

NIGERIA

Area-Based Programming for Integrated Emergency Response and Recovery



PROJECT DESCRIPTION

Country: Nigeria

Project location: Yobe and Borno States, Northeast Nigeria

Disaster/Conflict: Refugee and IDP camps due to Boko Haram violence, and a cholera outbreak

Project Duration: 4 years, 2014 to 2019 (ongoing)

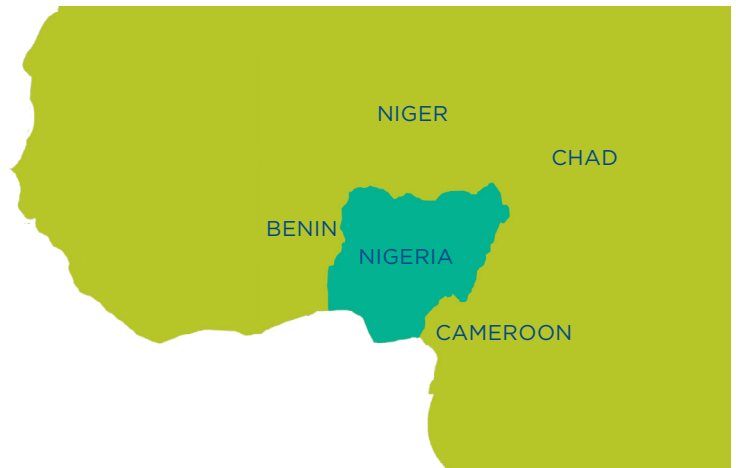
Target Population : 1.5 million displaced and host families

Project Budget (USD): 7,299,594.00

Cost per household (USD): Varied between \$37 and \$171, dependent on level of support

Donors: OFDA and Latter-Day Saints Philanthropies

Partners: Red Rose, NIRA, JDPC, NEYIF



What did CRS do?

CRS and partners worked together to deliver a holistic, area-based program which focused on improving water and sanitation conditions, but also delivered safe, dignified housing and livelihoods support for families to improve their income opportunities. Core achievements include:

Background

Since 2010, the Lake Chad Basin crisis has affected about 10.9 million people in one of the world's poorest, most drought-prone regions. Across Cameroon, Chad, Niger and Nigeria, Boko Haram has killed thousands of people, and 2.4 million have fled their homes. The violence has hindered farming, livelihoods and cross-border trade; prevented delivery of humanitarian assistance; and restricted people from accessing basic services in the four countries. In early 2019, the United Nations estimated that nearly 11 million people in the region require humanitarian assistance and, in Nigeria alone, more than 1 million children under age 5 were experiencing acute malnutrition.

In Nigeria since the onset of the crisis, the official coordination systems were not functioning well, so Local Area Coordination (LAC) groups managed by NGOs sprung up to respond to challenges in field-level coordination.

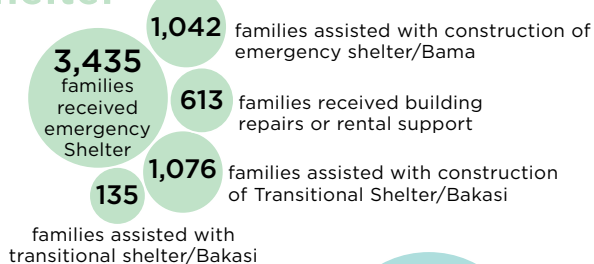
Working in 10 local government areas of Yobe state, CRS began providing a multisectoral emergency response in 2014, including water, sanitation and hygiene (WASH), polio and routine immunization, and emergency food assistance for conflict-affected communities. In July 2016, CRS launched operations in Borno State, providing vulnerable families with immediate relief through support of food, living supplies, WASH, and shelter.

Problem Statement

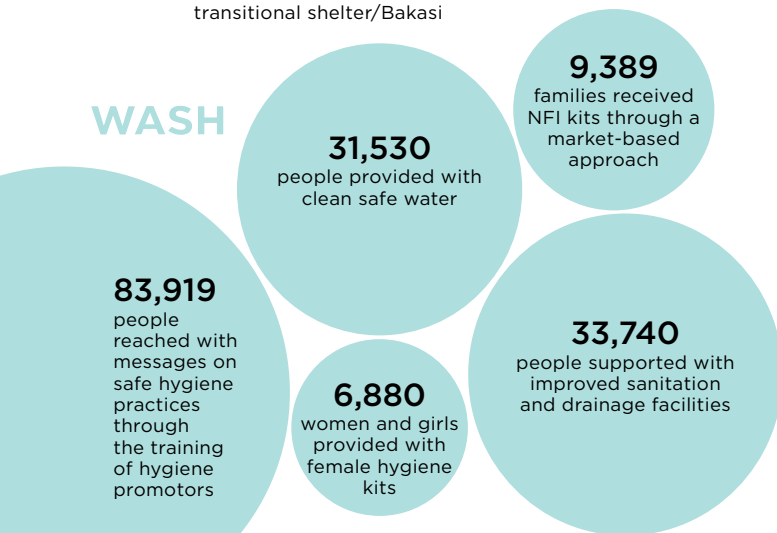
In 2014, only a small percent of the one million families in need of support in Borno State had been reached with emergency shelter assistance. While displaced families were constructing makeshift shelters using local materials such as wooden poles and grass, only a few had access to tarpaulins for roof cover, and few could withstand the heavy rain and windstorms in the rainy season. Other displaced families, especially in urban centers, lived in overcrowded, unfinished rooms, without roofs, locks, doors or windows. Many families were also seeking refuge in the crowded homes of host families.

At the same time, the sanitation infrastructures in both rural and urban areas were experiencing immense pressure by the increased population, resulting in outbreaks of cholera in 2017 and 2018. This highlighted the critical, life-saving need for improved water and sanitation facilities, and family knowledge of safer hygiene practices.

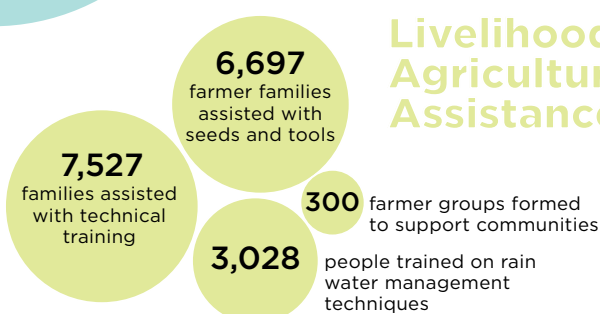
Shelter



WASH



Livelihoods / Agriculture Assistance



Project Process

The project built on CRS's existing work with similar populations in Yobe State. This holistic approach with comprehensive activities sought to ensure that the most vulnerable families in the target communities were able to meet their basic needs, with equity and protection of residents, and that the efforts also helped to support the recovery of the local market. Families who registered to receive assistance as part of this project also received food from other donors or through coordination with other actors, allowing them to engage with shelter, WASH and agriculture projects.

WASH Response

The Water, Sanitation and Hygiene component revolved around improving safe access to clean water and hygienic toilet and bathing facilities. These physical improvements were supported by a comprehensive package of hygiene promotion that was essential given the high incidence of diarrheal diseases, malaria, Lassa fever, meningitis and measles, and the risk of cholera. CRS and partners carried out promotion efforts through door-to-door visits, Focus Group Discussions, and hygiene clean-up campaigns.

Shelter Response

Across the region and especially within the town of Maiduguri, displaced families were constructing makeshift shelters with whatever local materials they could find—including wooden poles and grass matting for the walls and roofs—with some families gaining access to tarpaulins for roof cover. Rapid assessments identified stagnating flood waters, strong winds and high temperatures as conditions to be addressed. The emergency shelter program supported families with specific supplies and support in order to create a more dignified, healthy and safe living environment.

In response to the challenges that vulnerable groups identified, CRS needed to provide a flexible range of solutions to respond appropriately to varied needs and customs. This resulted in the following 'menu' of context-specific and progressive options.

	Self-constructed Emergency Shelter	Construction of Modified Bama Emergency Shelter	Contractor constructed Bakasi Transitional Shelter
Criteria	Families in makeshift shelters	Families who had been in emergency shelters	Vulnerable families who were living in 'Bama'
Materials	Plastic sheet (6mx4m)Nylon rope (37m x 10mm) 6 wooden ground stakes	Tarpaulin, straw matting, wooden posts. Can have doors, windows added by family	Wooden post and wall frame covered with tarps for wall and CGI for roof
Design	Sheet for making shelter water and wind resilient. Can be easily moved	Greater floor area and thermal insulation, improved ventilation and security	Increased roof height, privacy wall at door and moved door to side

For Bakasi homes, CRS had a service agreement with preselected contractors, and predetermined cost of materials and labor.



In Maiduguri, NE Nigeria, Kyellu Musa is staying in a transitional shelter distributed by CRS for people who have been displaced by Boko Haram's violence. Each household receives an electronic voucher from CRS, which they can also use to purchase food and household supplies in local markets.

Photo: Michael Stulman / CRS

Construction Training and Technical Assistance

Capacity building in Build Back Safer construction techniques enabled families to build more durable covered living spaces while respecting local construction practices. Technical engineers oversaw the construction of demonstration emergency shelters in each community, from which community members could see, learn and ask about best practices. Families opting for self-construction received technical support. The foremen and carpenters were equipped with relevant construction techniques and skills, and played a key role in supervision and construction of emergency shelters. When possible, CRS' technical assistance included the encouragement to families to consider moving to areas less prone to floods, and that were safer and better protected from strong winds.

Rehabilitation of Host Family Houses in Exchange for IDPs' Free Rent

Instead of living in makeshift and transitional shelters, some families were paying monthly rent to a host family. The families who were seeking refuge were supported by CRS through rental subsidies, while the host families benefited from CRS assistance with repair/improvements made to their homes.

Assessments on existing buildings, including host families' properties, showed that many lacked doors and windows, and had heavily damaged roofs and cracked walls. CRS conducted technical assessments on each identified house to determine the extent of repairs needed, and developed specific Scopes of Work and Bill of Quantities for each room or aspect in need of repair. CRS then negotiated agreements between host families/landlords and the displaced families, whereby rehabilitation works are carried out by preselected contractors in exchange for rent-free occupancy for at least 2 years.

Housing, Land and Property Considerations

Based on protection mainstreaming and "Do No Harm," CRS led negotiations and agreements with private landowners. Agreements were signed with land owners and landlords so as to safeguard the interest of displaced vulnerable families. The HLP Specialist also carried out regular trainings on a wide range of topics for landowners, rights-holders and duty bearers in each of the target communities.

Cash Based Responses

CRS provided a mix of in-kind distributions as well as the use of a “multi-wallet” e-vouchers using the Cash and Asset Transfer (CAT) platform. In areas with functional markets, CRS provided e-vouchers for the purchase of essential items. E-voucher cards were topped up with a one-time e-voucher value for WASH and shelter materials. To ensure that families purchased recommended items, the voucher was split into two wallets: one compulsory and one optional. The compulsory list contained items deemed essential, such as mats, a cooking set, blankets, underwear, jerry cans, bucket with lid, solar rechargeable torch and soap. Optional items included: child toilets, plastic kettles, basin, bucket with lids, and 100 L water storage drum, mats, mattresses, blankets, cooking set, basins for food preparation, and clothing.

Families also received a transportation allowance to help transport the items from the shops to their homes. The flexibility of the wallets allowed CRS to not only adjust the type of assistance provided to families (i.e., if some needs are met by other agencies within a given location), but also adjust based on safe access to a functioning market.

All participating families received a beneficiary card, which included the names of a primary and secondary family representative, as well as key demographic information.

In addition, the e-voucher system allowed CRS to link access to input to pre-requisite participation in other activities. For example, access to hygiene supplies could be activated after they participated in hygiene promotion activities.

All registration and distribution activities were preceded by conversations with relevant authorities, village leaders, and the general population for sharing information and transparency on program objectives, benefits, assistance modalities, monitoring and evaluation, targeting process, and available feedback and complaints mechanisms.

CRS used a pool of qualified registered vendors. As per CRS regulations, only shopkeepers who possessed the necessary paperwork, had a functional bank account and had been vetted were eligible to take part in CRS activities. All vendors sign a Code of Conduct and are trained and sensitized on their roles and responsibilities, penalties for non-respect of the contract, contractual obligations, transfer and payment modalities, do no harm, CRS Code of Conduct, and CRS’ feedback and complaints mechanisms.

Participant Selection

CRS carried out the participant selection and registration by using a single survey that assessed key indicators from family representatives about their food, nutrition, household items, livelihoods, shelter and WASH needs, as well as social vulnerabilities. CRS then applied each sector’s criteria to the beneficiary database to identify families eligible for various interventions. The selection of families was based on demonstrated needs, so a family could qualify to receive one or more type of support.

Specific family selection criteria included:

- Food security proxies: Food Consumption Score, Household Diversity Score and Coping Strategy Index;
- Multi-sectoral needs (shelter and livelihoods); and
- Dependency ratio: elderly, female, person living with a disability or child-headed family.

For shelter assistance, priority was given to families living in makeshift shelters, unfinished buildings, and those in congested spaces. For WASH assistance, geographical targeting was carried out using a set of indicators including low latrine coverage, distance to water collection points, access to clean safe drinking water and poor hygiene practices.

CRS conducted a random 10% sample validation of the selection and registration before the distribution of e-voucher cards.

Learning & Recommendations

- The Local Area Coordination leads were able to quickly coordinate a response to the cholera outbreak due to the pre-existing network where a clear sense of responsibility existed.
- LAC Terms of Reference should be formalized, in conjunction with and buy-in from implementing organizations, the local and state government, sector coordinators, and OCHA.
- It was essential to have a Program Manager who could focus on the coordination and implementation of the response as the highest priority.
- Crucial to the process was having specialist Information Management staff to maintain databases, coverage maps and activity plans/reporting.
- The use of maps at meetings — and collaborating with actors to improve maps — may help habituate actors to using these tools to improve coverage.
- Establishing geographical boundaries of operation by easily identifiable natural or man-made features — such as streams or roads — may facilitate geographic coverage in urban areas.
- Area Based Programming is possible if donors fund integrated programming, coordination and information management positions, NGOs invest in information management and have strong community engagement and multi-sector capabilities, or collaborate with others to provide sector specific services.

Acknowledgements

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