

Adamawa and Borno - Water, Sanitation and Hygiene (WASH)

Assessment of Hard-to-Reach Areas in Northeast Nigeria

December 2020

Overview

The continuation of conflict in Northeast Nigeria has created a complex humanitarian crisis, rendering sections of Borno and Adamawa states as hard to reach. To address information gaps facing the humanitarian response in Northeast Nigeria and inform humanitarian actors on the demographics of households in hard-to-reach areas of Northeast Nigeria, as well as to identify their needs, access to services and movement intentions, REACH has been conducting a monthly assessment of hard-to-reach areas in Northeast Nigeria since November 2018.

Using its Area of Knowledge (AoK) methodology, REACH remotely monitors the situation in hard-to-

reach areas through monthly multi-sector interviews in accessible Local Government Area (LGA) capitals with key informants (KIs) who are either (1) newly arrived internally displaced persons (IDPs) who have left a hard-to-reach settlement in the last month or (2) KIs who have had contact with someone living or having been in a hard-to-reach settlement in the last month (traders, migrants, family members, etc.)

If not stated otherwise, the recall period for each question 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 hard-to-reach areas, rather than their individual

experiences. 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 displayed in the results below.

Results presented in this factsheet, unless otherwise specified, represent the proportion of settlements assessed within a LGA. Findings are only reported on LGAs where at least 5% of populated settlements and at least 5 settlements in the respective LGA have

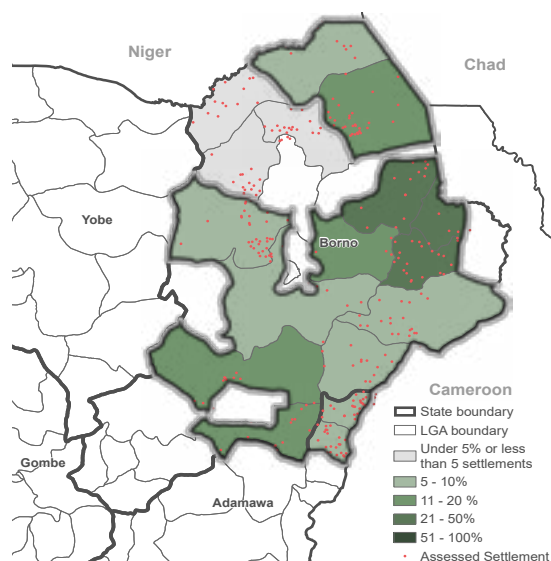
been assessed. The findings presented are indicative of broader trends in assessed settlements in December 2020, and are not statistically generalisable.¹ Due to precautions related to the COVID-19 outbreak, data was collected remotely through phone based interviews with assistance from local stakeholders. Data collection took place from December 1st to December 24th.

Assessment Coverage

399 Key informants interviewed
307 Settlements assessed
18 LGAs assessed
14 LGAs with sufficient coverage²

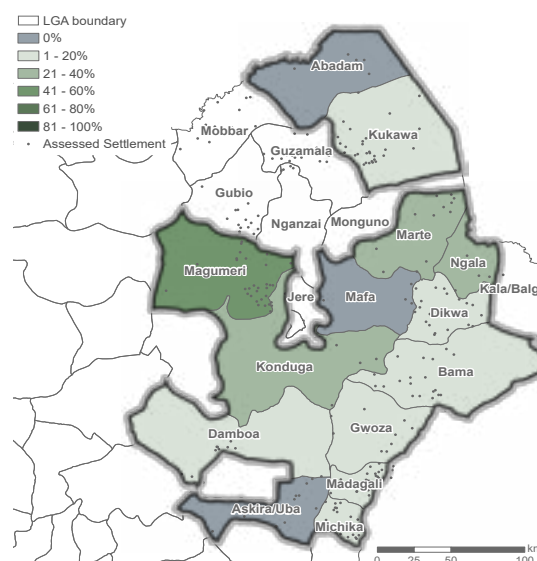
Assessment coverage

Proportion of settlements assessed:



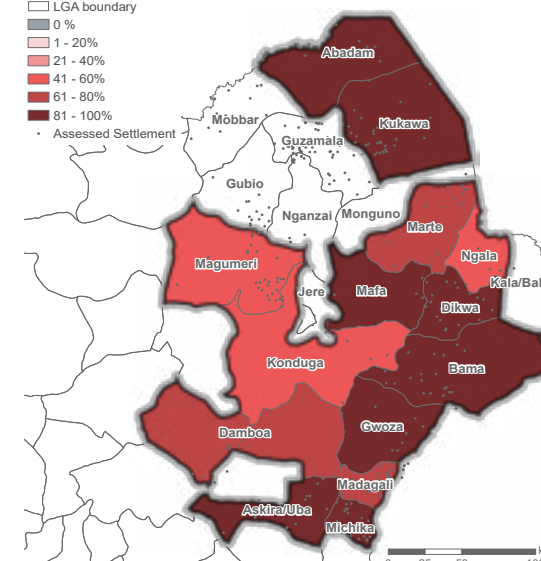
Improved water sources

Proportion of assessed settlements where the main reported drinking water source was an improved water source (e.g. protected well, tapstand):



Unimproved water sources

Proportion of assessed settlements where the main water source was an unimproved water source (e.g. surface water, unprotected well):



¹Due 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.
²The most recent version of the VTS dataset (released in February 2019 on vts.eocng.org) has been used as the reference for settlement names and locations, and adjusted to account for deserted villages based on information shared by OCHA.



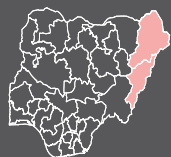
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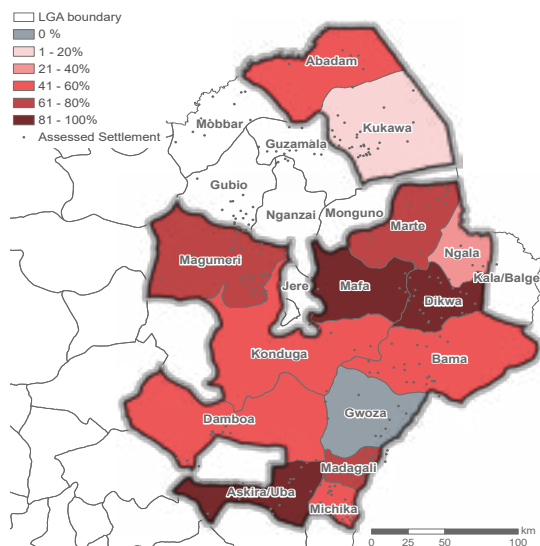
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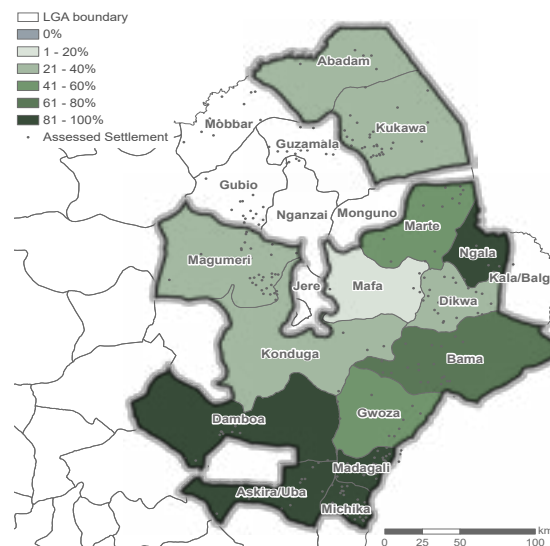
Safe water access

Proportion of assessed settlements where it was reported that safety concerns prevented at least some of the population from accessing the preferred water source:



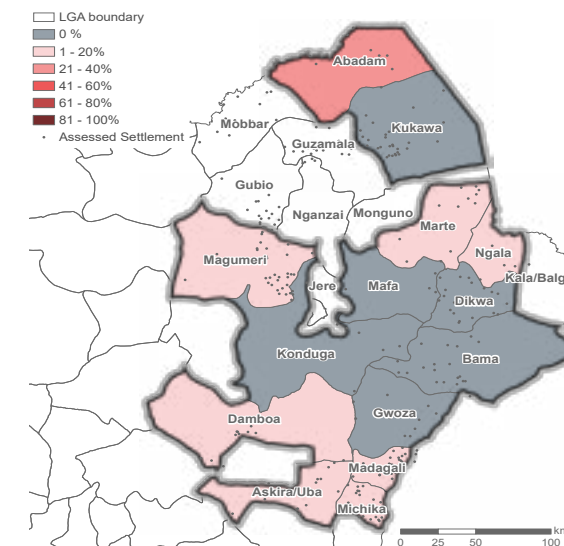
Latrine use

Proportion of assessed settlements where it was reported that at least some people were using latrines:



WASH related health concerns

Proportion of assessed settlements where waterborne diseases were reported to be the main perceived health problem:



Drinking water source

Most commonly reported main drinking water sources, by % of assessed settlements:

Unprotected well	47%	
Surface water	30%	
Borehole	8%	
Protected well	4%	
Tapstand	2%	

Latrine access

Of the assessed settlements where latrine usage was reported (53%), the estimated proportion of people in the settlement who are using latrines:

Less than half	58%	
All	15%	
Half	11%	
More than half	6%	

Of the assessed settlements where it was reported that some people were not using latrines (47%), the most commonly reported reasons why people were not using latrines:

Cultural reason	41%	
Overcrowded	24%	
Damaged	12%	
Nature of land ³	6%	
No access to communal latrine	2%	
Others	1%	

Hand-washing practice

Main hand-washing materials used in the settlements, by % of assessed settlements:

Only water	69%	
Sand with water	10%	
Soap with water	8%	
Ash with water	4%	
Don't wash hands	1%	

³Nature of land like rocks, waterloggings preventing them from constructing latrines.



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