

2021 MSNA BULLETIN

KEY FINDINGS

October 2021
Northeast Nigeria

MULTI-SECTOR NEEDS ASSESSMENT (MSNA) OVERVIEW

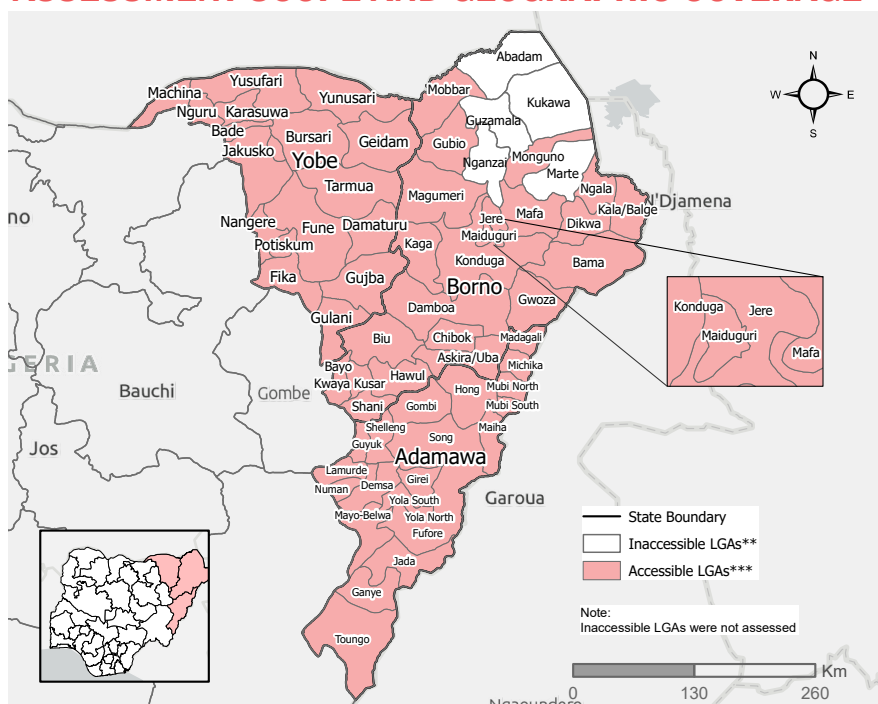
Context

Northeastern Nigeria continues to experience significant humanitarian needs, with the conflict emanating from the Lake Chad region now entering its 12th year. The 2022 Humanitarian Needs Overview (HNO), which drew on the data collected for this MSNA, identified 8.7 million persons in need across the states of Borno, Adamawa and Yobe (collectively known as the "BAY" states)¹. Insecurity remains a perennial challenge, and humanitarian partners have seen their access to vulnerable communities diminish with every passing year. The widening information gap was further exacerbated by the COVID-19 pandemic in 2020 and 2021, which shrunk the scope of in-person data collection. With diminished access and less in-person data collection, accurate and timely data in the BAY states is in short supply, hampering the response's understanding of the dynamic and highly volatile needs of the populations that reside there². In response to the widening information gap, REACH, under the aegis of the Inter-Sector Coordination Group (ISCG), and in close collaboration with the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and partner organisations, is supporting the Assessment and Analysis Working Group (AAWG) in actualising the MSNA in Northeast Nigeria. The objective of the assessment is to identify the cross-cutting needs of non-displaced communities, internally displaced persons (IDPs) and returnees across the Borno, Adamawa and Yobe states.

Methodology

Primary data was collected at the household level between August 2nd and October 2nd. In total, 9267 household surveys were conducted in 60 LGAs out of 65 LGAs in the BAY states. A mixed-method data collection strategy was employed. Depending on the feasibility, data was collected in-person, partner-assisted, or remote; in that order of preference. All inaccessible areas were identified and excluded from the sampling frame. Where feasible, two-stage cluster sampling was applied in the accessible areas. Where this was not possible, a simple random sampling approach was taken. The latter approach is leveraged where the only accessible area in an LGA comprises a garrison town. The target precision for the assessment is a confidence interval of 95% and a margin of error of 12.5%. Due to the insecure and volatile nature of the region, aggregated results for Adamawa state are indicative only. While findings for Borno and Yobe states are generalisable at state level. The full methodology overview is available [here](#)

ASSESSMENT SCOPE AND GEOGRAPHIC COVERAGE



Assessment sample

Households:	9,267
- IDP:	1,917
- Non-Displaced:	4,639
- Returnee:	2,705

NOTE: Further analysis could be useful to investigate further why FSL does not appear amongst the main key drivers of vulnerabilities. It could be explained by the fact that most indicators previously chosen were focused more on livelihoods than specifically on food security. **Nonetheless, food is the first self-reported priority needs by assessed households** (see AAP section on P.4).

1. [OCHA Nigeria 2021 Humanitarian Need Overview March 2021](#)

2. [UNOCHA North-East Nigeria: Borno, Adamawa and Yobe states Humanitarian Dashboard Jan-Dec 2021](#)

** Inaccessible LGAs are LGAs not assessed

*** Accessible LGAs are LGAs assessed

MULTI-SECTOR NEEDS INDEX (MSNI): CRISIS-LEVEL SEVERITY

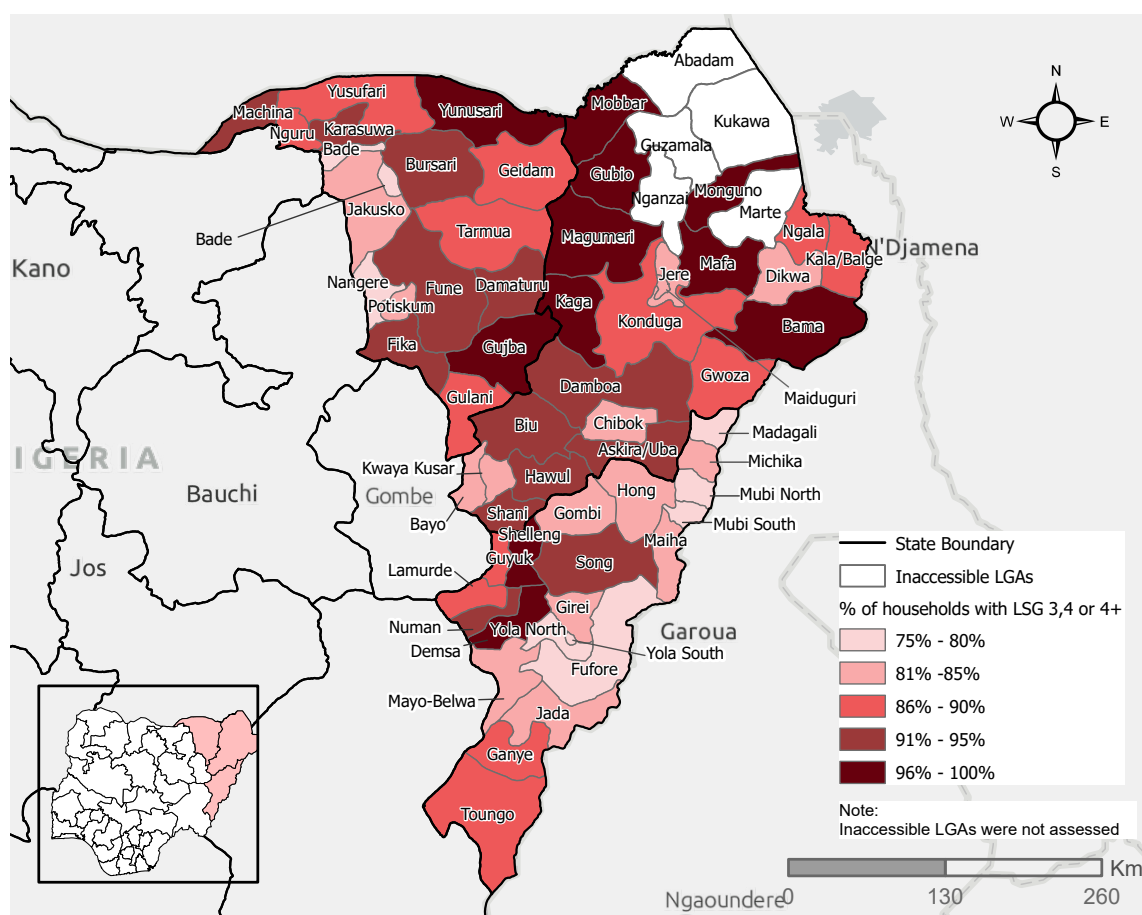
Percentage of households per severity phase:

In need	4 (Extreme)	37%
	3 (Severe)	54%
	2 (Stress)	8%
	1 (None/minimal)	1%

The MSNI is a composite indicator, designed to measure the overall severity of humanitarian needs of a household. It is based on the highest sectoral severity identified in each household and expressed through a scale of 1 to 4+. Sectoral severity is determined through the calculation of sector-specific composite indicators. The full methodology behind the calculation of the MSNI and individual sectoral composites, in accordance with the REACH Analytical Framework Guidance, can be found [here](#)

HOUSEHOLDS IN NEED BY GEOGRAPHICAL AREA

Percentage of households with an MSNI severity score of 3 or higher, per geographical area:



MSNI SEVERITY PHASE BY POPULATION GROUP

Percentage of households per group and severity phase:

	4	3	2	1
IDPs	58%	39%	3%	0%
Non-Displaced	27%	61%	11%	1%
Returnee	39%	51%	9%	1%

While assessed households in each of the population groups were found to have multi-sectoral needs, **multi-sectoral needs were most commonly found among IDP households, 96% of whom had an MSNI of 3 or higher.**

UNPACKING THE MSNI: AREAS AND GROUPS WITH THE HIGHEST NEEDS

- **Magnitude of needs:** Across Borno, Adamawa, and Yobe state, multi-sectoral needs were found in the vast majority of households (92%, 85%, and 95% respectively). It is estimated that out of a total population of 13.1 million, about 8.7 million people were found to be in need³. At the LGA level, the findings indicate that the geographic concentration of households with multi-sectoral needs is mostly found in Borno state, followed by Yobe and Adamawa, respectively. Indeed, in 12 out of the 22 assessed LGAs in Borno, over 95% of households were found to have multi-sectoral needs. Yet while Adamawa and Yobe state have less LGAs with a very high proportion of households with multi-sectoral needs, the overall needs remain high, and both states have LGAs where more than 98% of households have multi-sectoral needs.
- **Severity of Needs:** The Nigerian humanitarian need overview reported a projected 31% of people with severity of needs³ in the Northeast. Extreme multi-sectoral needs mirror the geographic spread of the general multi-sectoral needs. In Borno state, 44% of households have extreme multi-sectoral needs, compared to 34% for Yobe state and 26% for Adamawa state. Beyond the averages, extreme multi-sectoral needs seem to vary considerably across LGAs, ranging from 96% of households in Yunusari LGA to 7% in Numan LGA. While there are LGAs that go in against the grain of this pattern, there appears to be a relation between the proportion of households facing extreme multi-sectoral needs and the inaccessibility of certain areas, which in turn is largely driven by insecurity, suggesting insecurity is a main underlying factor contributing to extreme needs.
- **Population of Interest & Geography:** While both the magnitude and severity of needs are high, the multi-sectoral needs for the IDPs population group in Borno state (97%), Yobe (96%) and Adamawa (94%). While Population group for Returnee multi-sectoral needs were high in Yobe (96%), Borno (93%) and Adamawa (81%). For the non-displaced population, multi-sectoral needs are highest in Yobe state (94%), followed by Borno state (87%), and then Adamawa state (86%). Overall, the population group of IDPs in Borno state (60%) have the highest extreme needs, with Yobe state (45%) and Adamawa state (34%). For returnees, Yobe state is (49%), Borno state (46%) and Adamawa (20%) are in extreme need. While for non-displaced, Yobe state (31%) was found to have the highest extreme needs. With Adamawa state (27%) and Borno state (25%). This could be a result of challenges faced by persistent insecurity, restriction of movement, and shortfall in funding⁵.

UNDERSTANDING KEY DRIVERS AND VULNERABILITIES

- The key driver of the **multi-sectoral needs across the BAY states comprises WASH-related needs**. In decreasing order of prevalence, **multi-sectoral needs are driven by Cash & Early Recovery & Livelihoods (ERL)-related needs, Protection-related needs, Health-related needs, Food Security and Livelihood⁶- related needs, Shelter and Non-food Items (SNFI) related needs and Education-related needs**. Extreme needs are similarly driven by WASH, CASH & ERL and protection. The prevalence of WASH and CASH-related multi-sectoral needs and extreme needs spans all states and all population groups, with SNFI-needs being more pronounced amongst IDPs.
 - The most common needs profile in the BAY states is the WASH-only needs profile. Split by state, this holds true in Borno and Adamawa, while Yobe's most common needs profile is the WASH and Health combination. OCHA situation report, reported new cases of cholera outbreak as a result of weak health and WASH system⁴. Remarkably, **findings for populations of interests are largely similar, where WASH-only and WASH and HEALTH are the prime needs profiles for non-displaced populations and returnees in Borno, Adamawa, and Yobe state**. Only IDPs and non-displaced populations in Borno tend to have different top needs profiles: WASH and SNFI, and WASH and Protection respectively.
 - The proportion of assessed households who reported having resorted to any coping mechanism was found to be highest in Yobe (34%) while Borno (31%) and Adamawa (22%) and among are IDPs (38%), particularly IDPs in Borno state (39%).
- While findings suggest households across the BAY states employed a wide range of coping mechanisms, are employed by households in the BAY states, **the top 3 most frequently used ones were to borrow money, to purchase food on credit, and to rely on household savings**. This holds true in Borno, Yobe and Adamawa States respectively, as well as across populations of interest: IDPs (73%, 71%, and 52%), non-displaced populations (61%, 49%, and 60%), and returnees (67%, 56%, and 56%). While savings and borrowing invariably emerged as the most prevalent coping mechanisms, it is noteworthy that other, arguably more structurally damaging coping mechanisms could already have been exhausted. To illustrate, 12% of assessed households in Yobe have already exhausted the coping mechanism of selling property, 8% have exhausted selling agricultural products, and 8% have exhausted the sale of assets. Lastly, for each single metric, assessed returnee households more commonly reported having already exhausted the strategy than IDP or non-displaced households, signaling that this population group in particular may be nearing a point where solutions have run their course, indicating an increased vulnerability to shocks and a likely escalation of humanitarian needs if the situation were to endure.
- About 23% of households in the BAY states have a member with at least one vulnerability. This is relatively well spread across the states (Borno: 24%, Adamawa: 19%, Yobe: 24%), and especially pronounced amongst returnees (31%), followed by non-displaced populations (22%) and IDPs (21%).

³ [Nigerian Humanitarian Needs Overview 2021](#)

⁴ [UNOCHA Nigerian Situation Report December 2021](#)

⁵ [UNOCHA North-East Nigeria: Borno, Adamawa and Yobe states Humanitarian Dashboard Jan-Dec 2021](#)

⁶ Further analysis could be useful to investigate further why FSL does not appear amongst the main key drivers of vulnerabilities. It could be explained by the fact that most indicators previously chosen were focused more on livelihoods than specifically on food security. Nonetheless, food is the first self-reported priority needs by assessed households (see AAP section on P.4).

Most common needs profiles, overall and by population group:

Population group	Cash & ERLs	WASH	Health	SNFI	Education	Protection	FSL
Overall (12%) ⁷							
IDPs (14%)							
Non-Displaced (13%)							
Returnee (10%)							

ACCOUNTABILITY TO AFFECTED POPULATIONS (AAP)

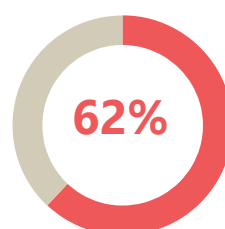
77% of assessed households in the BAY states who have severe or extreme multi-sectoral needs did not receive any form of aid in the 90 days preceding the assessment. This appears to be particularly pronounced in Adamawa state (94%), and amongst non-displaced households (94%). Indeed, 97% of non-displaced households with severe and extreme needs in Adamawa state, reported not having received any aid in the 90 days prior to the assessment. This pattern holds for extreme multi-sectoral needs as well, with as much as 98% non-displaced households in Adamawa state who have extreme multi-sectoral needs not having received any aid in the 90 days prior to the assessment. While the focus of the humanitarian response has been on Borno state, there is a risk of misalignment between the needs of populations and where the aid is allocated, with households facing severe and extreme multi-sectoral needs in Adamawa state and Yobe state receiving less aid than households facing the same magnitude of needs in Borno state (94%, 88%, and 70% respectively).

Of those households that have severe or extreme multi-sectoral needs, receive aid, and are dissatisfied (39%), **the vast majority (89%) are dissatisfied because the quantity of the aid is insufficient.** This pattern holds true across states and population groups, except for Adamawa state, where the prime complaint was that the aid received is not suitable for the needs.

Viewed in conjunction with the fact that the main needs profiles of households in Adamawa (WASH, Education, or a combination of WASH and Education), were dissimilar with those in Borno (WASH, WASH & SNFI, or WASH, SNFI, & Protection) and Yobe state (WASH & Health, only WASH, or only Health), it may suggest that household's needs and the type of aid allocation in Adamawa is misaligned as a result of the households' needs profiles being insuffi-

77% of households in need (i.e. households with an MSNI severity score of 3 or higher) reported that they **did not receive humanitarian assistance in the 90 days preceding the assessment.**

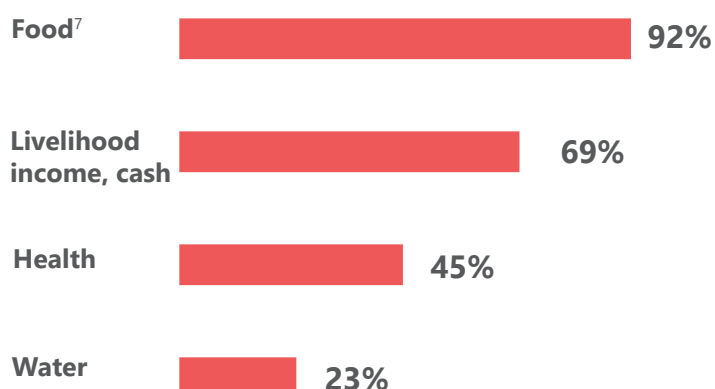
Satisfaction with aid received:



Of the 22% of households who reported receiving aid in the 90 days preceding the assessment, **62% reported being satisfied.** The top three reasons reported by households who were unsatisfied with the aid received:

- 1) Insufficient quantity of aid (87%)
- 2) Aid did not address the needs (20%)
- 3) The quality of aid is not good enough (18%)

% of households by self-reported priority needs:



Communication and dissemination:

Preferred communication channels:



Most trusted information source:



⁷ The figures noted in brackets in this table reflect the percentage of households with the most prevalent needs profile (overall and then disaggregated by population group).

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OCHA

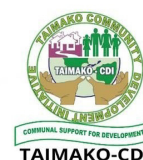
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About REACH: REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).