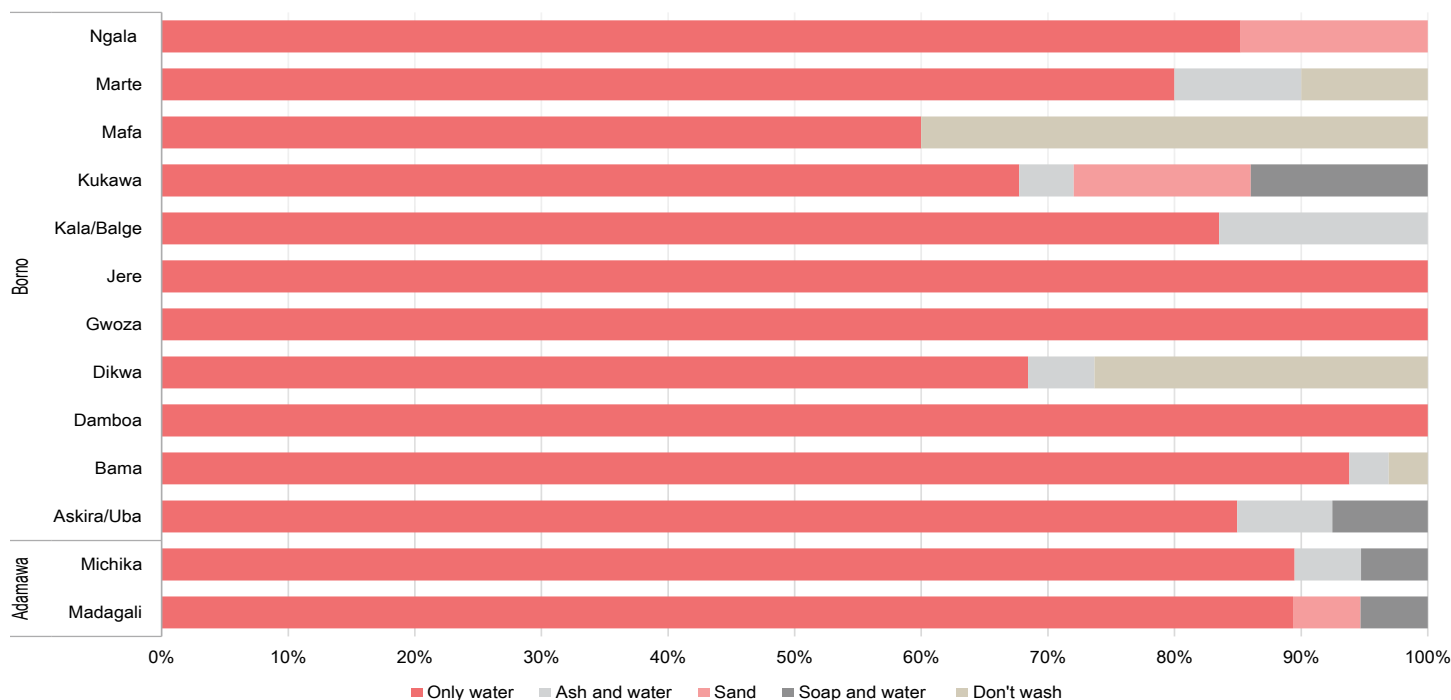
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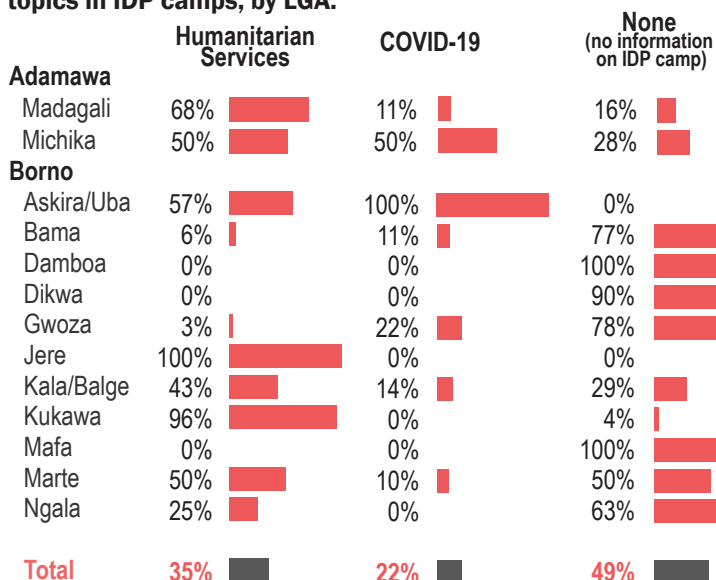
Hand washing practices in H2R areas

Proportion of assessed settlements by reported most common hand-washing materials by LGA:



Information on situation in IDP camps

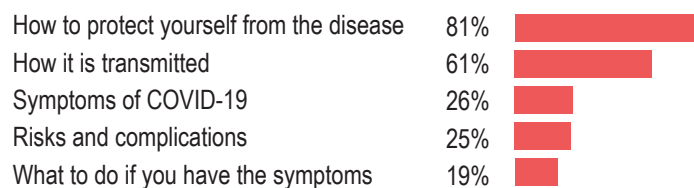
Proportion of assessed settlements where most people were reported as having received information about the following topics in IDP camps, by LGA:



Information on Covid -19

In those **48%** of assessed settlements where it was reported that people had heard about COVID-19:

Most commonly reported kinds of information people had reportedly heard about COVID-19:



Most commonly reported COVID-19 specific information sources:



Conclusion

Soap use during hand-washing was found to be limited across all LGAs suggesting elevated risk for contraction and spread of COVID-19 in H2R communities in all LGAs. While reported knowledge of COVID-19 seemed to have increased in some LGAs, KIs in assessed settlements in Damboa, Dikwa, Jere and Mafa reported having no knowledge of COVID-19. In those assessed settlements where information had been received, the most persisting information gaps that seemed to persist were information on risks, complications, and what to do if you have symptoms. In majority of the assessed settlements where people had reportedly heard of COVID-19, radio was the most commonly reported source of information on the disease.

⁶Armed Opposition Groups