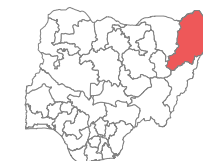


Situation Overview: Humanitarian Needs and Conflict Dynamics in Hard-to-Reach Areas of Borno State

April-June 2020



INTRODUCTION

The continuation of conflict in Northeast Nigeria has created a complex humanitarian crisis, rendering sections of Borno State as hard-to-reach (H2R) for humanitarian actors. To support the humanitarian response for affected populations, REACH has been conducting data collection in Northeast Nigeria since November 2018. These H2R assessments aim to inform humanitarian service providers working in the area by providing information on the situation of the estimated 971,000¹ persons living in H2R areas, including demographics, (inter)sectoral needs, access to services, displacement trends, and movement intentions. Additionally, the assessment has been broadened to include indicators related to COVID-19 to monitor for potential localized outbreaks.

KEY FINDINGS

Remaining Populations: The main reason people were reported to be staying in the H2R settlements was because they were afraid of traveling.

Protection: Incidents of conflict resulting in the death of a civilian and incidents of looting were reported to have taken place in assessed settlements in all assessed local government areas (LGAs). Both types of incidents were particularly commonly reported in Jere and Konduga, while looting appeared to be common in Bama.

Food Security: Food access related indicators suggested that people were using negative coping strategies to deal with a lack of food. In Bama and Gwoza more than half of assessed settlements reported most people relied on foraging as their main source of food.

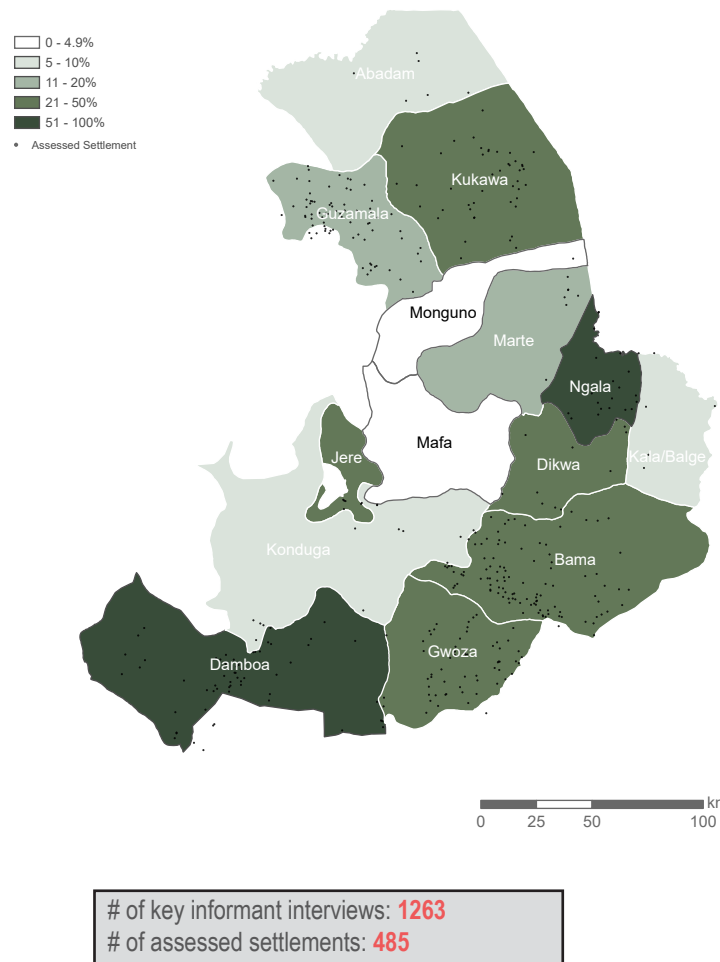
Health: Access to a functional health facility was reported in almost none of the assessed settlements, except for some settlements in Jere and Konduga. The most common health problem was reported to be fever/malaria and reporting on symptoms related to COVID-19 was limited.

WASH: In the majority of assessed settlements, the main drinking water sources were found to be unimproved sources. In Abadam, Kukawa and Marte, reporting on latrine use was particularly low.

Shelter: Makeshift shelters were the most commonly reported main shelter type in assessed settlements overall.

Communication: Communication systems in H2R areas were reported to be limited, with the main source of information most often reported as in-person communication or radio. Less than half of assessed settlements overall reported people had heard of COVID-19.

Map 1: Assessment coverage of Borno State, 1 April 2020 - 30 June 2020



METHODOLOGY

Using its Area of Knowledge (AoK) method, REACH monitors the situation in H2R areas remotely through monthly multi-sector interviews in accessible LGA capitals.² REACH interviews key informants (KIs) who are either (1) recently arrived internally displaced persons (IDPs) who have left a H2R settlement in the last three months or (2) KIs who have had contact with someone living in or having been in a H2R settlement in the last month (traders, migrants, family members, etc).³

From 1 April to 30 June 2020, REACH interviewed 1372 KIs who had recent knowledge of conditions in 558 unique H2R settlements. Due to precautions related to the COVID-19 outbreak, from 1 April to 17 April, data was collected through a mix of in-person and remote data collection. Starting 20 April all data was collected remotely through phone-based interviews with assistance from local stakeholders. The local stakeholders were located in 13 garrison towns in Borno state: Bama, Damboa, Dikwa, Gubio, Guzamala, Gwoza, Konduga, Magumeri, Monguno, Damboa, Maiduguri, Ngala and Pulka. These figures and data collection locations describe all of the data collected for the assessment, whereas the figures below Map 1 describe the data collected in the LGAs with sufficient coverage. Findings are only reported on LGAs where at least 5% of all settlements in the respective LGA had been assessed.⁴ Data collected represents knowledge of settlement conditions ranging from 1 January 2020 to 30 June 2020.

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 H2R area. Selected KIs were purposively sampled and interviewed on settlement-wide circumstances in

¹ UN Office for the Coordination of Humanitarian Affairs. Nigeria: 2020 Humanitarian Needs Overview

² LGAs represent one administrative level below the state level, with Borno state comprising of 27 LGAs.

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

⁴ LGA level data is only represented for LGAs in which at least 5% of populated settlements and where at least 5 settlements have been assessed. The 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 for deserted villages (OCHA 2020).



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METHODOLOGY CONTINUED

H2R areas, rather than their individual experiences. Responses from KIs reporting on the same settlement were then aggregated to the settlement level.

The most common response or most credible response was reported for each settlement. When no most common response could be identified, the response was considered as 'no consensus'. While included in the calculations, the percentages of settlements for which no consensus was reached are not always displayed in the results. Findings presented, unless otherwise specified, represent the proportion of settlements assessed within an LGA.

Due to COVID-19 related precautions, focus group discussions (FGDs) were not conducted during the data collection period. A limited number of semi-structured in-depth interviews (IDIs) were conducted remotely in April before a decision was made to focus on quantitative data collection for the remainder of the data collection period. In this report, quantitative data is triangulated with information from IDIs when possible. Of the twelve IDIs completed, five were with participants from Bama, three from Damboa, three from Gwoza and one from Marte.

LIMITATIONS

Data collection is dependent on the presence and identification of eligible KIs in LGA capitals. REACH can therefore not guarantee sufficient coverage of geographical areas, and a lack of responses from a given area should not be used to conclude that no people are remaining in those areas.

H2R data is indicative only and therefore must be triangulated with other sources. As data is triangulated from recalled accounts from people in transit after migrating from their settlements, it may compromise the level of details of the information given. For instance, it is possible that incidents attributed as having occurred in one LGA may have occurred in neighbouring LGAs.

More information on the methodology can be found in the [H2R Terms of References \(ToRs\)](#).

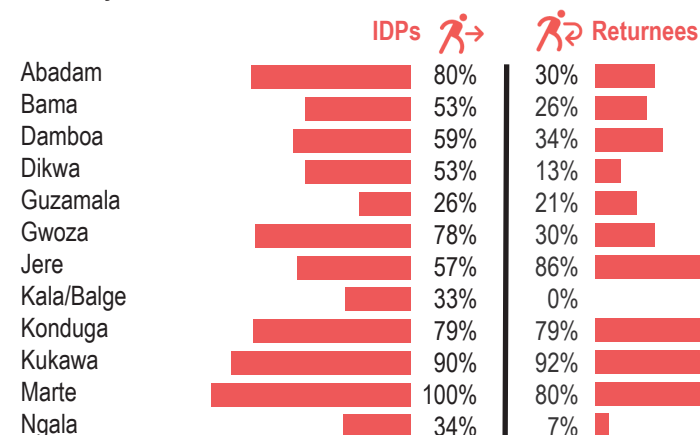
POPULATION DISPLACEMENT AND MOVEMENT

DEMOGRAPHICS

KIs reported that members of the original host communities who had never been displaced were present in 86% or more of assessed settlements in each assessed LGA (overall 98%). There was, however, more variance in the reported presence of IDPs and returnees (see Graph 1). The highest proportion of settlements where the presence of IDPs was reported was in some of the LGAs considered fully inaccessible,⁵ Marte (100% of assessed settlements) and Kukawa (90%). By contrast, in Guzamala, which is also considered to be fully inaccessible, IDP presence was only reported in 26% of assessed settlements, making Guzamala one of the LGAs where the lowest proportion of assessed settlements reported IDP presence overall. Kala/Balge (33%) and Ngala (35%) also had low proportions of settlements with reported IDP presence.

In Kukawa and Marte, the proportions of assessed settlements for which KIs reported the presence of returnees was similarly high (92% and 80%, respectively). Other LGAs where a high proportion of assessed

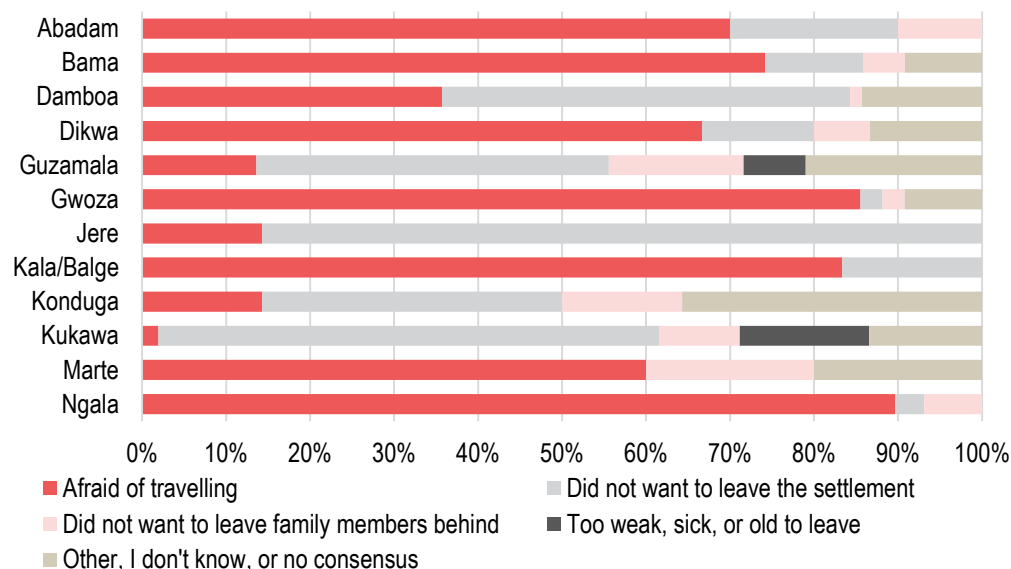
Graph 1: Proportion of assessed settlements reporting the presence of IDPs and returnees in the settlement, by LGA



settlements where returnees were reportedly present included Jere and Konduga, which is likely related to the proximity of these areas to Maiduguri, facilitating easier movement between the inaccessible and accessible areas.

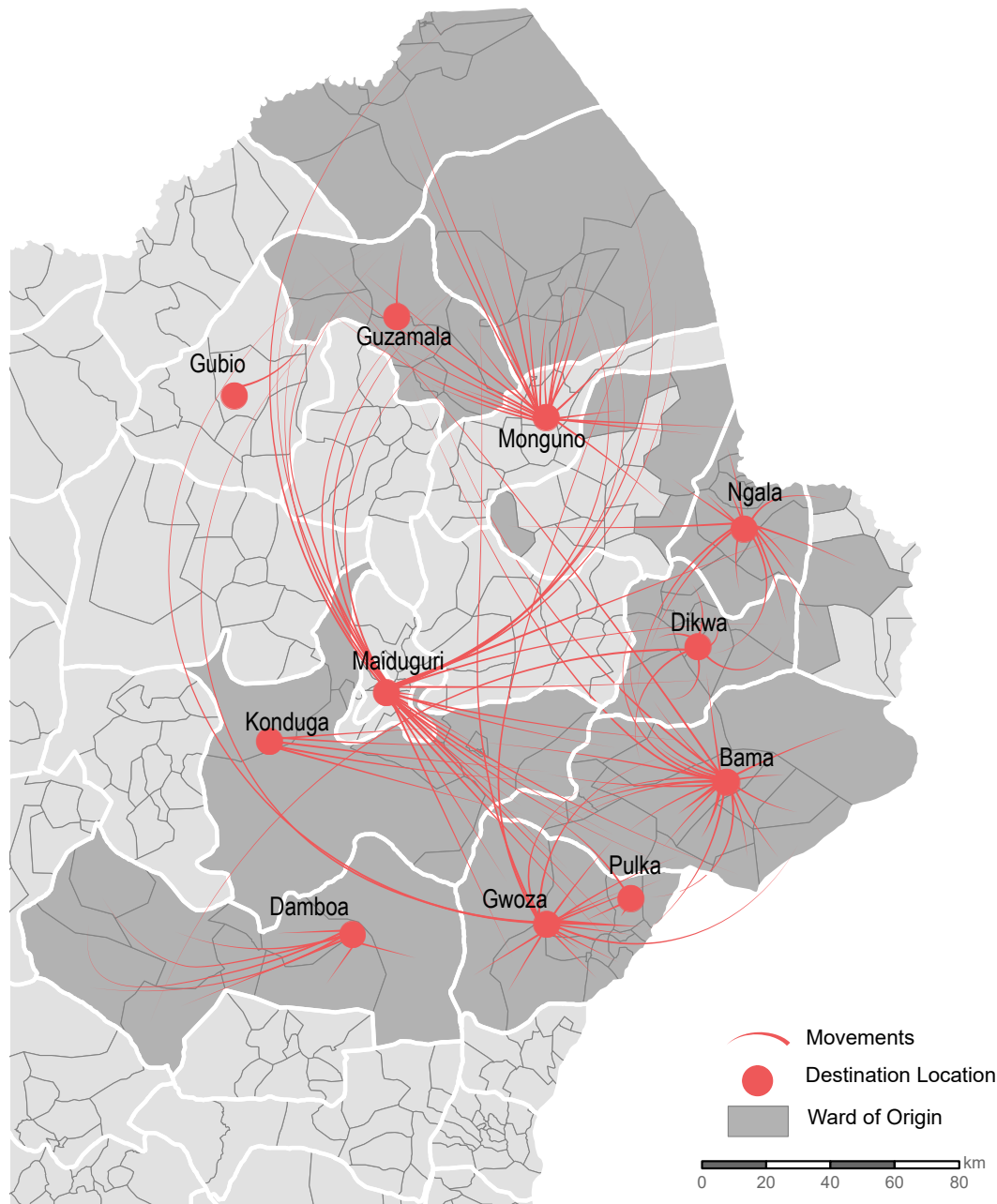
The descriptions of the main remaining population groups in the H2R settlements provided by IDI participants varied. Some reported there were mostly women left in the H2R settlement, while others reported there were mostly elderly, mostly children, or mostly men. Overall, in 50% of assessed settlements, most KIs

Graph 2: Proportion of assessed settlements by main reason reported for people to stay behind in the H2R settlement, by LGA



⁵ United Nations Office for the Coordination of Humanitarian Affairs. Nigeria: 2020 Humanitarian Needs Overview. Abadam, Guzamala, Marte and Kukawa are the four LGAs considered fully inaccessible

Map 2: Reported origin and destination of IDPs from H2R areas, 1 April 2020 - 30 June 2020



reported that the main reason people remained in the settlement was that people were afraid to leave (see Graph 2). The highest proportions of assessed settlements where this was reported were located in Ngala (90%), Gwoza (86%) and Kala/Balge (83%). In Damboa, Guzamala, Konduga, Kukawa and Jere, the most commonly reported incentive to remain was that people did not want to leave the settlement, reported by 49%, 36%, 60%, and 82% of assessed settlements, respectively. People choosing to remain in around half or more of the assessed settlements in these LGAs may indicate that the situation was not as dire compared to other areas. The findings presented throughout this situation overview also suggest that the needs in the assessed settlements in these LGAs (Damboa, Guzamala, Konduga, Kukawa and Jere) were not as severe, with the exception of some protection and food security and livelihood indicators in Jere and Konduga.

MOVEMENT

As can be seen in Map 2, most KIs who had been living in inaccessible settlements reportedly travelled to a garrison town in their LGA of origin or the nearest garrison town, suggesting people were choosing to travel to the closest location available. However, KIs moving from Dikwa, Kala/Balge and Marte reportedly often travelled to Ngala. KIs who travelled from Abadam and Guzamala mostly reported travelling to Monguno. KIs from the LGAs closest to Maiduguri, Jere and Konduga commonly reported to travel to Maiduguri, as did those from Kukawa. IDI participants highlighted that they travelled to the particular garrison town they are residing in because they believed the location was safe, to reunite with relatives and that the location was the easiest to travel to. Reasons shared by IDI participants for leaving the H2R settlements included protection concerns, lack of sufficient food and lack of non-food items.

IDI participants reported challenges during their journeys related to fear of being attacked while en-route, thirst, hunger, snake bites and other injuries. All of the IDI participants reported making some or the entire journey on foot, with most reporting they spent between one to three days walking. After completing the journey to the garrison town, IDI participants reported that they did not intend to return to visit or move back to the H2R settlement because returning to the settlement would not be safe.

ARRIVAL AT IDP CAMPS

Hand washing and temperature screenings for new arrivals at IDP camps could help slow the spread of COVID-19. Of KIs who had left H2R areas one month prior to data collection (49%), 47% reported they were asked to wash and/or sanitise their hands when they arrived at the IDP camp and 21% reported their temperature was measured when they arrived at the IDP camp. Furthermore, KIs who left H2R areas one month prior to data collection were also asked if they faced any challenges with entering the garrison towns or camps. Of these KIs (49%), most reported they did not have any trouble (96%). This finding suggests that the state-wide lock-down put in place from 22 April until 13 May 2020 did not significantly hinder new arrivals from H2R areas from entering the garrison towns or camps.⁶ Furthermore, IDI participants reported being told about COVID-19 once they arrived in the garrison towns or camps, including information about how COVID-19 is spread, prevention and risks.

SITUATION IN ASSESSED SETTLEMENTS

PROTECTION

In some LGAs, KIs reported that the safety of most people in their settlements had worsened compared to the previous month, this was most commonly reported in Adabam (70% of assessed settlements), Gwoza (46%), Jere (100%), Kala/Balge (50%) and Konduga (57%). KIs in about an equal proportion of

⁶ [The Governor of Borno state official Facebook page](#)

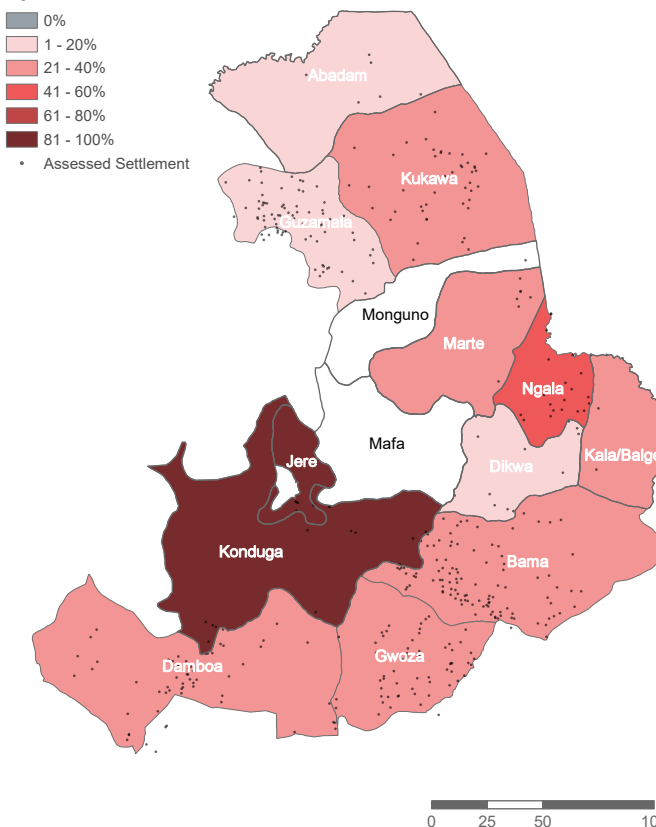
assessed settlements reported that the safety had worsened and stayed the same compared to the previous month in Bama (44% and 35%, respectively), Dikwa (40% and 33%, respectively) and Ngala (48% and 45%, respectively). Exceptionally, the highest proportion of assessed settlements in Damboa and Kukawa, had KIs report that the safety of most people was better compared to previous months (57% and 40%, respectively).

In all assessed LGAs, an incident of conflict resulting in the death of a civilian/civilians had reportedly taken place in at least 10% of assessed settlements (see Map 3). The highest proportion of assessed settlements where this was reported was in Jere (100%) and Konduga (100%). An incident of looting where most of a household's property was stolen was reported to have occurred in at least 20% of assessed settlements in each LGA. Looting was most commonly reported to have happened in assessed settlements in Bama (93% of settlements), Jere (100%) and Konduga (100%). IDI participants reported additional protection concerns, including abductions, forced/early marriage, forced recruitment, and other forms of attacks and violence.

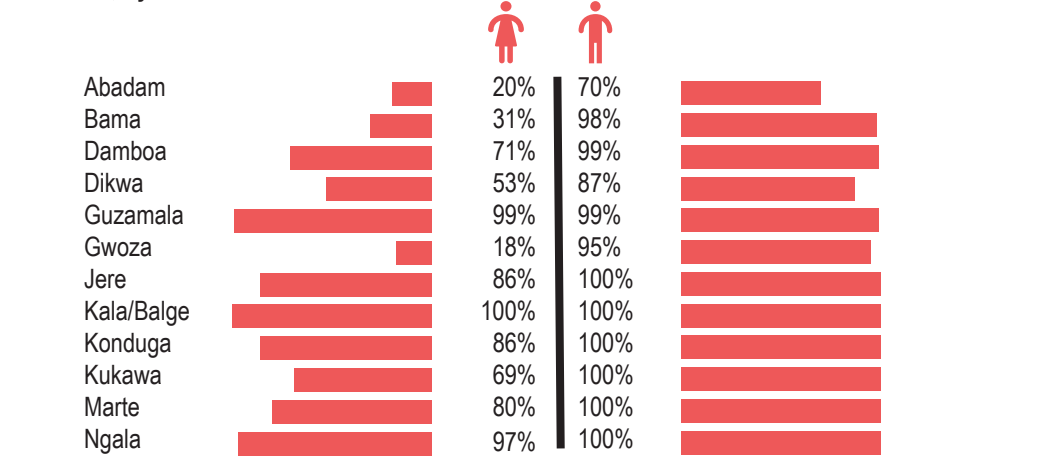
As can be seen in Graph 3, men were reported to be free to move within the settlement in most assessed settlements (overall 97%), with lowest proportion of settlements for which this was reported in Abadam (70%). The proportion of assessed settlements where women were reported to be free to move within the settlement was much lower (overall 58%). The lowest proportions of settlements where it was reported that women were free to move were located in Abadam (20%), Bama (30%) and Gwoza (18%).

Indicative of the destabilizing nature of the conflict and a negative impact on families, in all assessed LGAs, at least 10% of assessed settlements were reported to have some children living without a caretaker or relative. This was most commonly reported in assessed settlements in Gwoza (87% of assessed settlements), Jere (100%), Konduga (86%), and Ngala (80%).

Map 3: Proportion of assessed settlements where at least one incident of conflict resulting in the death of a civilian was reported



Graph 3: Proportion of assessed settlements reporting women/men were free to move within the settlement, by LGA



All of the IDI participants shared that they are currently separated from some family members. Reasons given for the separation included that family members were abducted or victims of forced recruitment, losing track of the family members while escaping during an attack, and family members being too afraid, weak or old to make the journey out of the H2R settlement. Most of the IDI participants reported that they have not had contact with the family members since the separation.

The reporting of severe protection concerns by KIs and IDI participants from all LGAs suggests that the conflict continues to have negative consequences on the lives of people remaining in H2R areas. Jere and Konduga had some of the highest proportion of assessed settlements reporting protection concerns. Although their proximity to Maiduguri and major roadways would generally be considered a positive factor for these areas, with regards to protection concerns being in the vicinity of an area of major concern for parties to the conflict may increase their risk.

FOOD SECURITY AND LIVELIHOODS (FSL)

Livelihoods

As can be seen in Graph 4, the most commonly reported engaged in livelihoods activities people were subsistence farming (70% of assessed settlements), rearing livestock (31%), casual labour (29%), fishing (29%) and hunting (16%). People were also reported to be engaged as market sellers or traders in some assessed settlements in Abadam (20%), Jere (29%), Konduga (21%) and Kukawa (13%) and in farming to sell in some assessed settlements of Abadam (10%).

Most people were reported to not have access to their usual livelihoods in the majority of assessed settlements in Bama (97%), Damboa (83%), Dikwa (100%), Gwoza (97%), Jere (100%), Kala/Balge (100%), Konduga (86%) and Ngala (97%). On the contrary, a smaller proportion of assessed settlements in Abadam (30%), Guzamala (32%), Kukawa (44%) and Marte (40%) reported that most people did not have access to their usual livelihood.

Graph 4: Proportion of assessed settlements by reported livelihood activities engaged in, by LGA

	Subsistence farming	Rearing livestock	Casual labour	Fishing	Hunting	Market sellers or traders	Farming to Sell
Abadam	100%	30%	50%	30%	20%	20%	10%
Bama	34%	10%	28%	18%	31%	3%	1%
Damboa	100%	77%	90%	9%	9%	0%	3%
Dikwa	60%	7%	7%	7%	33%	0%	0%
Guzamala	84%	25%	14%	0%	2%	1%	0%
Gwoza	62%	17%	5%	13%	12%	5%	0%
Jere	86%	43%	29%	43%	43%	29%	0%
Kala/Balge	67%	33%	0%	17%	33%	0%	0%
Konduga	57%	36%	57%	36%	21%	21%	0%
Kukawa	90%	63%	21%	65%	8%	13%	6%
Marte	100%	40%	0%	80%	0%	0%	0%
Ngala	83%	7%	3%	28%	14%	0%	0%
Overall	70%	31%	29%	20%	16%	5%	1%

Likely related to the insecurity of roadways outside of accessible garrison towns, in half or more of assessed settlements in each LGA, it was reported that lack of transportation was a barrier to accessing the usual livelihoods (overall 81%). In at least 10% of assessed settlements in each LGA, it was also reported that lack of access to markets was a barrier to usual livelihoods (overall 76%). Other commonly reported barriers to accessing livelihoods included limited access to waterways (reported for 49% of assessed settlements), seeds or livestock (41%), land for grazing (32%), and farmland (19%). Of particular concern, in some assessed settlements, it was also reported that some people could not access their usual livelihoods because they were not healthy enough (60% in Abadam, 46% in Bama, 13% in Dikwa, 52% in Guzamala, 14% in Konduga, 19% in Kukawa and 20% in Marte). Additional barriers identified by IDI participants from Bama, Damboa and Gwoza included that farming practices in the community changed because of restrictions in access to land for farming, restrictions on who was allowed to farm, and looting.

Regarding farming as a livelihood, the highest proportion of assessed settlements that were reported to have less land available compared to last year was in Abadam (60%), Damboa (80%), Jere (57%) and Konduga (50%). In Dikwa, Guzamala, Gwoza and Kukawa the proportion of assessed settlements in which the access to land was less or the same as the previous year was about even (between 24-47%). The highest proportion of assessed settlements that were reported to have access to the same amount of land was in Bama (50%), Kala/Balge (83%), Marte (60%) and Ngala (97%). Interestingly, it was reported that most people had access to more land in some assessed settlements in Abadam (30%), Guzamala (17%), Jere (29%) and Kukawa (17%). This may suggest that access to land varied between settlements. Although access to land may have changed compared to previous years, in almost all assessed settlements (95%), at least some people had reportedly planted and harvested in the previous season.

Sources of food and coping strategies

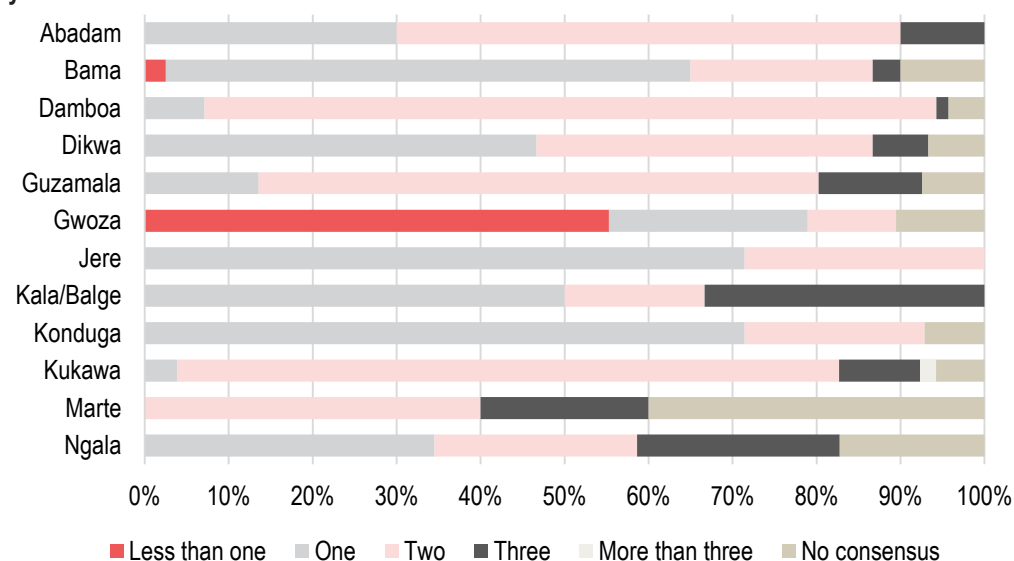
In most assessed LGAs, most people were reported to get their food from their own cultivation in the majority of assessed settlements (overall 56%). In Bama and Gwoza, the most commonly reported food source for most people in assessed settlements was foraging (60% and 58% of assessed settlements, respectively). Some IDI participants from these LGAs and Damboa reported that they were relying on foraging for wild food because their harvest was not large enough. As may be expected, given their closer proximity to urban areas, people in the majority of assessed settlements in Jere (100%) and Konduga (57%) were reported to get their food from buying it with cash.

In line with the apparent reliance on buying food with cash, Jere and Konduga were the only LGAs in which KIs from a majority of assessed settlements (100% and 64%, respectively) reported that people were able to access a market. Amongst the other LGAs, market access was reported in less than 35% of assessed settlements. Many IDI participants also reported that people did not have access to a market. The few who did report having access to markets reporting that they were either irregular markets, had higher prices than before the conflict, had restrictions on who could access the market and/or had less selection.

Suggestive of insufficient access to food, in the majority of assessed settlements in Bama (65%), Gwoza (79%), Jere (71%), and Konduga (71%) it was reported that most people ate one meal or less per day (see Graph 5). Of great concern, KIs from about half (55%) of assessed settlements in Gwoza reported people were eating less than one meal a day.

In all assessed LGAs, people were reported to be eating wild food that was not normally part of their diet in at least 10% of assessed settlements (overall 72%). The highest proportion of assessed settlements reporting

Graph 5: Proportion of assessed settlements by reported number of meals most people eat in a day, by LGA



Graph 6: Proportion of assessed settlements by reported coping strategies used, by LGA

	Consume wild foods	Limit meal size	Reduce number of meals	Borrow food or money	Consume less expensive food	Only children eating	Skip days without eating
Abadam	20%	50%	50%	40%	20%	70%	50%
Bama	90%	11%	9%	3%	9%	8%	12%
Damboa	90%	83%	86%	64%	84%	36%	3%
Dikwa	93%	27%	27%	27%	0%	33%	7%
Guzamala	9%	49%	40%	60%	15%	36%	17%
Gwoza	92%	49%	45%	9%	16%	43%	53%
Jere	71%	100%	100%	57%	57%	100%	100%
Kala/Balge	67%	33%	50%	33%	33%	33%	33%
Konduga	79%	79%	79%	57%	50%	79%	57%
Kukawa	25%	62%	52%	60%	50%	21%	10%
Marte	20%	40%	20%	20%	40%	0%	0%
Ngala	72%	17%	31%	0%	62%	17%	14%
Overall	66%	45%	42%	33%	32%	30%	21%

people eating wild foods was in Bama (92%), Damboa (93%), Dikwa (100%), Gwoza (96%), Konduga (100%) and Ngala (86%).

To cope with a lack of access to food and to find new sources of food, people were reported to have used a variety of other coping strategies (see Graph 6 for the most commonly reported strategies). Other reported coping strategies to find new sources of food included consuming seeds meant for planting or harvesting early (30% of assessed settlements in Abadam, 30% in Guzamala, 23% in Kukawa and 60% in Marte), sending children to eat with neighbours (30% in Abadam, 47% in Damboa, 20% in Dikwa, 14% in Guzamala, 100% in Jere, 50% in Konduga and 15% in Kukawa), selling home assets (10% in Abadam), hunting more than is normal for this time of year (17% in Kala/Balge and 10% in Ngala), fishing more than is normal for this time of year (10% in Abadam, 14% in Jere and 12% in Kukawa) and engaging in casual labour (30% in Abadam, 80% in Damboa, 29% in Jere, 57% in Konduga and 15% in Kukawa).

During the Cadre Harmonise (CH) conducted in March 2020, the last CH analysis in which inaccessible areas were separately classified, all of the inaccessible areas of the LGAs assessed in this report were classified in crisis level (phase 3) in terms of food security or emergency level (phase 4) for both the current period (March to May 2020) and the projected period (June to August 2020), with the exception of Jere where the inaccessible areas were not separately classified and the LGA was found to be in under pressure level (phase 2).⁷ The circumstances related to food security and livelihoods that were described by KIs and IDI participants across the assessed LGAs suggest that these areas continued to be experiencing severe food insecurity, although the findings in Bama, Gwoza and Konduga appear to be the most concerning overall.

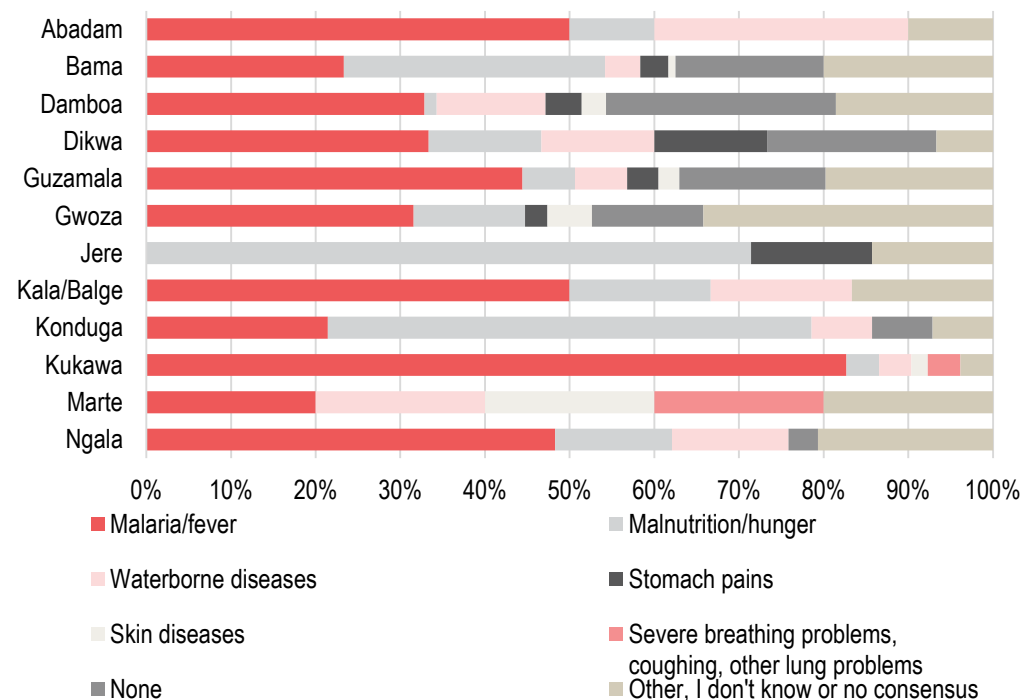
HEALTH

Access to functional health care services that people could reach within one day was reported to be limited in most LGAs (in 7% of assessed settlements overall). While in Gwoza and Kala/Balge LGAs, KIs from only 11% and 17% of assessed settlements reported access to health care, health care was reportedly accessible in all assessed settlements in Jere and in 65% of settlements in Konduga. Some IDI participants reported that people in the H2R settlement had access to health care or drugs from non-formal sources, unrelated to formalised health care. IDI participants, moreover, shared that in the absence of access to health care and/or drugs, many people relied on traditional medicine.

Indicative of pre-existing structural development challenges, in most assessed settlements that reported not having access to health care (93%), the main barrier to accessing health care was reported to be that the facilities were never there (overall 71%). Other reported barriers to accessing health care services were that the health facilities were destroyed by conflict (20% of assessed settlements in Abadam, 25% in Damboa, 29% in Dikwa, 31% in Gwoza and 14% in Kukawa), that there were no staff available (10% in Abadam and 11% in Ngala) and that the area was too insecure (11% in Gwoza).

As can be seen in Graph 7, overall the main health problem reported in most assessed settlements was malaria/fever (38%), followed by malnutrition (16%). Additionally, some assessed settlements reported there was no main common health problem (14%). The high proportion of assessed settlements for which malnutrition was reported to be the main health problem in Bama, Jere and Konduga LGAs appears to be reflected in the reporting on food security indicators in these areas.

Graph 7: Proportion of assessed settlements by reported most common health problem, by LGA



⁷ Final Fiche Report for Nigeria March 2020 Cadre Harmonisé (CH) Analysis

COVID-19

To monitor the development of COVID-19 in H2R areas and identify areas with potential outbreaks, REACH began including COVID-19 relevant indicators in the assessment in April 2020. Although other viruses and bacteria can cause the three main symptoms associated with COVID-19 (cough, fever, difficulty breathing),⁸ an increase in the reporting of these symptoms could potentially suggest a local COVID-19 outbreak in the respective H2R area. Overall, the proportion of assessed settlements where it was reported that anyone had symptoms related to COVID-19 was low. Coughing was reported as a symptom people had experienced in Abadam (30% of assessed settlements), Gwoza (12%), Jere (14%), Kala/Balge (17%) and Kukawa (15%). At least one person was reported to have fever and breathing difficulties concurrently in assessed settlements in Abadam (20% of assessed settlements), Kukawa (15%) and Marte (20%). Moreover, in assessed settlements in Abadam, people were reportedly experiencing breathing difficulties (10% of assessed settlements) and fever with coughing (10%).

The primary caretaker of sick persons within the H2R settlements was reported to be the mother or another female of the household in the majority of settlements in most LGAs (overall 72%). Exceptionally, in Abadam, Kala/Balge and Kukawa, in half or more of assessed settlements, other groups were reported to act as the primary caregivers for the sick. In Abadam, elder males were reported to be the primary caretakers in 10% of assessed settlements and other community members in 30% of assessed settlements. In Kala/Balge, elder females (17%) and other community members (17%) were reported to be the primary caregivers for the sick. In Kukawa, for 37% of assessed settlements, it was reported that the father or male of the household was the primary caregiver. Given the contagious nature of COVID-19, in the event of a local outbreak, primary caregivers would be at a high risk of contracting the illnesses themselves, suggesting that in many areas women may be at higher risk.

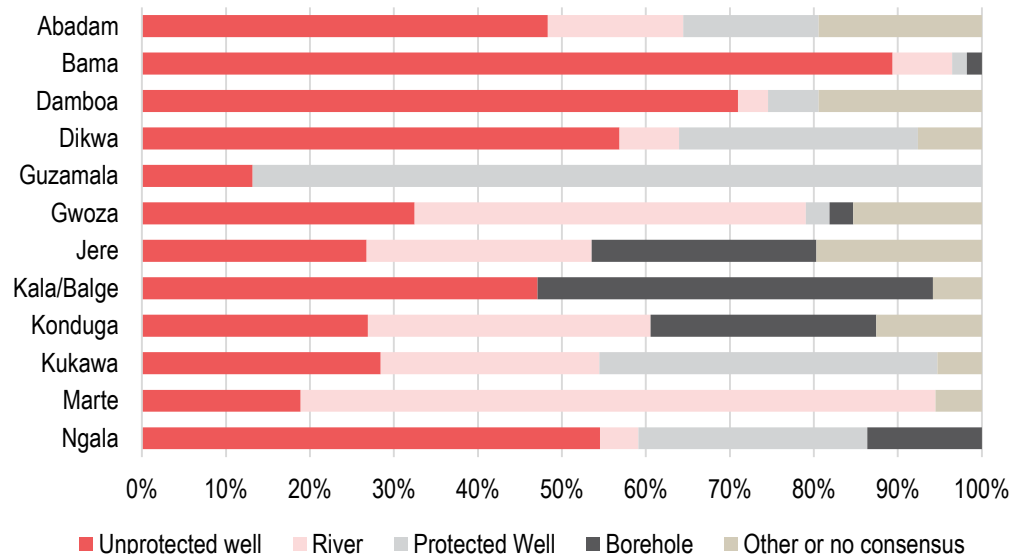
Similarly, to prevent the spread of COVID-19, separating those who are sick from other members of the community is key. In all assessed LGAs, less than 45% of the assessed settlements reported sick members of the community were isolated from others (overall 28%). Isolation practices seemed to be least common in some of the eastern Borno LGAs, as isolation was reportedly practiced in 7% of assessed settlements in Gwoza, 3% in Ngala, and 0% in Kala/Balge.

WATER SANITATION AND HYGIENE (WASH)

Indicative of limited access to clean water, the main water source was reported to be unprotected wells in half of the assessed settlements (overall 50%, see Graph 8). Possibly suggestive of better access to clean water, boreholes were reported to be the main water source in some assessed settlements in Jere (29%), Kala/Balge (50%), Konduga (29%) and Ngala (10%) and protected wells were reported as the main water source in some assessed settlements in Abadam (20%), Dikwa (27%), Guzamala (82%), Kukawa (33%) and Ngala (21%). The LGAs with the highest proportion of assessed settlements where it was reported that an unimproved water source was the main source seems to align with the LGAs with a higher proportion of assessed settlements where KIs reported that waterborne illnesses were the main health problem, such as Abadam and Marte.

KIs reported that it took less than 30 minutes to fetch water from the main water source in half of assessed settlements (overall 50%) and between 30 minutes to one hour in a quarter of assessed settlements (25%). It was reported that fetching water took between one hour and half a day in some settlements in Abadam

Graph 8: Proportion of assessed settlements by reported main water source, by LGA, March 2020



(10%), Bama (25%), Gwoza (11%), Jere (29%), Kala/Balge (17%) and Konduga (21%). Spending a longer period of time fetching water suggests that households have less access to water, which may also negatively impact their ability to practice hand-washing practices to prevent the spread of diseases, including COVID-19. Additionally, travelling for longer periods of time to fetch water increases the chance of interacting with others outside of the household along the way to the water point and at the water point, further increasing the risk of transmission.

In line with reported protection concerns and movement restrictions, security concerns were reported to limit people's ability to access their preferred water point in a high proportion of assessed settlement in Jere (100%) and Konduga (85%). Difficulty accessing water sources because of safety concerns was also reported in some assessed settlements in Abadam (30%), Bama (39%), Damboa (29%), Dikwa (47%), Gwoza (34%), Konduga (27%) and Marte (20%).

Some community members were reported to be using a latrine in 30% or more of assessed settlements in each LGA (overall 71%). The highest proportion of assessed settlements where this was reported were located in Bama (89% of assessed settlements), Damboa (99%), Kala/Balge (83%) and Konduga (79%). The lowest proportion of assessed settlements where it was reported some community members were using a latrine were located in LGAs that were considered "fully inaccessible", namely Abadam (30%), Kukawa (38%) and Marte (40%). Of settlements in which some people were reportedly not using latrines (61%), the main reason given for people not using latrines was that there was none available (overall 48%).

In about half of assessed settlements, it was reported that most people only use water for washing their hands (overall 55%). Soap was only reported to be used in some assessed settlements in Guzamala (14%), Jere (43%), Kala/Balge (17%), Konduga (29%) and Kukawa (12%). As substitutes for soap, assessed

⁸ [CDC website](#)

settlements reported people using ash (overall 14%) and sand (overall 12%). However, in Abadam, KIs from a relatively high proportion of assessed settlements (30%) reported most people were not washing their hands at all. IDI participants generally reported that people did not use soap because they could not access it due to the lack of markets, although a few shared that soap was available but prohibitively expensive. In the context of the COVID-19 pandemic, a lack of access to soap could have severe consequences, particularly in places with limited access to health care services.

SHELTER

Most community members were reported to be living in makeshift shelters in most LGAs (overall 61% of assessed settlements). In Abadam, Damboa, Guzamala, Jere and Kala/Balge in about half or more of assessed settlements, most community members were reported to be living in permanent house structures (50%, 83%, 60%, 43% and 43%, respectively). Most people were reported to be living without a shelter and sleeping in the open in 40% of assessed settlements in Abadam.

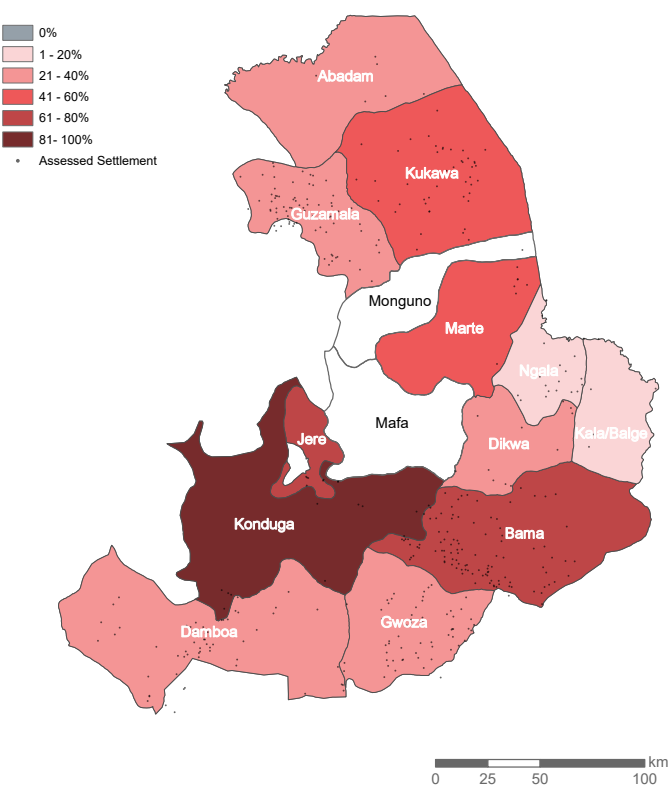
The the permanent homes and makeshift homes were generally reported to be located within the boundaries of the settlements (overall 60%). In some LGAs, however, most community members were reported to be living in the bush, away from their original homes (40% in Abadam, 38% in Bama, 25% in Gwoza, 14% in Jere, 17% in Kala/Balge, 15% in Konduga and 31% in Kukawa).

In at least 15% of assessed settlements in each LGA, KIs reported that some shelters were damaged or destroyed because of the conflict (see Map 4). The proportion of settlements reporting this was highest in Bama (68%), Jere (71%), Konduga (100%) and Marte (60%).

EDUCATION

The reported access to any education service that people could walk to varied greatly between the LGAs. Access to any education was least commonly reported in assessed settlements in Damboa (23%), Dikwa (20%), Guzamala (6%) and Kukawa (13%), while in Gwoza, Jere, and Konduga LGAs, access was reported

Map 4: Proportion of assessed settlements were it was reported that shelters were damaged or destroyed by conflict



in 76%, 71%, and 79% of assessed settlements, respectively. It should be noted that this indicator includes both formal and informal education.⁹

Overall, education was reportedly inaccessible in 65% of assessed settlements. The main reported reason for the lack of access in these settlements was that there were no education facilities nearby (58%). Facilities being destroyed by conflict was reported as the main reason for lack of access to education services in about a quarter of assessed settlement (overall 26%), and the proportion of assessed settlements for which this was reported was particularly high in Dikwa (67%), Gwoza (50%) and Jere (50%).

SOURCES OF INFORMATION

Sources of information were reported to be limited in most of the assessed LGAs. Radios were reported to exist in 66% of assessed settlements overall, with the lowest proportion of assessed settlements in which radios were reported in Abadam (30%), Dikwa (40%) and Marte (20%). Radio signal was similarly reported to be present in 68% of assessed settlements, with the lowest proportion of settlements in which radio signals were reported in Dikwa (40%) and Marte (40%). Of the settlements in which radios were reported to exist (overall 66%), KIs from 85% of assessed settlements reported community members have access to radios, with the lowest proportion of assessed settlements in which this was reported in Gwoza (45%).

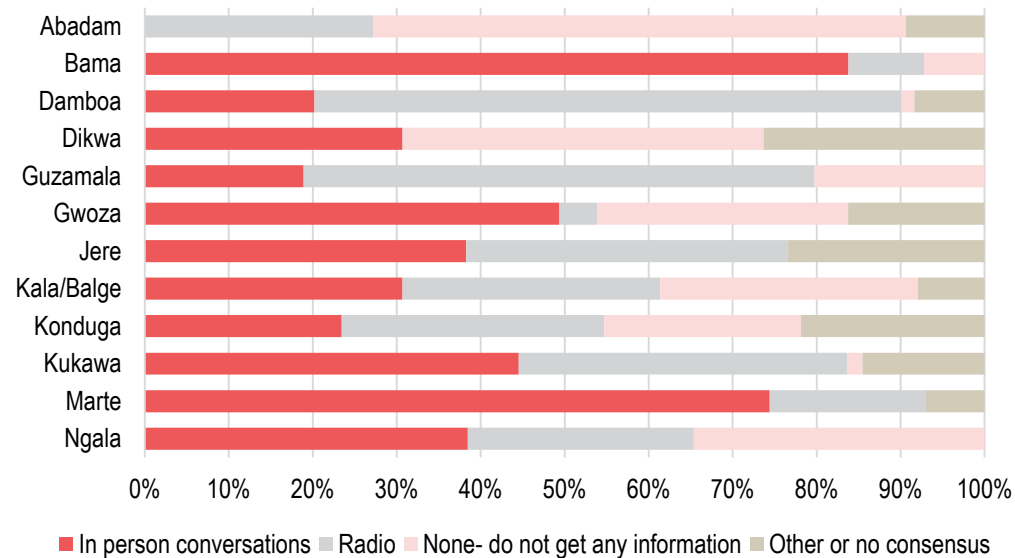
The existence of cell phones was reported in a much lower proportion of assessed settlements compared to radios (overall 21%). Cell phones were most commonly reported to be present in assessed settlements in Jere (57%), Kala/Balge (50%) ad Konduga (71%). No settlements or almost no settlements were reported to have cell phones in Damboa (6%), Dikwa (0%), Guzamala (5%), Marte (0%) and Ngala (7%). Cell phone signal was reported to be even more limited than radio signal, with only 13% of assessed settlements overall reported to have a cell phone signal. Only a small percentage of assessed settlements in Abadam (10%), Bama (20%) and Gwoza (18%) were reported to have a cell phone signal. However, half or more than half of assessed settlements in Jere (57%), Kala/Balge (50%) and Konduga (71%) were reported to have access to cell phone signals. Across all assessed settlements with reported presence of cell phones (21%), KIs from only 40% of settlements reported that community members were able to use their cell phones.

The main source of information was reported to be in-person conversations in about half of assessed settlements (overall 42%, see Graph 9), this was particularly commonly reported by assessed settlements in Bama (78%) and Marte (80%). KIs from about a third of assessed settlements (30%) overall reported radio as the main source of information, most commonly in Damboa (64%) and Guzamala (56%). Overall, 15% of assessed settlements were reported to not have any source of information, with the highest proportion of assessed settlements reporting this in Abadam (70%) and Dikwa (47%).

In most assessed settlements it was reported that most people had difficulty accessing the information they needed on humanitarian assistance (overall 78%). The exception was in Jere, where people in none (0%) of the assessed settlements were reported to difficulty accessing the information they needed regarding humanitarian affairs. Of assessed settlements that reported difficulty accessing information on humanitarian assistance (78%), most reported that it was because the security situation prevented information from coming through (74%) and in about a quarter (22%) of these settlements it was reported that the main reason was that there was no mobile network.

⁹ Formal schooling includes all education service delivery based on curricula developed and endorsed by National government.

Graph 9: Proportion of assessed settlements by reported main information source, by LGA



Information on COVID-19

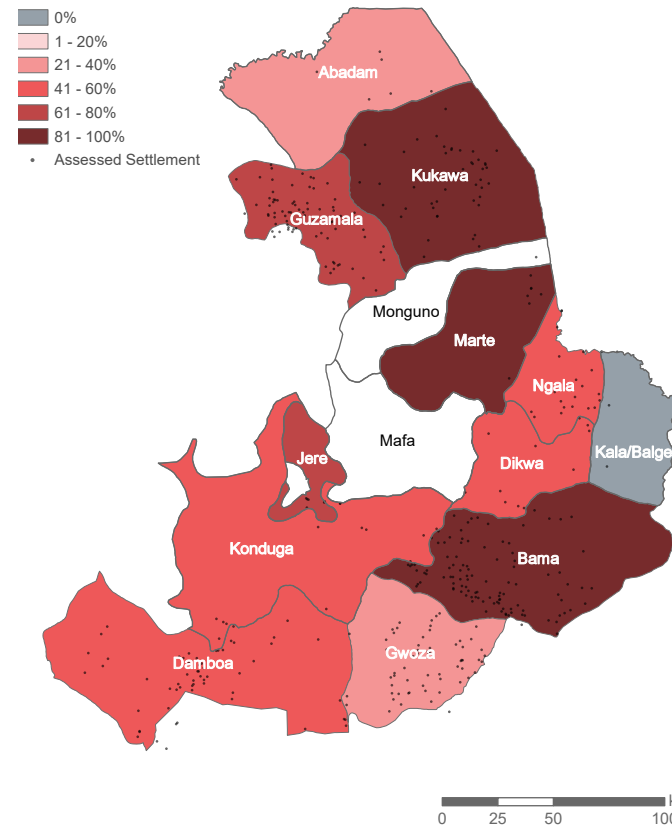
Understanding how COVID-19 is spread and the symptoms related to it are key to reducing community transmission. The proportion of assessed settlements where it was reported that people have heard about COVID-19 varied greatly by LGA (overall 64%, see Map 4). The lowest proportion of assessed settlements in which people were reported to have heard of COVID-19 was in Abadam (30%), Gwoza (29%) and Kala/Balge (0%). The highest proportion of assessed settlements where people were reported to have heard of COVID-19 was in Kukawa (96%) and Marte (100%). Given the “fully inaccessible” nature of Kukawa and Marte, the reported widespread knowledge of COVID-19 suggests that, although humanitarian actors can not access these areas, information can reach the area.

For assessed settlements where it was reported that people had heard about COVID-19 (64%), the most commonly reported main source of information on COVID-19 was radio (in 61% of assessed settlements), followed by community members (11%). In about half of the assessed settlements (52%), other sources of information were reportedly the main information sources.

When asked about the kinds of information people had about COVID-19, KIs from most assessed settlements where people had reportedly heard of COVID-19 (64%) reported that people knew how to protect themselves from the disease (overall 79%), the symptoms (83%), how it is transmitted (72%), risks and complications of COVID-19 (59%) and in half of assessed settlements people were reported to know what to do if someone has symptoms (50%).

People in the majority of assessed settlements were reported to have received some information regarding the situation in IDP camps (69%). The most commonly reported information concerned the availability of humanitarian services (47% of assessed settlements), information related to COVID-19 in the camps (24%) and safety and security in the camps (19%). The relatively high proportion of assessed settlements with

Map 4: Proportion of assessed settlements where it was reported that people were aware of COVID-19



The combination of a lack of access to health facilities, soap and means of communication, along with the reported indications of food insecurity and health problems, is particularly concerning given the potential risk of COVID-19 spreading to H2R areas in Borno state. Although people in a most H2R settlements were reportedly likely to be aware of COVID-19, people in a considerable 36% of assessed settlements had reportedly not heard of COVID-19 at the time of data collection.

The findings in this situation overview are indicative of severe humanitarian needs in the H2R areas of Borno state, related to the reported impact of the protracted crisis and suggested historical lack of access to services. Continued monitoring of these areas is required to provide the information needed to inform the humanitarian response.

About REACH

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CONCLUSION

The information shared in KI interviews and IDIs suggest a lack of access to basic services, stressed food security and severe protection concerns. Comparatively, Abadam, Jere, and Konduga were reported to have more severe protection concerns, Bama, Gwoza and Konduga to have more severe food security and livelihood concerns, and Abadam and Marte to have less access to services and infrastructure related to health, WASH, shelter and communication. Compared to other LGAs, access to basic services and infrastructure appeared to be relatively better in settlements in Jere and Konduga.