Response Option Analysis for Jere, Konduga and MMC (Borno)

WASH

September 2017

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Overview of the Process

PHASE I	Step	Participants	Time required
	1. Validation of assessment findings and recommendations for report revision	Session facilitator; Data analyst/report writer; Sector experts; Information management officers	3-4 hours per sector
	2. Revision of assessment reports	Data analyst / report writers	2 weeks (not on a full time basis)
	3. Identification and profiling of the most affected groups by LGA	Session facilitator; Sector experts; Information management officers; Protection experts	1 hour per sector
	4. Agreement that lack of purchasing power is among the underlying factors	Session facilitator; Sector experts; Information management officers	30 minutes
	5. Definition of sector-specific objectives of assistance	Session facilitator; Sector experts; Information management officers	1 hour per sector

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CaLP The Cash Learning Partnership | DRC Danish Refugee Council | Mercy Corps | OCHA | Save the Children

PHASE II

Step	Participants	Time required
1. Identification of response options not accepted by local/national authorities	Session facilitator; Sector experts; Information management officers; Cash experts	15-30 minutes
2. Identification of response options based on needs and objectives	Session facilitator; Sector experts; Information management officers; Cash experts	1.5 hours
3. If/when cash is proposed, compare CTP modalities	Session facilitator; Sector experts; Information management officers; Cash experts	1.5 hours
4. If/when cash is proposed, how much should be transferred	Session facilitator; Sector experts; Information management officers; Cash experts	2 hours
5. If/when cash is proposed, compare available transfer mechanisms	Cash experts	1 hour
6. Comparative analysis of sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	1.5 hours
7. Weighted scoring of sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	30 minutes
8. Final recommendations on sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	30 minutes

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PHASE III	Step	Participants	Time required
	1. Presentation of the sector plans and putting together the assistance package by group/location	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1.5 hours
	2. Identification of potential synergies across sectors	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour
	3. Agreement on appropriateness of MPG for recurrent expenditures	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour
	4. Estimation of MPG value based on recurrent sector expenditures	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour
	5. Adjustment of the response options based on agreement of where MPG can be used	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour
	6. Consideration of cross-sector themes for selected response options	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	2 hours
	7. Decision on sectoral one-off transfers, amount and timing	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour
	8. Final recommendations	Session facilitator; Sector experts; Information management officers; Cash experts; Protection experts	1 hour

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Phase I. Setting sector objectives and targets

Step	Participants	Time required
1. Validation of assessment findings and recommendations for report revision	Session facilitator; Data analyst/report writer; Sector experts; Information management officers	3-4 hours per sector
2. Revision of assessment reports	Data analyst / report writers	2 weeks (not on a full time basis)
3. Identification and profiling of the most affected groups by LGA	Session facilitator; Sector experts; Information management officers; Protection experts	1 hour per sector
4. Agreement that lack of purchasing power is among the underlying factors	Session facilitator; Sector experts; Information management officers	30 minutes
5. Definition of sector-specific objectives of assistance	Session facilitator; Sector experts; Information management officers	1 hour per sector

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Step 1 Validation of assessment findings and recommendations for reports revision

Guidance

Objective / output	• Findings are validated or rejected and/or further explained • Recommendations for additional analysis to be conducted on available raw data (especially the Basic Needs Assessment) • Recommendations to re-draft/improve assessment reports (especially the Basic Needs Assessment)
Question to answer	What are the needs and the available local resources?
Actors to be involved	• Session facilitator, who should be familiar with all findings • (preferably) Data analysts involved in the assessments to be presented (or at least in the key ones) • Sector experts • Information management officers, particularly critical if data analysts of sector assessments are not available
Required inputs and resources	• Findings of specific sectors assessments (to be shared in advance by the sector experts) • Findings of basic needs assessment • Findings of service system assessment • Findings of market assessment • Findings of transfer mechanisms and financial service providers assessment, • Findings of capacity assessment • Findings of cash acceptance assessment
Available tool	NA
How to complete the step	1. Assessment reports to be compiled in advance by the facilitator 2. Presentation of findings of each assessment by relevant participant, to make everyone familiar 3. Discussion around key findings: ✓ Are they plausible according to the experts? ✓ If they are not plausible, what can be said instead? Why? ✓ Why do you think this is the situation? How can the findings be better explained (why and how)? ✓ Looking at the row data (when available), what additional analysis you would like to be carried out? What would it help you understand? How would your sector use it? ✓ Any other observations? 4. List of recommendations to revise assessment reports

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Estimated time required	• 3-4 hours with each sector group, depending on number of assessments to be covered and familiarity of the participants with their findings
Notes	NA

b) Session participants

Name	Title	Organisation	Email

c) Working session output

See Nathalie Cissokho's mission report (CaLP, on behalf of the ERC-MPG Consortium), in Annex 2.

d) Lessons from pilot

Nothing to report.

Step 2 Revision of assessment reports

Guidance

Objective / output	Revised and finalised assessment reports
Question to answer	What are the humanitarian needs and the available local resources?
Actors to be involved	Data analysts/reports writers of all the assessments to be revised

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Required inputs and resources	Output of Step 1 in Phase 1
Available tool	NA
How to complete the step	It will depend on the outputs of Step 1in Phase 1
Estimated time required	Two weeks of work by data analysts/reports writers to revise the assessment reports according to recommendations
Notes	NA

b) Session participants

Name	Title	Organisation	Email

c) Working session output

This step has been added after the pilot in Borno, hence there is nothing to report.

d) Lessons from pilot

This step has been added after the pilot in Borno, hence there is nothing to report.

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Step 3 Identification and profiling of the most affected groups by LGA

a) Guidance

Objective / output	Table with number of households and individuals in each targeted administrative area, their respective needs ranked by priority/severity, and the specific protection concerns/issues affecting them
Question to answer	What are the priority needs, for which target groups, and where?
Actors to be involved	• Session facilitator, who should be familiar with all findings • Sector experts • Information management officers • Protection experts • **Optional**: Data analyst involved in the BNA
Required inputs and resources	• Basic needs assessment • Other sectoral assessment of the target population and their needs • Expertise/knowledge brought by protection experts
Available tool	**Error! Reference source not found.** **Error! Reference source not found.**
How to complete the step	1. Does it make sense to break down by LGAs? Would you like to focus on just 1 LGA? 2. Pull out tables with severity of needs from the BNA. 3. Which groups is the sector most interested in targeting? 4. Where? Who? How many? 5. What are the protection concerns affecting this group? 6. What do they need the most?
Estimated time required	1 hour with each sector group
Notes	This cannot start until assessment reports have been revised

b) Session participants

Name	Title	Organisation	Email

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c) Working session output

People of concerns/priority target for the entire 2018-19 response will be, in order of importance:

1. IDPs in any type of camps and IDPs in host community
2. Returnees (IDPs and/or refugees)
3. Host communities
4. People living in inaccessible areas (for contingency planning).

In WASH, the approach will be partly different, because most WASH services benefit a community/group: water points, latrines are communal in camps/community centres; the same goes for the IDPs living in host communities.

For **Sanitation,** these are the groups of concern:

1. IDPs (in any setting): The approach of the response will differ from one group to another, especially in host community setting.
2. Returnees: they may be in secondary displacement, if they cannot return to their home. If they go to a camp, then camp approach applies; if they go to communities where they originated from or a different community, then they apply the host community. IDPs renting rooms/houses are not targeted unless if they happen to live in a targeted host community by the WASH sector. Returnees returning to their home: semi-collective approach entails that the service/support is provided to a group of households; or household approach by supporting household latrine building. Depending on the setting, Shelter sector supporting shelter can also take on this activity
3. Host community: whenever possible they adopt a semi-collective approach to sanitation.

Hygiene promotion:

1. Blanket assistance in both camps and host communities settings→ very large scale: 1,854,106 individuals in Jere, Konduga and MMC

Hygiene commodities: they do not use SE vulnerability criteria; their approach is as follows:

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2. Blanket assistance to IDPs in camps and camp-like settings as a first priority → 6,482 HH / 35,539 individuals
3. Blanket assistance to IDPs in host communities, identified with DTM and community leaders → 103,204 HH / 604,153 individuals
4. Blanket assistance to returnees no matter if they go to a secondary displacement or return to their places of origin

Water

1. Sector works with government to ensure that communities have access to WASH services. Sector strategy does not prioritize working with/through water vendors to provide safe water. There several reasons to this including lack of capacity. Nonetheless the sector higher contractors (tanker owners) for water trucking. These contractors can be viewed as wholesale water vendors

Table 1: Population groups size

	Blanket targeting of sanitation interventions and access to potable water			
	IDPs in collective centres • Blanket; main priority for hygiene commodities	**IDPs in host communities** • Blanket; second priority for hygiene commodities	**IDPs in informal camps** • Blanket; main priority for hygiene commodities	**Residents**
Jere (households)	85	36,591	3,108	?
Konduga (households)	36	4,609	2009	?
MMC (households)	43	62,004	1201	?
Total (households)	**164 HH**	**103,204 HH**	**6,318 HH**	**?**
Jere (607,063)[1]	444	232,239	17,760	288,430
Konduga (188,177)[2]	242	27,367	10,646	213,811
MMC (1,030,217)[3]	220	344,547	6,227	712,173
Total (individuals)	**906 individuals**	**604,153 individuals**	**34,633 individuals**	**1,214,414 individuals**

[1] Source: Nathalie Cissokho's mission report, feedback from WASH sector.
[2] Source: Nathalie Cissokho's mission report, feedback from WASH sector.
[3] Source: Nathalie Cissokho's mission report, feedback from WASH sector.

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Table 2: Population group profiles

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	Source of information	Location	IDPs in collective centres	IDPs in host families	IDPs in informal camps	Residents (2016)
Severity of impact on group by LGA and sector (1 least severe – 5 most severe)	BNA (p.5)	Jere	3	4	4	3
		Konduga	3	3	3	3
		MMC	2	2	2	2
How many households?	DTM XV, only informal settlements	Jere	85	36,591	3,108	?
		Konduga	36	4,609	2009	?
		MMC	43	62,004	1201	?
How many individuals?	DTM XV, only informal settlements	Jere (607,063)[4]	444	232,239	17,760	288,430
		Konduga (188,177)[5]	242	27,367	10,646	213,811
		MMC (1,030,217)[6]	220	344,547	6,227	712,173
Protection concerns?	Protection experts, sector experts, other assessments	Jere Konduga MMC	**More severe issues of access to justice in Konduga.** Polygamy has to be taken into consideration when it comes to deciding who to give assistance.	Hosting family and IDPs know one another; they have higher social capital and can more easily access justice. **More severe issues of access to justice in Konduga.**	Access to justice: **more severe issues of access to justice in Konduga.** Restriction of movement within the camps; domestic violence; GBV and exploitation; discrimination against certain groups that are being neglected (e.g. people with disabilities). The highest concentration of Unaccompanied and separated children is in camps	
Priority needs (in order of preference) and identification of underlying cause (see graph below)	BNA, validated by sector experts	Jere	Food Shelter housing health commodities potable water hygiene commodities	Food Shelter housing health commodities potable water hygiene commodities	Food Health commodities potable water shelter commodities	Food shelter/housing potable water shelter commodities

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			household commodities	household commodities		
		Konduga	Food health commodities Healthcare services shelter commodities	Food shelter commodities health commodities shelter/housing	Food health commodities health care services shelter/housing	Food health commodities health care services
		MMC	Food potable water health commodities shelter/housing sanitation facilities	Food potable water shelter/housing health commodities	Food shelter/housing health commodities potable water	Food health commodities shelter/housing household commodities

[4] Source: Nathalie Cissokho's mission report, feedback from WASH sector.
[5] Source: Nathalie Cissokho's mission report, feedback from WASH sector.
[6] Source: Nathalie Cissokho's mission report, feedback from WASH sector.

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Underlying factor per group

Jere

IDPs in collective centres

Basic need	Finances	Transfer	Safety	Production	Reliability	Discrimination	Stock	Trade	Other	Diversity	Skills	Physical const..	Null
Food commodities	39%	22%	11%	7%	5%	6%	2%	3%	2%	1%	1%	1%	
Shelter/housing	39%	21%	12%	7%	6%	7%	1%	3%	3%	1%	0%	0%	
Health commodities	40%	24%	3%	3%	11%	3%	0%	7%	4%	7%	0%	0%	
Potable water	42%	17%	6%	12%	9%	2%	6%	4%	0%	1%	0%	1%	
Hygiene commodities	31%	22%	21%	8%	1%	9%	4%	2%	1%	0%	0%	0%	
Household commodities	36%	17%	18%	11%	1%	8%	2%	5%	1%	1%	0%	0%	
Shelter commodities	31%	25%	18%	11%	4%	2%	7%	2%	0%	0%	0%	0%	
Health care services	56%	17%	0%	11%	11%	6%	0%	0%	0%	0%	0%	0%	
Education services	42%	30%	0%	3%	15%	0%	0%	3%	0%	6%	0%	0%	
Other	39%	30%	17%	0%	0%	4%	0%	0%	4%	0%	4%	0%	
Education commodities	33%	33%	0%	0%	17%	0%	0%	17%	0%	0%	0%	0%	
Energy commodities	38%	31%	0%	8%	8%	0%	0%	0%	0%	8%	0%	8%	
Hygiene/ sanitation facil..	25%	25%	25%	13%	0%	0%	0%	13%	0%	0%	0%	0%	
Transport services	33%	0%	33%	33%	0%	0%	0%	0%	0%	0%	0%	0%	
Communication commodities	50%	50%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Communication services													

IDPs in host families

Basic need	Finances	Transfer	Safety	Production	Reliability	Discrimination	Stock	Trade	Other	Diversity	Skills	Physical const..	Null
Food commodities	36%	21%	12%	8%	6%	6%	3%	2%	4%	1%	1%	0%	
Shelter/housing	36%	19%	13%	11%	3%	8%	1%	2%	5%	1%	1%	0%	
Health commodities	38%	20%	6%	5%	12%	4%	5%	2%	4%	1%	4%	0%	
Potable water	37%	25%	4%	10%	12%	2%	1%	4%	0%	1%	2%	0%	
Hygiene commodities	34%	20%	12%	13%	0%	9%	5%	2%	5%	1%	1%	0%	
Household commodities	28%	23%	20%	10%	0%	6%	2%	1%	10%	0%	0%	0%	
Shelter commodities	33%	30%	5%	7%	8%	2%	5%	7%	3%	0%	2%	0%	
Health care services	38%	14%	3%	17%	7%	7%	3%	0%	3%	3%	3%	0%	
Education services	42%	29%	0%	5%	16%	0%	0%	3%	0%	3%	3%	0%	
Other	39%	26%	9%	9%	0%	13%	0%	0%	4%	0%	0%	0%	
Education commodities	33%	22%	0%	11%	11%	0%	11%	11%	0%	0%	0%	0%	
Energy commodities	40%	20%	0%	20%	0%	0%	20%	0%	0%	0%	0%	0%	
Hygiene/ sanitation facil..	33%	33%	33%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Transport services	0%	0%	33%	0%	0%	33%	0%	0%	0%	0%	0%	33%	
Communication commodities													
Communication services													

IDPs in tents

Basic need	Finances	Transfer	Safety	Production	Reliability	Discrimination	Stock	Trade	Other	Diversity	Skills	Physical const..	Null
Food commodities	40%	17%	12%	10%	5%	2%	5%	5%	1%	1%	0%	2%	
Shelter/housing	39%	22%	10%	13%	5%	3%	3%	1%	2%	2%	0%	1%	
Health commodities	35%	17%	7%	10%	10%	3%	4%	7%	1%	1%	2%	4%	
Potable water	42%	20%	6%	10%	4%	6%	3%	7%	1%	0%	0%	1%	
Hygiene commodities	37%	24%	10%	13%	0%	5%	10%	2%	0%	0%	0%	0%	
Household commodities	33%	16%	14%	9%	3%	8%	4%	6%	1%	1%	4%	1%	
Shelter commodities	37%	22%	13%	11%	4%	0%	8%	3%	1%	0%	0%	3%	
Health care services	46%	10%	8%	10%	12%	2%	4%	0%	2%	4%	2%	0%	
Education services	33%	33%	0%	0%	17%	0%	4%	13%	0%	0%	0%	0%	
Other	55%	18%	5%	5%	9%	0%	0%	0%	9%	0%	0%	0%	
Education commodities	31%	24%	7%	3%	10%	7%	3%	7%	0%	3%	0%	3%	
Energy commodities	0%	10%	20%	20%	10%	0%	10%	10%	0%	0%	0%	20%	
Hygiene/ sanitation facil..	33%	33%	0%	33%	0%	0%	0%	0%	0%	0%	0%	0%	
Transport services													
Communication commodities	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Communication services													

Residents

Basic need	Finances	Transfer	Safety	Production	Reliability	Discrimination	Stock	Trade	Other	Diversity	Skills	Physical const..	Null
Food commodities	39%	17%	13%	9%	5%	4%	4%	3%	2%	1%	1%	2%	
Shelter/housing	39%	21%	16%	0%	10%	7%	2%	1%	2%	0%	1%	0%	
Health commodities	34%	16%	9%	11%	8%	2%	4%	6%	2%	2%	4%	2%	
Potable water	40%	8%	12%	12%	7%	7%	5%	6%	2%	1%	0%	0%	
Hygiene commodities	34%	22%	21%	12%	0%	4%	5%	1%	1%	0%	0%	0%	
Household commodities	40%	10%	26%	16%	0%	2%	2%	2%	0%	0%	0%	2%	
Shelter commodities	31%	30%	10%	11%	9%	1%	7%	1%	0%	0%	1%	0%	
Health care services	36%	14%	11%	22%	0%	6%	6%	3%	0%	0%	0%	3%	
Education services	32%	20%	8%	4%	8%	4%	0%	12%	0%	4%	8%	0%	
Other	44%	20%	20%	4%	4%	0%	0%	4%	4%	0%	0%	0%	
Education commodities	42%	17%	8%	4%	13%	8%	0%	8%	0%	0%	0%	0%	
Energy commodities	50%	50%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Hygiene/ sanitation facil..													
Transport services													
Communication commodities													
Communication services													

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Underlying factor per group

Konduga

Basic need	IDPs in collective centres													IDPs in host families												IDPs in tents												Residents											
	Safety	Finances	Physical const..	Transfer	Production	Discrimination	Trade	Stock	Diversity	Other	Skills	Reliability	Null	Safety	Finances	Physical const..	Transfer	Production	Discrimination	Trade	Stock	Diversity	Other	Skills	Reliability	Null	Safety	Finances	Physical const..	Transfer	Production	Discrimination	Trade	Stock	Diversity	Other	Skills	Reliability	Null	Safety	Finances	Physical const..	Transfer	Production	Discrimination	Trade	Stock	Diversity	Other	Skills	Reliability	Null
Food commodities	35%	33%	8%	8%	4%	2%	3%	4%	1%	0%	2%	1%		31%	34%	10%	13%	1%	2%	1%	7%	1%	0%	0%	1%		43%	27%	9%	3%	5%	3%	4%	3%	1%	1%	0%	1%		43%	25%	10%	4%	2%	5%	4%	1%	1%	1%	2%	0%	
Health commodities	44%	28%	1%	8%	6%	0%	4%	0%	1%	6%	0%	1%		41%	29%	2%	10%	6%	2%	4%	0%	0%	2%	4%	0%		52%	25%	3%	2%	3%	2%	8%	2%	0%	0%	2%	2%		67%	17%	2%	4%	4%	0%	2%	0%	0%	2%	0%	0%	
Shelter commodities	26%	34%	14%	10%	3%	5%	0%	3%	2%	0%	0%	2%		24%	42%	10%	8%	4%	2%	4%	2%	0%	4%	0%	0%		35%	23%	10%	3%	10%	6%	3%	0%	0%	3%	6%	0%		37%	31%	3%	3%	6%	6%	6%	3%	6%	0%	0%	0%	
Shelter/housing	28%	28%	11%	13%	9%	6%	2%	0%	0%	2%	0%	2%		27%	33%	21%	9%	0%	0%	0%	9%	0%	0%	0%	0%		25%	29%	2%	12%	4%	10%	8%	6%	4%	0%	0%	2%		43%	25%	11%	7%	0%	4%	4%	4%	0%	4%	0%	0%	
Health care services	44%	12%	5%	5%	19%	2%	2%	0%	5%	2%	5%	0%		45%	27%	0%	5%	18%	5%	0%	0%	0%	0%	0%	0%		59%	20%	0%	2%	5%	7%	2%	2%	0%	0%	2%	0%		62%	27%	7%	0%	0%	2%	0%	0%	0%	2%	0%	0%	
Hygiene commodities	7%	47%	13%	7%	0%	13%	0%	7%	0%	0%	0%	7%		33%	33%	15%	11%	0%	0%	0%	4%	4%	0%	0%	0%		24%	26%	7%	7%	10%	5%	14%	2%	2%	0%	0%	2%		17%	20%	7%	7%	0%	17%	10%	13%	3%	0%	3%	3%	
Potable water	33%	29%	0%	13%	13%	4%	4%	4%	0%	0%	0%	0%		8%	42%	0%	25%	3%	0%	0%	19%	3%	0%	0%	0%		48%	21%	3%	3%	9%	6%	0%	3%	6%	0%	0%	0%		45%	25%	5%	5%	5%	10%	0%	0%	0%	5%	0%	0%	
Household commodities	26%	36%	16%	8%	4%	2%	2%	4%	0%	2%	0%	0%		19%	35%	19%	10%	3%	3%	0%	3%	0%	6%	0%	0%		43%	29%	14%	0%	0%	7%	7%	0%	0%	0%	0%	0%		50%	33%	8%	0%	0%	8%	0%	0%	0%	0%	0%	0%	
Education commodities														25%	25%	25%	25%	0%	0%	0%	0%	0%	0%	0%	0%		19%	25%	19%	13%	0%	13%	13%	0%	0%	0%	0%	0%		38%	23%	8%	0%	0%	8%	8%	0%	15%	0%	0%	0%	
Education services	43%	14%	0%	0%	0%	14%	14%	0%	14%	0%	0%	0%		0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		18%	27%	18%	9%	9%	9%	0%	0%	0%	0%	9%	0%		13%	38%	0%	0%	0%	38%	0%	0%	0%	13%	0%	0%	
Other	0%	33%	0%	33%	0%	0%	0%	17%	17%	0%	0%	0%		0%	33%	0%	33%	0%	0%	0%	33%	0%	0%	0%	0%		50%	0%	50%	0%	0%	0%	0%	0%	0%	0%	0%	0%		100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Hygiene/ sanitation facil..														20%	40%	0%	20%	0%	0%	0%	20%	0%	0%	0%	0%		20%	40%	0%	0%	20%	0%	0%	0%	0%	0%	0%	20%		25%	25%	0%	0%	0%	0%	25%	0%	25%	0%	0%	0%	
Energy commodities														0%	100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%														0%	25%	25%	25%	0%	0%	25%	0%	0%	0%	0%	0%	
Communication commodities																																							33%	0%	33%	0%	0%	33%	0%	0%	0%	0%	0%	0%	
Transport services																																							0%	0%	0%	0%	0%	100%	0%	0%	0%	0%	0%	0%	
Communication services																																																		

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Underlying factor per group

MMC	Basic need	IDPs in collective centres													IDPs in host families													IDPs in tents													Residents											
		Finances	Transfer	Safety	Trade	Production	Physical const..	Discrimination	Reliability	Stock	Skills	Diversity	Other	Null	Finances	Transfer	Safety	Trade	Production	Physical const..	Discrimination	Reliability	Stock	Skills	Diversity	Other	Null	Finances	Transfer	Safety	Trade	Production	Physical const..	Discrimination	Reliability	Stock	Skills	Diversity	Other	Null	Null	Finances	Transfer	Safety	Trade	Production	Physical const..	Discrimination	Reliability	Stock	Skills	Diversity	Other	Null
	Food commodities	41%	20%	11%	10%	4%	9%	1%	2%	0%	1%	2%	0%		42%	17%	10%	16%	3%	7%	2%	0%	1%	0%	1%	0%		41%	13%	13%	14%	10%	3%	5%	0%	0%	1%	0%	0%			39%	15%	15%	11%	6%	8%	2%	1%	1%	2%	1%	0%	
	Potable water	29%	25%	15%	10%	9%	8%	0%	2%	2%	0%	1%	0%		29%	23%	15%	13%	5%	10%	1%	2%	2%	0%	0%	0%		32%	19%	22%	3%	8%	3%	5%	5%	3%	0%	0%	0%			22%	17%	14%	6%	19%	3%	0%	3%	6%	11%	0%	0%	
	Shelter/housing	44%	28%	4%	13%	4%	3%	1%	0%	1%	1%	0%	0%		43%	27%	5%	5%	10%	0%	2%	2%	5%	2%	2%	0%		39%	27%	6%	10%	10%	2%	3%	2%	0%	0%	2%	0%			44%	26%	9%	0%	9%	2%	2%	2%	2%	2%	0%	0%	
	Health commodities	42%	19%	14%	0%	2%	16%	2%	4%	2%	0%	0%	0%		41%	14%	22%	0%	6%	8%	0%	8%	0%	0%	2%	0%		35%	22%	16%	6%	6%	2%	8%	4%	2%	0%	0%	0%			36%	20%	20%	5%	5%	2%	5%	3%	3%	2%	0%	0%	
	Household commodities	68%	0%	4%	14%	0%	14%	0%	0%	0%	0%	0%	0%		55%	15%	10%	15%	5%	0%	0%	0%	0%	0%	0%	0%		34%	17%	21%	14%	7%	3%	0%	3%	0%	0%	0%	0%			30%	13%	20%	0%	0%	20%	17%	0%	0%	0%	0%	0%	
	Hygiene commodities	59%	15%	4%	4%	7%	4%	0%	7%	0%	0%	0%	0%		44%	22%	0%	19%	0%	0%	4%	4%	0%	0%	7%	0%		41%	17%	10%	14%	3%	7%	0%	0%	3%	0%	3%	0%			47%	11%	21%	0%	0%	16%	5%	0%	0%	0%	0%	0%	
	Health care services	31%	19%	19%	6%	0%	6%	6%	0%	13%	0%	0%	0%		29%	14%	29%	14%	0%	14%	0%	0%	0%	0%	0%	0%		30%	15%	5%	5%	15%	10%	10%	5%	5%	0%	0%	0%			30%	30%	13%	3%	0%	10%	3%	0%	10%	0%	0%	0%	
	Education services	38%	0%	0%	0%	25%	0%	0%	13%	0%	25%	0%	0%		27%	20%	13%	0%	7%	0%	7%	20%	0%	7%	0%	0%		36%	18%	0%	9%	18%	0%	9%	9%	0%	0%	0%	0%			30%	27%	10%	0%	17%	7%	3%	0%	7%	0%	0%	0%	
	Education commodities	37%	32%	5%	0%	5%	5%	0%	0%	11%	5%	0%	0%		33%	33%	17%	17%	0%	0%	0%	0%	0%	0%	0%	0%		33%	11%	22%	0%	22%	11%	0%	0%	0%	0%	0%	0%			30%	17%	13%	4%	9%	4%	4%	0%	13%	0%	4%	0%	
	Hygiene/ sanitation facil..	32%	26%	4%	4%	17%	2%	2%	11%	0%	0%	2%	0%		100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%																33%	0%	33%	0%	0%	33%	0%	0%	0%	0%	0%	0%	
	Shelter commodities	25%	50%	25%	0%	0%	0%	0%	0%	0%	0%	0%	0%		50%	25%	0%	0%	13%	0%	0%	0%	0%	13%	0%	0%		29%	29%	14%	14%	14%	0%	0%	0%	0%	0%	0%	0%			50%	13%	25%	0%	0%	0%	0%	13%	0%	0%	0%	0%	
	Energy commodities														33%	33%	0%	0%	0%	0%	0%	0%	0%	0%	33%	0%		33%	0%	33%	0%	0%	33%	0%	0%	0%	0%	0%	0%			20%	40%	20%	0%	20%	0%	0%	0%	0%	0%	0%	0%	
	Communication commodities														33%	0%	0%	0%	0%	0%	0%	0%	0%	33%	33%	0%																											
	Other																											0%	0%	33%	0%	33%	0%	0%	0%	33%	0%	0%	0%															
	Transport services																										100%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%															
	Communication services																																																				

d) Lessons from pilot

Target groups and targeting approaches are different from sector to sector. WASH follows a community approach, rather than household approach and socio-economic vulnerability criteria do not apply in the sector. What applies is the status (IDPs, Returnee, Host community). The concerns are related to ensuring safety, dignity and the public good (public health), as opposed to the good of selected households.

It was not clear whether the figures of households and individuals included people residing in non-accessible areas.

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Step 4 Agreement that lack of purchasing power is (among the) underlying factors in priority needs

a) Guidance

Objective / output	Cash: relevant or not
Question to answer	Are financial constraints confirmed as one of the underlying factors for priority needs in the target population groups?
Actors to be involved	• Session facilitator, who should be familiar with all findings • Sector experts • Information management officers
Required inputs and resources	BNA dashboard with underlying causes of needs.
Available tool	NA
How to complete the step	1. The session would start with listing – in order of importance – the underlying factors mentioned by the targeted population groups, for each priority need. 2. Is "lack of purchasing power" / "financial constraints" among them? If so, then CTP should (must!) be considered as a response option in Step 2, Phase II. 3. If time allows for it, the facilitator would ideally support the group in coming up with a basic problem tree, showing the linkages among different concurrent factors and articulating a short paragraph that explains the situation, as well as possible differences by group and/or by geographic area.
Estimated time required	30 minutes
Notes	If "lack of purchasing power" / "financial constraints" is among the underlying reasons why the need remains unmet, then CTP should (must!) be considered as a response option in Step 2, Phase II.

b) Session participants

Name	Title	Organisation	Email

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c) Working session output

YES, money is recognised as one of the issues by all households and for all WASH-related needs (water, sanitation facilities, hygiene commodities), though it is the main preference only in Jere. In Konduga, affected population prefer to receive aid in kind.

There is demand for potable water and - with more money and via a cash programming - people would supposedly buy more water to meet their needs. However, that would not be enough or may have to be applied taking into account the following realities:

1. The quality of the water sold by vendors is not guaranteed;
2. People's behaviour and knowledge is limited about water quality and other hygiene and public health matters. Would they make the appropriate purchase/consumption choices?
3. Water vendors are not able to physically reach most communities and vice-versa, especially in Konduga;
4. Supply capacity of water vendors is likely to be very limited due to their limited numbers, as well as the fact they are also engaged with other livelihoods activities (farming, day labour, etc.)
5. Water infrastructures (sanitation, water points, and boreholes) require continuous maintenance, and in some cases to be rehabilitated/built;

At the moment the sector provides water for free. However, it is not sufficient to cater for all humanitarian needs, so people still have to purchase water from the market.

d) Lessons learned

There are many assumptions on purchase and consumption choices, and little evidence to back or confute them. More evidence should be generated.

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Step 5 Definition of sector-specific objectives of assistance

a) Guidance

Objective / output	SMART objective
Question to answer	What objective are we aiming to achieve (for each group and/or each location) in the established timeframe?
Actors to be involved	• Facilitator, who should be familiar with all findings • Sector experts • Information management officers
Required inputs and resources	• Basic needs assessment • Other sectoral assessment of the target population and their needs
Available tool	Table 3: Response objectives
How to complete the step	1. How would the situation/status of the group look like after the sector has intervened to address the problem? The objective should not be the intervention itself (i.e. distribute hygiene kits). The solution/modality to be used to achieve the objective will be identified in Phase II of the process. Instead, the objective describes the situation that the sector would like to attain after having implemented its interventions. 2. In first place, the sector has to decide if they intend to target different groups of affected people, and each of them with a specific objective (in other words, the objectives are group-specific), or if – alternatively – they intend to achieve a specific objective for each targeted location (the objectives are location specific). The most affected groups are identified and profiled in Step 3, Phase I. 3. In this regard, it may help to look at the severity of needs; if the priority needs differ significantly across groups, then a group specific approach should be preferred. If the priority needs differ mostly by geographic area, then there the sector may consider different objective by location. 4. Secondly, the group has to establish the desired timeframe of the objective. For instance, is six (or 12) months a legitimate timeframe? Note that there can multiple objectives with different timeframes. 5. Have you checked if the objective is SMART? In other words, is it: ✓ Specific: The objective has to be specific to the problem that has been detected and be aimed at addressing it directly. The objective should not be vague. By reading the objective, one should be able to understand what the sector is trying to achieve. ✓ Measurable: it should be possible to measure progress towards the complete achievement of the objective and/or to what extent the intervention has delivered a satisfactory/quality result. ✓ Achievable: within the relevant timeframe and with the capacities and resources of the sector.

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	✓ Relevant: to the humanitarian need that it seeks to address. ✓ Time-bound: the objective statement should specify the timeframe within which the objective is to be achieved.
Estimated time required	1 hour with each sector group. The necessary time will depend
Notes	This step cannot start until assessment reports have been revised and completed.

b) Session participants

Name	Title	Organisation	Email

c) Working session output

The overarching objective is to save lives: *People live safely and in dignity, they do not get sick and do not die as a result of lack of or poor access to WASH.*

The specific objectives are:

1. Make sure people have access to sufficient quality and quantity of water to meet their basic needs: eating/cooking, personal and household hygiene.
2. People are aware of the personal health and public health risks related to poor water and sanitation practices (handwashing, bathing, using latrines) and are enabled to take actions accordingly (they also receive access to hygiene commodities)
3. People have access to dignified and quality sanitation facilities (latrines, solid and liquid waste management)

Table 3: Response objectives

	Location	Group 1: IDPs in any setting	Group 2:	Group 3:
Objective 1	Jere	Make sure people have access to sufficient quality and quantity of water to meet their		NA
	Konduga			

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	MMC	basic needs: eating/cooking, personal and household hygiene.		
Objective 2	Jere Konduga	NA	People are aware of the personal health and public health risks related to poor water and sanitation practices (handwashing, bathing, using latrines) and are enabled to take actions accordingly (they also receive access to hygiene commodities)	NA
Objective 3	Konduga	NA	NA	People have access to dignified and quality sanitation facilities ((latrines, solid and liquid waste management))

d) Lessons from pilot

Nothing to report, except for lack of time to complete the step.

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Phase II. Sector response options analysis

Step	Participants	Time required
1. Identification of response options not accepted by local/national authorities	Session facilitator; Sector experts; Information management officers; Cash experts	15-30 minutes
2. Identification of response options based on needs and objectives	Session facilitator; Sector experts; Information management officers; Cash experts	1.5 hours
3. If/when cash is proposed, compare CTP modalities	Session facilitator; Sector experts; Information management officers; Cash experts	1.5 hours
4. If/when cash is proposed, how much should be transferred	Session facilitator; Sector experts; Information management officers; Cash experts	2 hours
5. If/when cash is proposed, compare available transfer mechanisms	Cash experts	1 hour
6. Comparative analysis of sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	1.5 hours
7. Weighted scoring of sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	30 minutes
8. Final recommendations on sector response options	Session facilitator; Sector experts; Information management officers; Cash experts , Protection experts	30 minutes

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Step 1 Identification of response options not accepted by local/national authorities

a) Guidance

Objective / output	Exclude/disregard response options that would not be accepted by local/national authorities.
Question to answer	Are there any response options that the local and/or national authorities would not
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts
Required inputs and resources	For cash: OCHA government acceptance study, as part of feasibility analysis (where available); alternatively, cash experts' knowledge For other response options: sector experts' knowledge of the context; technical guidelines of the sector; other assessment reports.
Available tool	NA
How to complete the step	1. The facilitator collects the necessary information ahead of the session, for instance by interviewing the members of the group and via email exchange. 2. At the working session, participants will confirm the list of response options and approaches that are not accepted/approved by the local and/or national authorities, for these to be explained and duly documented.
Estimated time required	15-30 minutes
Notes	The response options that are not accepted by local and national authorities will not be proposed in Step 2. If cash is not an accepted option, these steps will be skipped: Step 3, Step 4, Step 5.

b) Session participants

Name	Title	Organisation	Email

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c) Working session output

There are no response options that the Government would not accept.

d) Lessons from pilot

Nothing to report.

Step 2 Identification of response options based on needs and objectives of intervention & target group

a) Guidance

Objective / output	Ranked list of response options according to suitability to objective.
Question to answer	Which response option is most suitable for each of the top three objectives (ranked)?
Actors to be involved	• Session facilitator; • Sector experts; • Information management officers; • Cash experts
Required inputs and resources	BNA dashboard: • the way population groups are used to meet their needs; • their assistance preferences Output of Step 4 in Phase I. Output of Step 1 in Phase II.
Available tool	Table 4: Response options: Suitability check to objective 1 **Error! Reference source not found.Table** 6: Response options: Suitability check to objective 3**Error! Reference source not found.**

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	Red Cross Movement Tool #M313
How to complete the step	1. The facilitator prepares one table per each objective, noting the objective statement in the top row of the table, the underlying factors as per basic needs assessment and **Step 3 in Phase I** (row underneath the objective), and the three most common ways through which the targeted groups are used to meet those needs, by looking at the BNA findings. For instance, they may mostly buy the relevant commodities or services from the market, or they may be receiving the service from the government. 2. In first place, the group will retain only response options that are acceptable to local/national authorities. Discard response options identified at **Step 1 of Phase II**, if there are any. The facilitator quickly reminds the group about those response options. 3. Then the group considers and acknowledge the underlying factors, as well as the three most common ways through which the targeted groups are used to meet those needs. 4. After having completed that, the group considers which response options beneficiaries prefer, and the facilitator notes the ranking order in the second row of the table. 5. Therefore, the facilitator will support the group in identifying and briefly describing response options belonging to all possible categories, when they apply to the objective: (1) in kind (e.g. distribution of food parcels, water trucking, provision of housing, distribution of pharmaceuticals); (2) direct service provision (e.g. emergency health services, education); (3) Cash Transfer Programming (i.e. cash based interventions), regardless of their specific modality, which will be looked at in Step 3, Phase II. At this stage, the group should not discuss the specific CTP modalities, but consider CTP as one overarching typology. 6. If none of the response options is sufficient in isolation, what combinations could be considered to better meet the needs and what are the pros and cons of these? These will be noted in the 7. The facilitator moderates a discussion based on this guiding question: What are the pros and cons of each response options in isolation, with regard to their ability to help targeted groups in effectively meeting their needs? The facilitator notes down the answers in the table as appropriate. 8. In this step, the group will have to disregard the operational feasibility of response options (e.g. their costs, their scalability, implementing agencies' capacities, etc.). They will only have to focus on "suitability" / "appropriateness" to the objective.
Estimated time required	1.5 hour
Notes	All response options (or the three most suitable ones) will be compared at **Step 6**, based on their operational feasibility.

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b) Session participants

Name	Title	Organisation	Email

c) Working session output

For objective 1: the recommendation is to use the same response option in one community, not a variety of modalities for different groups/households because it would create jealousies and conflicts.

Note that there is a limited water market in Konduga, so they would go for direct service provision over there.

Water quality for deep bore wells in North East Nigeria can be potable without treatment. Shallow wells experience higher levels of faecal contamination. CTP does not seem a safe option, if difficult to control source of water supplied by traders selling locally.

~~Current private sector water supplies supports only 58% of HH needs: not sufficient. Additional 42% of water has to be supplied to meet Sphere Standards for household water consumption and domestic use.~~

Table 4: Response options: Suitability check to objective 1

OBJECTIVE 1: Make sure people have access to sufficient quality and quantity of water to meet their basic needs: eating/cooking, personal and household hygiene		
Underlying factors	1, 2, 3 (order of frequency)	1. … 2. … 3. …
How beneficiaries are used to meet the need	1, 2, 3 (order of frequency)	1. … 2. … 3. ...
Criteria		**RESPONSE OPTIONS**

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	Possible answers	In-kind transfer	Direct service provision (if applicable)	CTP (any)	Combination 1	Combination 2
Beneficiary preference	1, 2, 3 (order of preference)					
Ability to meet needs (from sector specialist point of view)	Description	Water trucking to water points	Rehabilitate/build the water infrastructure and train water & sanitation committee for maintenance (especially in Konduga where market supply is limited)	Distribution of CTP (in any modality) to targeted households	(1) Distribution of CTP (in any modality) to targeted households + (2) water treatment at household level + (3) maintenance of water infrastructure	(1) Distribution of CTP (in any modality) to targeted households + (2) monitoring & sensitisation to water vendors on water quality at source, during transportation + (3) cash grants to water vendors to improve their equipment + (4) supporting water traders' association to enforce standards + (5) maintenance of water infrastructure
	positive	• Fast to deliver when there are no boreholes or other permanent solutions • Control over the output (including water quality) and – therefore – the outcome (including PH) • Supports the local medium/large water companies, because it contracts them	• Water is accessible free of cost to the benefitted communities • The service is predictable and always available • Control over the output (including water quality) and – therefore – the outcome (including PH) • Compliance with quality standards at source	• Relatively cheaper than rebuilding infrastructure • Stimulates/supports livelihoods of water vendors • Viable (without treatment) if traders source their supplies from deep borwells	• Stimulates/supports livelihoods of water vendors	• Stimulates/supports livelihoods of water vendors • Improves quality of water supply in the market • Sustainable in the long run
	Negative	• Expensive • Not sustainable, not even in the short term	• The water is not sufficient to cover all needs	• No control on water quality consumed by households. Not viable if traders	• No advantage in letting people buy things that are not up to standard	• This programme takes time to be implemented and

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			• Time needed to cover the entire net (not timely) • Jeopardizes livelihoods of water vendors • Not sustainable in the long run if there's no money	source their supplies from shallow wells, which experience higher levels of fecal contamination • Not sustainable if infrastructure is not maintained • Depends on water vendors coming to the community • Cash transfers are prone to diversion, and can be used for other purposes that are not consumption of water • Consequences for public health	• No control on water quality consumed by households	would not be timely rolled out

Table 5: Response options: Suitability check to objective 2

OBJECTIVE 2: People are aware of the personal health and public health risks related to poor water and sanitation practices (handwashing, bathing, using latrines) and are enabled to take actions accordingly (they also receive access to hygiene commodities						
Underlying factors	1, 2, 3 (order of frequency)	4. … 5. … 6. …				
How beneficiaries are used to meet the need	1, 2, 3 (order of frequency)	4. … 5. … 6. ...				
Criteria	**Possible answers**	**RESPONSE OPTIONS**				
		In-kind transfer	**Direct service provision (if applicable)**	**CTP (any)**	**Combination 1**	**Combination 2**
Beneficiary preference	1, 2, 3 (order of preference)					
Ability to meet needs (from sector specialist point of view)	Description	NA	NA	NA	(1) Awareness raising sessions on hygiene	(1) Awareness raising sessions on hygiene promotion + (2) cash

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					promotion + (2) hygiene kits distribution	transfer for hygiene commodities (any modality)
	Positive	•	•	•	• Consistence between the messages and the nature/content of the kit	• Support to local traders' livelihoods • Freedom of choice of products
	Negative	•	•	•	• Recipients may sell the kits → objective not achieved • Jeopardise local traders	• Recipients may not buy hygiene supplies (also in case of vouchers) → objective not achieved

Table 6: Response options: Suitability check to objective 3

OBJECTIVE 3: People have access to dignified and quality sanitation facilities (latrines, solid and liquid waste management)						
Underlying factors	1, 2, 3 (order of frequency)	7. … 8. … 9. …				
How beneficiaries are used to meet the need	1, 2, 3 (order of frequency)	7. … 8. … 9. ...				
Criteria	**Possible answers**	**RESPONSE OPTIONS**				
		In-kind transfer	**Direct service provision (if applicable)**	**CTP (any)**	**Combination 1**	**Combination 2**
Beneficiary preference	1, 2, 3 (order of preference)					
Ability to meet needs (from sector specialist point of view)	Description					
	Positive	•	•	•	•	•
	Negative	•	•	•	•	•

d) Lessons from pilot

Nothing to report.

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Step 3 <u>If/when cash is proposed</u>, compare the possible CTP modalities

a) Guidance

Objective / output	Preferred CTP modality (max 2) and frequency
Question to answer	When a CTP is the most suitable response (or an element of the most suitable response) which CTP modality is most appropriate for the objective?
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts
Required inputs and resources	Definitions of modalities below
Available tool	Table 7: Comparative table of CTP modalities (below) Red Cross Movement Tool #M313
How to complete the step	1) Facilitator and/or cash experts to introduce the key terms. See the definitions below. 2) Facilitator and/or cash experts to present possible cash modalities for the objectives chosen by the group (including rationales). 3) Consensus reached about which cash modalities should be assessed. 4) Participants to discuss the advantages and disadvantages per each of them and make final recommendations, including on frequency.
Estimated time required	1.5 hours
Notes	Defining terms: • Modality – refers to the different types of cash or voucher transfer – e.g. conditional (cash for work, etc.), unconditional, restricted, unrestricted, multipurpose, etc. A single transfer can generally be categorized in terms of several of these variables e.g. a conditional, unrestricted transfer. • Unconditional unrestricted cash – are provided without a condition to be performed prior to receipt, and funds can be used freely by beneficiaries, although some suggestions and nudges can be given. E.g. multipurpose cash transfers, or transfers that are suggested to be used for the children's wellbeing, their health and education. • Unconditional restricted cash – are provided to beneficiaries without a condition to be performed prior to receipt, but funds can only be used to meet particular needs, or they may be disqualified from further assistance. This includes both commodity and value vouchers

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	• Conditional unrestricted cash - are only provided to beneficiaries upon performance of a specific precondition (e.g. work, training attendance, school attendance, etc.), but can be used freely. Examples include: cash (in exchange) for work; cash (in exchange) for training attendance; transfers based on attending health check-ups; transfers given in exchange for school attendance. • Conditional restricted cash - are only provided to beneficiaries upon performance of a specific precondition (e.g. work, training attendance, school attendance, etc.), and can only be used to meet particular needs. Typically, these are transfers in multiple tranches, which are contingent on appropriate use and/or other conditions. E.g. transfer for purchase of productive asset following attendance of training, scholarship for school fees having attained a particular grade, etc.

b) Session participants

Name	Title	Organisation	Email

c) Working session output

Table 7: Comparative table of CTP modalities

Objective	CT Modality and example from proposed response options	Advantages	Disadvantages	Comments and recommendation (including frequency)
		Note. Advantages and disadvantages should consider both the risks related to achieving the objective and the risks for beneficiaries.		
Objective 1: water	Unconditional unrestricted cash	NA	NA	Unrestricted CTP is not an option to achieve the objective
	Unconditional restricted cash Restriction by using voucher as a modality	• Control over use on water consumption • Support to water vendors	• Not sustainable if infrastructure is not maintained • Voucher systems take time and effort to be set-up and monitored	This has a potential to be explored

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		• Control the suppliers because only vendors meeting some standards are part of the programme		
	Conditional unrestricted cash	NA	NA	Unrestricted CTP is not an option to achieve the objective
	Conditional restricted cash With condition of attending awareness raising; Restriction by using voucher as a modality	• Control over use on water consumption • Sensitisation of recipients augments the outcome (colour of water + smell + cleanliness of the cart) • Support to water vendors • Control the suppliers because only vendors meeting some standards are part of the programme	• Not sustainable if infrastructure is not maintained • Voucher systems take time and effort to be set-up and monitored	This has a potential to be explored
Objective 2: hygiene	Unconditional unrestricted cash	NA	NA	Unrestricted CTP is not an option to achieve the objective
	Unconditional restricted cash Restriction by using voucher as a modality	• Higher control over purchase of hygiene commodities as compared to unrestricted • Support to local traders	• Also vouchers can be sold/traded and trader can sell other items instead of hygiene supplies → objective not achieved • Voucher systems take time and effort to be set-up and monitored • Potential distortion on prices	
	Conditional unrestricted cash	NA	NA	Unrestricted CTP is not an option to achieve the objective
	Conditional restricted cash With condition of attending awareness raising; Restriction by using voucher as a modality	• Higher control over purchase of hygiene commodities as compared to unrestricted • Sensitisation of recipients augments the outcome • Support to local traders	• Also vouchers can be sold/traded and trader can sell other items instead of hygiene supplies → objective not achieved • Voucher systems take time and effort to be set-up and monitored • Potential distortion on prices	That has a potential to be explored
Objective 3: sanitation	Unconditional unrestricted cash			
	Unconditional restricted cash			
	Conditional unrestricted cash			
	Conditional restricted cash			

d) Lessons from pilot

Nothing to report.

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Step 4 If/when cash is proposed, how much should be transferred

a) Guidance

Objective / output	Amount and frequency of CTP transfer
Question to answer	How much should the transfer be? And how frequently should it be given?
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts
Required inputs and resources	Findings of relevant assessments, such as: • Household Economy Approach assessment (baseline and/or outcome review) • Basic needs assessment • Multi-sector market assessment Previous/existing minimum expenditure basket for the sector Sector's technical guidelines/standards Sphere standards Market prices of items, possibly by location if prices differ substantively National poverty lines and how they are calculated (there could be more than one)
Available tool	Table 8: Typical recurrent and one-off expenditures by sector and category Table 9: Sector expenditures Table 10: Recurrent expenditures gap (one-off expenditures have been stricken through as not applicable here) Table 11: One-off expenditures gap (recurrent expenditures have been stricken through as not applicable here)
How to complete the step	Ahead of the face-to-face working session: 1) The facilitator should draft a preliminary, context-specific list of key commodities and services that are relevant to the sector (Table 8). This is the "sector-specific basket" (e.g. "food basket", "NFI kit", etc.). Sectors in-country may already have this information as part of their technical guidelines/standards. More generically, reference could be made to the Sphere standards.

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	2) Consulted via email by the facilitator, sector experts will confirm the list of items in the sector basket, the frequency of consumption or utilisation of those items (Table 8), the minimum required quantity per person or per household during the period of reference – according to country-level sector and/or Sphere standards - and the unit price. The price information could be found/collected through their logistic/supply chain team. This will provide information to populate Table 9. 3) The facilitator will populate the columns "Actual expenditures" of Table 10 and Table 11, with the median (or mean, if stable) expenditure figures found in the basic needs assessment. It is very important to complete these columns ahead of the working session, and possibly using an Excel sheet. 4) Finally, the facilitator should collect information around the national poverty lines and how they are calculated. Generally, there can be more than one poverty line, including relative and absolute, food-related and food/non-food related. The more ground is covered ahead of the working session via email exchanges, the shorter and more effective will be the meeting. <u>At the face-to-face working session</u>: 5) The facilitator will present the breakdown of expenditures of a hypothetic household (Table 8), differentiating between recurrent and one-off and expenditures (see definitions below), as well as services and commodities. Participants will add anything missing or amend where needed. 6) With the facilitator's support, participants will populate/finalise Table 9, by adding any additional basic items for their sector, required quantity per person or per household, and unit costs. 7) Estimate and compare the recurrent costs of meeting those basic needs with the amount households are currently spending on that set of items, <u>by each period of reference</u>, and estimate the total expenditure gap(s) accordingly. Be careful not to mix expenditures that refer to different periods (e.g. the monthly expenditures with weekly expenditures, for instance); to avoid confusion, you could find a common denominator and convert all expenditures to that period of reference (e.g. make them all monthly expenditures). With the information that has been generated, populate Table 10. Estimate the total expenditure gap. 8) If information is available, they will compare the total of recurrent costs with the poverty line(s) and relevant items. 9) Compare the one-off costs of meeting those basic needs with the amount households are currently spending on that item, and estimate the expenditure gap accordingly. With the information that has been generated, populate Table 11. Pay attention to the period of reference, as flagged above. Finally, note when – over the year – the one-off purchases/expenditures tend to happen.
Estimated time required	2 hours

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Notes	Definitions: • (Expenditures) reference period: consumption and utilisation of commodities and services may be more or less frequent, ranging from recurrent to one-off events. Some goods or services, once they have been utilised, they have to be repurchased; some others can be reutilised multiple times or have a specific timeframe. The reference period refers to the frequency of expenditures, which reflects the interval at which the commodity or service has to be repurchased. • Recurrent expenditures: these expenditures are repeated over time, as the commodity or service is consumed and must be repurchased on a regular basis. As a convention, the maximum reference period would be the quarter. The most common recurrent expenditures within a household are those for food, water, and hygiene items. The recurrent costs can be covered by an MPG that is given regularly. • One-off expenditures: these are non-frequent expenditures, and include seasonal or exceptional costs. A one-off expenditure is, for instance, the deposit for accommodation rental, or the fees to register a business. The seasonal costs occur on a regular but non-frequent basis, at specific times of the year. Examples of seasonal expenditures are education-related expenditures, or the purchase of agricultural inputs ahead of the sowing/planting season. Exceptional costs are of a varied nature and may also arise from the emergency itself. Examples include the costs related to the repair of a house or purchase of furniture; the medical costs to treat an injury. The one-off costs can be covered by sectoral top-ups.

b) Session participants

Name	Title	Organisation	Email

c) Working session output

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Table 8: Typical recurrent and one-off expenditures by sector and category

Sector	Category	Frequency	Type of expenditure faced by a household
CCCM / shelter / NFI	Communication	One off	Phone, etc.
		Recurrent	Phone credit, internet bill
	Energy	One off	Stove, heater
		Recurrent	Cooking, lighting, charging, heating. Includes kerosene, electricity, firewood, charcoal, etc.
	Household items	One off	The improved NFI kit for north-east Nigeria: • Synthetic Mat • Blanket • Mosquito net • Foldable mattress • stainless plates • stainless cups • table spoons • kitchen knife • serving spoon • Solar lamp • cooking pots (7"5" litres)
		Recurrent	
	Housing and shelter commodities	One off	Rent (quarterly or every six months, or every year), furniture, construction materials, permissions, repair, etc.
		Recurrent	
	Transport	One off	Vehicle purchase
		Recurrent	Any other not related directly to other basic needs (fuel and fees)
Education	Education	One off	• School fee • Canteen fee • Notebook • Ruler • Scissors • Maps • Pencils • Rubber • Geometric set • Mats

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			• Sandals • School uniform • School Bag • Text Book(s)
		Recurrent	Transport
Food security	Food	One off	Land, agricultural inputs
		Recurrent	Staple, vegetable, meat, milk, condiments, oil, sugar, salt
Health	Healthcare	One off	Baby kit, critical event, delivery, immunisation
		Recurrent	Medicine, healthcare fees, transportation
Early Recovery	Productive assets	One off	Land, workspace, agricultural inputs, non-farming assets/inputs, livestock, livestock vaccination
		Recurrent	Veterinary fees, livestock feed
WASH	Potable water	One off	Jerry can, 25 l, non-collapsible Jerry can, 10 l, non-collapsible
		Recurrent	90 l/day for HH of six= 2700 litres a month treatment, transport
	Sanitation / household hygiene	One off	Clothing, sanitation construction / repair Initial hygiene kit (for three months distributed annually): • Bucket with lid, HDPE, 20 L • Kettle with lid, plastic, sanitary cleansing, 2 L • Torch light, rechargeable • Child potty with lid • Bathing soap, 250 grams • Laundry soap, 200 grams • Rope • Clothes pins • Female undergarments, medium size • Reusable sanitary pad set (2 holders, 3 winged pads, 2 straight pads)
		Recurrent	• Bathing soap, 250 grams • Laundry soap, 200 grams • Toothbrush • Toothpaste, large, 140 g • Diaper, disposable

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Table 9: Sector expenditures

Sector		Item	Unit	Frequency (one-off, monthly etc)	Quantity	Unit price	Total cost
WASH	WATER	Jerrycan, 25 L, non-collapsible	Piece	One off, once a year	1	600	600
		Jerrycan, 10 L, non-collapsible	Piece	One off, once a year	1	400	400
	HYGIENE KIT (for a family of six)	Bucket with lid, HDPE, 20 L	Piece	One off, once a year	1	500	500
		Kettle with lid, plastic, sanitary cleansing, 2 L	Piece	One off, once a year	1	150	150
		Torch light, rechargeable	Piece	One off, once a year	1	350	350
		Child potty with lid	Piece	One off, once a year	1	350	350
		Bathing soap, 250 grams	Bar	One off, once a year	18	70	1,260
		Laundry soap, 200 grams	Bar	One off, once a year	18	50	900
		Rope	m	One off, once a year	4	200	800
		Clothes pins	Pack of 5	One off, once a year	1	100	100
		Female undergarments, medium size	Piece	One off, once a year	4	500	2,000
		Reusable sanitary pad set (2 holders, 3 winged pads, 2 straight pads)	set	One off, once a year	2	2350	4,700
		TOTAL ONE-OFF (YEARLY) EXPENDITURES					12,110
	WATER	Water	litres	Recurrent, monthly[6]	2700	1.07	2889

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	HYGIENE REFILL (for a family of six)	Bathing soap, 250 grams	Bar	Recurrent, monthly[1]	6	70	420
		Laundry soap, 200 grams	Bar	Recurrent, monthly[2]	6	50	300
		Toothbrush	Piece	Recurrent, monthly[3]	6	50	300
		Toothpaste, large, 140 g	Tube	Recurrent, monthly[4]	1	200	200
		Diaper, disposable	Piece	Recurrent, monthly[5]		50	0
		TOTAL RECURRENT (MONTHLY) EXPENDITURES					4,109

Table 10: Recurrent expenditures gap (one-off expenditures have been stricken through as not applicable here)

Sector	Category	Number of persons	Desired expenditure for recurrent costs *Minimum Expenditure Basket*	Actual expenditure for recurrent costs (from BNA)	Expenditure gap *MPG amount*
Food	Food commodities	5 persons	NGN 25,232	NGN 8,000	NGN 17,232
Health	Health commodities	6 persons		NGN 1,500	
	Health services	6 persons		NGN 1,500	
WASH	Potable water	6 persons	NGN 2,900	NGN 1,200	NGN 1,700

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	Hygiene commodities	6 persons	NGN 1,200	NGN 1,500	-NGN 300
	~~Hygiene facilities~~	-		~~NGN 1,200~~	
Shelter / NFI	Housing (rent)		NGN 5,000	NGN 2,700	NGN 2,300
	~~Shelter commodities~~	-		~~NGN 3,000~~	-
	~~HH items~~	-		~~NGN 2,000~~	-
	Energy commodities			NGN 1,600	
	Transport services			NGN 1,000	
	Communication services			NGN 1,000	
	~~Communication commodities~~	-	-	~~NGN 1,000~~	-
Education	Ed services			NGN 2,000	
	Ed commodities			NGN 2,000	
		Total	**NGN 34,332**	**NGN 31,200**	**NGN 20,932**

Table 11: One-off expenditures gap (recurrent expenditures have been stricken through as not applicable here)

Sector	Category	Desired expenditure for recurrent costs *Minimum Expenditure Basket*	Actual expenditure for one off expenditures (from BNA)	Expenditure gap	When one-off costs are required (time of year)
Food	~~Food commodities~~				
Health	Health commodities				
	Health services				
WASH	Potable water	NGN 1,000			At identification
	Hygiene commodities	NGN 11,110			At identification
	~~Hygiene facilities~~		-		-
Shelter / NFI	~~Housing (rent)~~	-	-	-	-
	Shelter commodities		-	-	-

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	HH items		-	-	-
	~~Energy commodities~~	-	-	-	-
	~~Transport services~~	-	-	-	-
	~~Communication services~~	-	-	-	-
	Communication commodities				
Education	Ed services				August-September
	Ed commodities				August-September
	Total	**NGN 12,110**	**NGN 0**	**NGN 0**	

d) Lessons from pilot

The list of items should be prepared in advance, with the unit costs. Sectors may already have this information as part of their technical guidelines/standards.

Step 5 <u>If/when cash is proposed</u>, for each of the preferred modalities, compare AVAILABLE transfer mechanisms

a) Guidance

Objective / output	Preferred transfer mechanism
Question to answer	Which mechanisms are the best value for money for each modality?
Actors to be involved	Cash experts
Required inputs and resources	Transfer mechanisms / financial service providers assessment findings
Available tool	b) Session participants

Name	Title	Organisation	Email

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c) Working session output

Table 12: Comparative table of transfer mechanisms

How to complete the step

The information for this step could be collected through the Transfer Mechanism / Financial Service Providers Assessment. Some preparatory discussions can also take place via email exchange among the cash experts.

Steps:

1) Which modalities were preferred (see output of Step 3)? (This is what goes in column A of b) Session participants

Name	Title	Organisation	Email

c) Working session output

2) Table 12)
3) For each modality, which mechanism is feasible/available in the selected locations? (This is what goes in column B of b) Session participants

Name	Title	Organisation	Email

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c) Working session output

4) Table 12)
5) To determine pros and cons consider aspects including:
   - How capable would the FSP be to reach the caseload?
   - How experienced are sector members in using the mechanism?
   - How familiar are the target groups with these ways of getting access to money?
   - What protection concerns are associated with these mechanisms?
6) To determine costs for the implementing organisation, consider the following criteria: service provider fees, printing of cards / vouchers, distribution costs (rent of site, security guards, rent or purchase of equipment and support devices, distribution staff and casual labour), training of partners and beneficiaries, staff costs, contracts with implementing partners, insurance costs, all other costs.
7) Populate b) Session participants

Name	Title	Organisation	Email

c) Working session output

8) Table 12.

Estimated time required	1 hour
Notes	Definitions: • Modality – refers to the different types of cash based transfer. These can be conditional/ unconditional and restricted/unrestricted. They can also be sector specific or cross sectoral. • Mechanism – refers to different ways of delivering a transfer. E.g. direct physical cash distribution, mobile money, paper voucher, electronic voucher. Notes:

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	1) The mechanism has to be tailored to the modality but not the objective. 2) Add additional rows as needed.

b) Session participants

Name	Title	Organisation	Email

c) Working session output

Table 12: Comparative table of transfer mechanisms

Preferred CT modality	Available CT mechanism	Advantages	Disadvantages	Cost (1 is least expensive – 5 is most expensive)	Comments and recommendation
Modality 1	[write name of Type 1]				
	[write name of Type 2]				
	[write name of Type 3]				
Modality 2	[write name of Type 1]				
	[write name of Type 2]				
	[write name of Type 3]				
Modality 3	[write name of Type 1]				
	[write name of Type 2]				
	[write name of Type 3]				

d) Lessons from pilot

Nothing to report.

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Step 6 Comparative analysis of sector response options

a) Guidance

Objective / output	Unweighted ranking of options based on both suitability to objective and operational feasibility
Question to answer	Which response is most suitable and operationally feasible, assuming all criteria have the same weight?
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts • Protection experts
Required inputs and resources	Definitions and scores below
Available tool	Table 13: Comparative table of response options (suitability and operational feasibility) Prepare one table per each objective, best if in Excel form, to calculate scores more easily
How to complete the step	1) Decide if the criteria have all the same weight. If not, then establish weights for each criterion. Note that "appropriateness" relates to the relevance of the response option to the objective and it has been assessed in Step 2, whereas the other criteria form part of the broader "operational feasibility". 2) Prepare one table per each objective (Table 13). 3) If applicable, use the information on non-cash responses (from Step 2) as possible response options. 4) Use the information on cash responses (disaggregated by cash modalities and mechanisms (from Step 3 and Step 5)) as the possible response options 5) With the assistance of the facilitator, the group will determine what are the pros and cons of each criteria as they apply to each response option, for the relevant objective. 6) Consider whether CTP will create or exacerbate protection risks and benefits for individuals, households and communities, and to what extent new risks could be mitigated by affected communities, humanitarian agencies and duty-bearers (governments) and/or by complementary program activities. Compare risks and benefits of cash, vouchers, in-kind, and no material intervention, e.g. limiting assistance to advocacy or service.
Estimated time required	1.5 hours
Notes	*Scores:* 1 = doesn't meet the criteria at all 2= partly meets the criteria 3 = fully meets the criteria

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	Definitions: • *Programmatic risk* includes substandard quality commodities and services available locally, inflation caused by the programme, reduced earning for local businesses and individuals (creation of oligopoly), misplaced incentives to service provision, creation of unequal access to goods and services, assistance not use for intended purposes (in-kind sold or cash misspent). • *Operational and institutional risks* include diversion of assistance, theft, corruption, fraud, security risks for staff, reputational risks to actors. • *Contextual risk* includes vagaries of climate (floods, droughts), conflicts and displacements, political instability and social unrest, global financial crises, price increases due to global/national inflation. • *Protection risks* for beneficiaries includes security risks, harmful intra-household and community dynamics (e.g. between recipients and no-recipients), undue taxation, theft, exploitation.

Table 13: Comparative table of response options (suitability and operational feasibility)

OBJECTIVE 1 Make sure people have access to sufficient quality and quantity of water to meet their basic needs: eating/cooking, personal and household hygiene						
CRITERIA	**Considerations**	**Response options**				
		Water trucking in all types of camps (including collective centres)	Rehabilitation of water infrastructure & training	Conditional water vouchers (condition to attend awareness raising session on water)	(1) Distribution of conditional water voucher (condition to attend awareness raising session on water) + (2) maintenance of water infrastructure	(1) Distribution of conditional water voucher (condition to attend awareness raising session on water) to targeted households + (2) monitoring & sensitisation to water vendors on water quality at source, during transportation + (3) restricted cash grants to water vendors to improve their equipment + (4) Support existing water association to develop and enforce standards among registered traders
APPROPRIATENESS (TAKEN FROM QUESTION 1)						
Suitability to objectives and target groups *Is the response option appropriate to achieve the objectives, for all intended groups*	Positive	• Fast to deliver when there are no boreholes or other permanent solutions	• Water is accessible free of cost to the benefitted communities	• Relatively cheaper than rebuilding infrastructure	Stimulates/supports livelihoods of water vendors	• Stimulates/supports livelihoods of water vendors

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		• Control over the output (including water quality) and – therefore – the outcome (including PH) Supports the local medium/large water companies, because it contracts them	• The service is predictable and always available • Control over the output (including water quality) and – therefore – the outcome (including PH) Compliance with quality standards at source	• Stimulates/supports livelihoods of water vendors Viable (without treatment) if traders source their supplies from deep borwells		• Improves quality of water supply in the market Sustainable in the long run
	Negative	• Expensive • Not sustainable, not even in the short term • Not suitable for IDPs in host community	• The water is not sufficient to cover all needs • Time needed to cover the entire net (not timely) • Jeopardizes livelihoods of water vendors Not sustainable in the long run if there's no money	• No control on water quality consumed by households. Not viable if traders source their supplies from shallow wells, which experience higher levels of fecal contamination • Not sustainable if infrastructure is not maintained • Depends on water vendors coming to the community • Cash transfers are prone to diversion, and can be used for other purposes that are not consumption of water Consequences for public health	• No advantage in letting people buy things that are not up to standard No control on water quality consumed by households	This programme takes time to be implemented and would not be timely rolled out
	score	2	2	2	2	3
ACCEPTANCE BY LOCAL AND NATIONAL AUTHORITIES						
Acceptance by authorities *Is the response option acceptable for the local and national authorities?*	Positive		They would be in favour	Nothing to report	They would be in favour of the support to infrastructure	They would be in favour of the support to infrastructure
	Negative	The government would accept reluctantly the water trucking in informal camps and collective centres because it's trying to dismantle them	Nothing to report	Nothing to report	Nothing to report	Nothing to report

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	score	2	3	3	3	3
MARKETS AND SERVICES						
Suitability to existing service systems (e.g. education, health, public water system, other essential services) *Do the local public services and infrastructure have the capacity to support the proposed response options?*	Positive	NA				
	Negative					
	score	2	2	2	2	2
Consequences for the service systems *Will the public service system and its infrastructures be damaged or supported by the proposed response option?*	Pros	IDPs in formal camps do not pay for water, so we are not "stealing" consumers from the public service	This is very positive for the public service because we are expanding/improving its capacity Higher sustainability	This will release some pressure on the public service which anyway cannot meet the entire demand for water The water vendors – facing an increased demand – will have to buy more water from the public service (at least some), which will earn an income	It combines advantages/positive aspects of the previous two response options (rehabilitation of water infrastructure and water vouchers)	It combines advantages/positive aspects of the previous two response options (rehabilitation of water infrastructure and water vouchers)
	Cons	Not particularly damaging, but not leaving anything good behind either for the public water services				
	score	2	3	2	3	3
Suitability of market conditions *Do the relevant markets have the capacity to respond positively, timely and at scale to the proposed response option?*		The local suppliers receive money for being hired	*Relevant traders/actors: construction materials traders, construction companies* The market of materials is bigger than the demand, even if we increase the scale of this option		It combines advantages/positive aspects of the previous two response options (rehabilitation of water infrastructure and water vouchers)	The disadvantages mentioned earlier are addressed through this option, because financial and technical support is provided to water vendors
		The capacity of the local suppliers is limited to scale up	The capacity of construction companies would not be sufficient to meet the increased demand for these services, should the option be upscaled	The distribution system of the tankers is not suitable for retail sale Most water vendors operating retail sale are informal Water vendors are likely not to be familiar with voucher	It combines advantages/positive aspects of the previous two response options (rehabilitation of water infrastructure and water vouchers)	

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	score	2	2	2	2	3
Consequences for relevant markets *Will the market actors (or other parts of the system) be damaged or supported by the proposed response option?*	Positive	Benefits the larger water truckers	It increases the ranges of options from where to buy the water for local water vendors	Benefits the vendors that are part of the voucher programme	It increases the ranges of options from where to buy the water for local water vendors Benefits the vendors that are part of the voucher programme	It increases the ranges of options from where to buy the water for local water vendors Benefits the vendors that are part of the voucher programme Vendors have incentives and are supported to comply with quality standards Stimulates and support water associations and their role Creates sustainability in the system
	Negative	Yes, this response option will harm the small water vendors/cart pushers and their livelihoods	Nothing to report	May damage the smallest water vendors/cart pushers who may not be included in the voucher programme	May damage the smallest water vendors/cart pushers who may not be included in the voucher programme	
	score	2	3	2	2	3
IMPLEMENTING AGENCIES' CAPACITY TO OPERATE AT SCALE AND IN A TIMELY MANNER						
Sector members' familiarity with the modality *What portion of the sector members are familiar with the response option (# of experienced organisations out of total # of members)?*	Positive	The sector is very familiar with this option	The sector is very familiar with this option	Nothing to report	The sector is familiar with component 2	
	Negative	Nothing to report	Nothing to report	None of them. It has never been used in Nigeria	None of them. Vouchers have never been used in Nigeria	Vouchers have never been used in Nigeria Not familiar with financial and technical support to water vendors Not familiar with support to water associations
	score	3	3	1	2	1
Capacity to go at scale in a short timeframe (caseload size) *Is it possible for the sector partners to go at scale with the response option, in a short timeframe?*	Positive	This is easier as it just takes procuring the services from local contractors				
	Negative		Partners' capacity is limited and they are delivering slowly	No familiarity with vouchers	No familiarity with vouchers	No familiarity with vouchers Partners' capacity is limited and they are delivering slowly
	score	3	2	1	1	1

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Geographic coverage *Which of the response option has the widest geographic coverage (in terms of feasibility)?*	Positive					
	Negative			Limited water vendors market in Konduga	Limited water vendors market in Konduga	Limited water vendors market in Konduga
	score	3	3	2	2	2
RISKS						
Programmatic (quality standards) and protection risks *Which response option offers fewer and more manageable programmatic risks, including protection risks for beneficiaries?*	Positive				It mitigates the risk of water quality	It mitigates the risk of water quality
	Negative			No full control on water sold by vendors		
	score	3	3	2	3	3
Operational and institutional risks *Which response option offers fewer and more manageable operational and institutional risks?*	Positive					
	Negative			Possible harassment and undue taxation against water vendors	Possible harassment and undue taxation against water vendors	Possible harassment and undue taxation against water vendors
	score	3	3	2	2	2
Contextual risks *Which response option offers fewer and more manageable contextual risks?*	Positive					
	Negative	Security issues	Security issues	Security issues	Security issues	Security issues
	score	1	1	1	1	1
COSTS						
Costs for the organisation *Which of the response options has lower costs for the organisation?*	Positive					
	Negative	Very expensive				Very expensive
	score	1	2	2	2	1
Costs for the beneficiaries *Which of the response options is most convenient for the beneficiaries (in terms of costs incurred to benefit)?*	Positive					
	Negative					
	score	3	3	3	3	3
Overall score (maximum = 45)		**35**	**37**	**29**	**32**	**32**

Table 14: Comparative table of response options for Objective 2 (suitability and operational feasibility)

OBJECTIVE 2 People are aware of the personal health and public health risks related to poor water and sanitation practices (handwashing, bathing, using latrines) and are enabled to take actions accordingly (they also receive access to hygiene commodities)						
		Response options				
CRITERIA	**Considerations**	(1) Awareness raising sessions on hygiene	(1) Awareness raising sessions on hygiene promotion + (2) cash	[write response option]	[write response option]	[write response option]

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		promotion + (2) hygiene kits distribution	transfer for hygiene commodities (any modality)			
APPROPRIATENESS (TAKEN FROM QUESTION 1)						
Suitability to objectives and target groups *Is the response option appropriate to achieve the objectives, for all intended groups*	Positive	Consistence between the messages and the nature/content of the kit	• Support to local traders' livelihoods Freedom of choice of products			
	Negative	• Recipients may sell the kits → objective not achieved Jeopardise local traders	Recipients may not buy hygiene supplies (also in case of vouchers) → objective not achieved			
	score					
ACCEPTANCE BY LOCAL AND NATIONAL AUTHORITIES						
Acceptance by authorities *Is the response option acceptable for the local and national authorities?*	Positive					
	Negative					
	score					
MARKETS AND SERVICES						
Suitability to existing service systems (e.g. education, health, public water system, other essential services) *Do the local public services and infrastructure have the capacity to support the proposed response options?*	Positive					
	Negative					
	score					
Consequences for the service systems *Will the public service system and its infrastructures be damaged or supported by the proposed response option?*	Positive					
	Negative					
	score					
Suitability of market conditions *Do the relevant markets have the capacity to respond positively, timely and at scale to the proposed response option?*	Positive					
	Negative					
	score					
Consequences for relevant markets *Will the market actors (or other parts of the system) be damaged or supported by the proposed response option?*	Positive					
	Negative					
	score					
IMPLEMENTING AGENCIES' CAPACITY TO OPERATE AT SCALE AND IN A TIMELY MANNER						
	Positive					

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Sector members' familiarity with the modality *What portion of the sector members are familiar with the response option (# of experienced organisations out of total # of members)?*	Negative					
	score					
Capacity to go at scale in a short timeframe (caseload size) *Is it possible for the sector partners to go at scale with the response option, in a short timeframe?*	Positive					
	Negative					
	score					
Geographic coverage *Which of the response option has the widest geographic coverage (in terms of feasibility)?*	Positive					
	Negative					
	score					
RISKS						
Programmatic (quality standards) and protection risks *Which response option offers fewer and more manageable programmatic risks, including protection risks for beneficiaries?*	Positive					
	Negative					
	score					
Operational and institutional risks *Which response option offers fewer and more manageable operational and institutional risks?*	Positive					
	Negative					
	score					
Contextual risks *Which response option offers fewer and more manageable contextual risks?*	Positive					
	Negative					
	score					
COSTS						
Costs for the organisation *Which of the response options has lower costs for the organisation?*	Positive					
	Negative					
	score					
Costs for the beneficiaries *Which of the response options is most convenient for the beneficiaries (in terms of costs incurred to benefit)?*	Positive					
	Negative					
	score					
Overall score (maximum = 45)						

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d) Lessons from pilot

Step 7 (optional) Weighted scoring of sector response options

a) Guidance

Objective / output	Weighted ranking of options based on both suitability to objective and operational feasibility
Question to answer	Which response is most suitable and operationally feasible, based on the weighted criteria?
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts • Protection experts
Required inputs and resources	The weight of each criterion would have been allocated at the onset of Step 6. Previously filled out Table 13.
Available tool	Table 15: Weighted comparison of response options for objective 1 (suitability and operational feasibility) There will be one table per each objective, best if in Excel form, to calculate scores more easily
How to complete the step	1. Write the weight of each criteria (see table below) (columns 2 – 5) 2. Copy down the scores for each criteria and each response option from table 7 above (columns 2 – 5) 3. Multiply the weight by the score (columns 6 –8)
Estimated time required	30 minutes
Notes	This step can be skipped if you believe that all criteria are of equal weight.

b) Session participants

Name	Title	Organisation	Email

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c) Working session output

This session was skipped as criteria were all consider of same weight.

Table 15: Weighted comparison of response options for objective 1 (suitability and operational feasibility)

OBJECTIVE 1 [write objective]											
CRITERIA	**Weight**	**Scores**					**Weighted scores**				
		[write response option]	[write response option]	[write response option	[write response option]	[write response option]	[write response option]	[write response option]	[write response option]	[write response option]	[write response option]
APPROPRIATENESS (TAKEN FROM QUESTION 1)											
Suitability to objectives and target groups *Is the response option appropriate to achieve the objectives, for all intended groups*											
ACCEPTANCE BY LOCAL AND NATIONAL AUTHORITIES											
Acceptance by authorities *Is the response option acceptable for the local and national authorities?*											
MARKETS AND SERVICES											
Suitability to existing service systems (e.g. education, health, public water system, other essential services) *Do the local public services and infrastructure have the capacity to support the proposed response options?*											
Consequences for the service systems *Will the public service system and its infrastructures be damaged or supported by the proposed response option?*											
Suitability of market conditions *Do the relevant markets have the capacity to respond positively, timely and at scale to the proposed response option?*											
Consequences for relevant markets											

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Will the market actors (or other parts of the system) be damaged or supported by the proposed response option?											
IMPLEMENTING AGENCIES' CAPACITY TO OPERATE AT SCALE AND IN A TIMELY MANNER											
Sector members' familiarity with the modality *What portion of the sector members are familiar with the response option (# of experienced organisations out of total # of members)?*											
Capacity to go at scale in a short timeframe (caseload size) *Is it possible for the sector partners to go at scale with the response option, in a short timeframe?*											
Geographic coverage *Which of the response option has the widest geographic coverage (in terms of feasibility)?*											
RISKS											
Programmatic (quality standards) and protection risks *Which response option offers fewer and more manageable programmatic risks, including protection risks for beneficiaries?*											
Operational and institutional risks *Which response option offers fewer and more manageable operational and institutional risks?*											
Contextual risks *Which response option offers fewer and more manageable contextual risks?*											
COSTS											
Costs for the organisation *Which of the response options has lower costs for the organisation?*											
Costs for the beneficiaries											

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Which of the response options is most convenient for the beneficiaries (in terms of costs incurred to benefit)?											
Overall score (maximum = 45)											

d) Lessons from pilot

Nothing to report, as this step was not completed.

Step 8 Final recommendations on sector response options for targeted groups and locations

a) Guidance

Objective / output	Paragraph(s) articulating the sectoral response package for the targeted population group and locations.
Question to answer	What interventions does the sector intend to implement to address the identified humanitarian needs?
Actors to be involved	• Session facilitator • Sector experts • Information management officers • Cash experts
Required inputs and resources	Outputs of all previous steps
Available tool	0
How to complete the step	1. Use the information produced in the previous steps to fill out the empty spaces. The facilitator may assist in carrying out this step.
Estimated time required	30 minutes
Notes	The template may have to be adapted as appropriate.

b) Session participants

Name	Title	Organisation	Email

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c) Working session output

Template 1 Sector response options

Over the next 12 months the WASH sector will provide assistance to communities with low access to safe water (as per survival standards) in Jere, Konduga and MMC. More than one million people across 200,000 households will benefit from this assistance. This is _____ % of total households living in these areas. This assistance will help them to have access to sufficient quality and quantity of water to meet their basic needs (eating/cooking, personal and household hygiene). Communities will have better infrastructure with expanded capacity to offer safe water.

Over the next 12 months the WASH sector will provide assistance to IDPs in any form of camp setting, residing in the same communities receiving the assistance above, but in Jere and MMC only. Around 36,000 people across around 6,000 households will receive assistance. This is _____ (% of total households). This assistance will help them to have sufficient purchasing power to have access to water to meet their basic needs (eating/cooking, personal and household hygiene). They will receive monthly conditional vouchers of 1700 NGN (amount / quantity) in 12 instalment(s) or rounds, on the condition to attend hygiene promotion and safe water sessions.

Over the next _____ (timeframe) the _____ (sector) will provide assistance to _____ (group) in _____ (location). _____ (number of people) across _____ (number of households) will receive assistance. This is _____ (% of total households). This assistance will help them _____ (SMART objective). They will receive a package consisting of a _____ (frequency) _____ (cash transfer modality and mechanism / in kind / service) of _____ (amount / quantity) in _____ (number) of instalment(s) or rounds.

This assistance package will be delivered over _____ (timeframe). Risks will be considered in the following way:

a) _____ (mitigation(s) of programmatic risk(s) including protection risks)
b) _____ (mitigation(s) of operational risk(s))
c) _____ (mitigation(s) of contextual risk(s))
d) _____ (mitigation(s) of institutional risk(s))

The total funding required will be _____ (value of funding).

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d) Lessons from pilot

Nothing to report.

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Annex 1: Terms of Reference: Task Team for Basic-needs Focused Response Option Analysis

(covering Jere, Konduga and MMC)

Background

The Task Team for Response Analysis (hereinafter the Task Team) aims to draw together all the various elements of the ECHO's Enhanced Response Capacity (ERC) funded pilot for the uptake of quality, collaborative Multipurpose Grants (hereinafter MPGs) in Nigeria. This work is led by a Consortium consisting of CaLP, the Danish Refugee Council (DRC), Mercy Corps, OCHA and Save the Children.

In March 2017, the Consortium began the pilot in Nigeria with the aim of providing technical and strategic support to country-based humanitarian organisations, enabling them to engage in collaborative assessments and decision making. Whilst the Consortium has not been conceived to provide direct assistance to crisis-affected populations, it is intended to have an indirect, positive impact on their lives, by means of influencing humanitarian actors to design better quality and more collaborative MPG programmes. As such, it supports and is line with the commitments made by donors and humanitarian partners as part of the Grand Bargain.

The pilot project provides information and analysis for selected LGAs in Borno State:

- Basic needs of crisis-affected people, through the Basic Needs Assessment (BNA)
- Minimum expenditure basket (MEB)
- Market functionality and related feasibility of CTP, through the Multi-Sector Market Assessment (MSMA)
- Payment mechanisms and financial service providers
- Partners' and government's capacity to implement Cash Transfer Programming (CTP)
- Effectiveness of MPG, based on existing experiences

Ultimately, it is hoped that the Consortium's approach will lead to response analysis that is better structured, and more robust, transparent and people-centred. It will consider cash (in its various forms) and in combination and combined with other modalities (in-kind, cash, services, technical assistance, a combination of these) from the start.

Assessment and decision-making tools, their findings (including the recommendations resulting from the response analysis workshop), and learning on the efficiency and effectiveness of collaborative MPGs will be shared with the country-level members of the Consortium, relevant IASC Clusters/Sectors, Cash Working Groups in country, and Cash Consortia (if any), as well as other key stakeholders in the pilot context. The pilot will help the humanitarian community make more effective and wider use of MPGs, if and when appropriate and feasible.

To do this, the Task team will play a key role in linking the information generated by the Consortium to the response analysis and linking it to the broader and multi-year Humanitarian Response Planning (HRP) process for North-east Nigeria, which will take place between end of August and October 2017.

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Objectives and Expected Deliverables

The Task Team will identify possible response options based on needs and feasibility utilising the information collected through the Consortium's assessments, with a focus on the areas targeted by the pilot in Borno state (Jere, Konduga, MMC). Because of this geographic coverage, the Task Team will be based in Maiduguri.

The key deliverables will be:

- Additional analysis of the raw data from the Basic Needs Assessment, by sector
- A note validating the findings of the Basic Needs Assessment which will feed into the Humanitarian Needs Overview (HNO)
- A note validating the findings of the Consortium's other assessments (MSMA, payment mechanisms assessment, Partners' and government's capacity to implement CTP)
- A note on concrete recommendations to OISWG for priority interventions to be implemented in the short and medium term to address basic needs of specific groups of affected people.[7]

Timeline and Workplan

The Task Team will be established in early September. Initial activities relating to the review of assessment outcomes will be followed by a response analysis workshop at the end of September (exact dates tbc), in order for the Task Team's outputs to feed into the Nigeria HNO Needs Validation and HRP Response Analysis Workshop in at the end of September / early October. Depending on the final dates of those processes, the timeline may need to be adjusted. After reporting to the OISWG the Task team will be disbanded.

When	Action	Location and details	Deliverable	Focal point
28th August – 1st September	One-to-one consultations with sector leads **in Abuja**	Abuja	Buy-in from sector leads at Abuja level	Francesca Battistin (Save the Children)
6th September	Formation of task team at the joint OISWG/CWG meeting	Maiduguri Meeting invite sent by Ibrahima Barry	• TORs of Task Team validated • Task Team composition	Ayo and Ibrahima (OCHA), **Maiduguri**
11th – 15th September	One-on-one working sessions with Sector representatives in Task Team for: (1) validation of the Basic Needs Assessment findings; (2) presentation of key findings from other assessments run by the	Maiduguri **One working session of 3-4 hours** with each sector group	• Assessment findings validated by each sector (discarded the non-plausible ones, added complementary information, confirmed plausible findings) • Sector HH expenditure figures • Profile and size of groups in need • Assistance objectives by group	Nathalie Cissoko (CaLP)

[7] The key strategic, programmatic and technical decisions that would result from this process will include: Priority population groups in each area (HNO); Priority needs of each population group (HNO); Operational Environment/Feasibility; Critical markets to be supported or to operate through Critical **systems of service provision** to be supported or to operate through; Response options / assistance modalities (cash transfers, in-kind, services/technical assistance, combinations); If In-kind: what items; If services provision: what services or technical assistance; If Cash transfers: sector-specific (one or more sectors) or multipurpose; If Cash transfers: what modality; If Cash transfers: what amount; If Cash transfers: what transfer mechanism; Which aid delivery organizations, where, when; Beneficiary targeting approach and mechanism.

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	consortium by consortium representative; (3) presentation of other findings by the sector; (4) definition of groups & objectives (**in Maiduguri**)			
18th – 22nd September	Review (reading) of assessments reports by Task Team; additional analysis of BNA raw data	**No meetings**, this is desk review work by the groups	• Additional analysis of BNA raw data • Good grasp of all assessment findings • Questions and observations	Task Team
25th – 28th September	One-on-one working sessions with Sector representatives in Task Team for identification and comparative analysis of response options **in Maiduguri**	Maiduguri **One working session of 3-4 hours** with each sector group	• Response options for each sector objective • Comparative analysis of response options (operational risks, programmatic risks, costs, market feasibility, FSP, etc.)	Francesca Battistin (Save the Children)
29th September	One day workshop with Task Team **in Maiduguri**	**One day workshop** with the Task Team in plenary	• Integrated response plan (any linkages among sectors) • Decision: a state or an LGA-based MPG value? • Composition of MPG and tentative value(s)	Francesca Battistin (Save the Children)

Composition

The Task Team is a sub-group of the Operational Inter-Sector Working Group (OISWG), coordinated by OCHA in Maiduguri and with the technical support of ERC Consortium Members. More specifically, the Task Team will be led by the OISWG Coordinator and the CWG Coordinator, who will also act as co-spokesperson on behalf of the group.

The Task Team will include two-three representatives from each sector of the humanitarian response (the sector lead based in Maiduguri or a sector specialist with decision making power/influence in the sector, and Information Management Officers), as well as cash experts from the Maiduguri Cash Working Group (CWG). The former will validate the priority needs and consider interventions, whereas the latter will provide expert advice on if and how cash can be used to address priority needs.

Membership is voluntary but it will be strongly encouraged as participation will provide active partners and sectors with in-depth information and guidance on how to prioritise multi-modality interventions, in line with the commitments of the Grand Bargain. This will be an advantage to both individual actors and the sectors they represent.

Roles and Responsibilities

The Task Team will

- Contribute suggestions on how best to formulate this workshop based on the task teams' experience between now and then
- Undertake a desk review of the findings of the ERC Consortium's assessments, distilling the most relevant ones
- Conduct additional analysis on the raw data of the BNA
- Make available additional assessment findings to complement those of the ERC Consortium
- Establish and estimate size of the groups in need in the three LGAs; establish assistance objectives for the identified groups

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- Identify possible response options based on the established objectives
- Make a final recommendation on response options based on operational feasibility, in a workshop to be organized and facilitated by the Consortium at the end of September

Within the Task Team, the sector representatives and the cash experts will bring their respective expertise.

The Task Team Coordinators will

- form and initiate the Task Team, raising awareness on the Consortium's work and collecting expressions of interest.
- represent the group to the OISWG (when the group report on their response analysis recommendations) and will also likely chair meetings and ensure decisions are made on time and in an effective manner, and that are effectively documented.
- will participate in the wider HNO process and present the BNA and other findings validated by the Task Team during the HNO validation of state-level needs.
- will document the results of all the work undertaken by the Task Team, with the support of the Consortium members.
- will advocate for the Task Team's recommendations to be reflected in the HRP to the extent that is appropriate and possible.

The Consortium members will provide technical support and facilitation of a structured approach to identify response options. Each partner will provide the technical guidance for the data produced by their tool and Save the Children, in its capacity of Consortium lead, will provide additional coordination support in the preparatory phase (by preparing, as necessary, the workshop concept note, the agenda and presentation power points). OCHA will ensure either adequate agenda time has been provided at a regular OISWG, or dedicate a specific meeting to this (depending on how much time is required). Any feedback or follow up from sectors would also be collated by OCHA and supported as required.

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Annex 2: Mission Report: Sector groups consultations

Maiduguri – 11-15 September

Purpose of the mission

The ERC consortium led by Save the Children (OCHA, DRC, Mercy Corps, CaLP) is funded by ECHO at global level to develop and pilot tools to enhance MPG preparedness and uptake in 2 countries. Nigeria was selected to be the first pilot country, and tools developed by the consortium's members have been piloted in country since March.

As part of the consortium, CaLP led a mission to Maiduguri to share findings of the assessments done in 3 LGAs in Borno State (Jere, MMC, Konduga) with sectors, to review, enrich and validate those findings and facilitate their inclusion in HNO / HRP process. Sectors met were Protection, WASH, Early Recovery, CCCM/NFI/Shelter, FSL and Education. Assessments shared with sectors, all covering the 3 LGAs mentioned above were:

- Basic Needs Assessment,
- Financial Service Provider Assessment,
- Multi Sector Market Assessment (Charcoal and Core Relief Items, Low Income Rental, Water)
- Organizations' capacity to implement CTP
- Authorities' acceptance

Main conclusions

1) Interpretations of findings

- *Different situation in 3 LGAs:* almost all sectors agree that the situation in Konduga is the worst. Less access to assistance and less government support, and larger proportion of IDPs among the population. Level of expenses is higher and population has specific priority needs (shelter). Jere has a particularly high proportion of people with specific needs (separated minors, pregnant and lactating women, people with physical disability, to be monitored and further analysed) and is also characterized by better access to natural resources / own production (though farming has now almost completely stopped). MMC is more stable and can be targeted for early recovery actions, but costs of services remain high and HHs need support (education).

- *HHs expenses higher in Konduga:* at first, this was surprising for several sectors but all had explanations and interpretations to support it (distance, service availability, type of construction, most severe needs and gaps…). No other assessment is available to confront results.

- *Very high level of expenses declared by populations before the crisis* in comparison with average income.

- *Discrepancy between shelter in need priority and level of expenses dedicated to housing:* May be explained by the amount that is proposed for the simulation (10 000 Na).

- *Distance to markets:* communities are very small but access is not only distance; markets are randomly closed, movement restriction and insecurity. Roads, rains are not a major problem.

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2) Further desired analysis

- *Risk of diversion by men;* who should receive the cash? Protection and FS have different interpretations.

- *Analysis by gender*: for preferred assistance, occupied m²/gender and age, and discrimination to service access (WASH)

- *Impact of cash on protection:* children queuing to collect water for free, would this stop with cash?

- *FSP Selection:* look at local systems, how do people living here get paid in Maiduguri?

- *Impact of humanitarian aid on WASH market:* is water trucking destabilizing provision and access to vendors? What impact on prices?

- *Multi Sector Market Assessment:* analyse further dynamics between overcrowded housing and prices, low income rental assessment in Konduga and Jere, and timber market in Jere. Assess, among the 93% declaring having a market within a 2 hour distance, how many is less than 1h distance.

3) Recommendations

- *FSP selection:* look carefully at delivery mechanisms, consider familiarity and financial literacy.

- *Single delivery platform:* FSPs are not ready yet to go at scale, coordination and capacities of cash actors need to be strengthened. Moving bit by bit.

- *Use more local partners to deliver CTP*

- *Cash coordination:* requires further strengthening, still need to mainstream cash in intersector coordination. Need to lead collective discussions with FSPs, to acknowledge their needs for support and to provide technical input. Preparedness.

- *Be careful with quality of services:* Water (transport, collection and storage) and medicines.

- *Safe energy:* do not encourage use of charcoal. Check what development actors can do, expertise from FAO / UNHCR. Work with sub group on safe energy.

- *Build contingency capacities and flexibility:* switching modalities depending on season, market access…

- *Sensitization*, whoever gets the cash, aid is for the HH.

- *Participation of Health / Nutrition and protection sectors:* give comprehensive understanding, in MPG each sector contributes to achieve cross sectoral outcomes (MPG – WASH or FS components contributing to Health / Nutrition outcomes), consider secondary expenses (transport, incentives, gradation…)

- *Target*: MPG should not only target IDPs and build the ground for recovery.

- *M&E:* understand intertwined impact of sector outcomes. M&E for MPG is ideally not a sum of sector indicators but understand the global impact of humanitarian aid on beneficiaries' well-being. (Ex: giving food can increase schooling, NFI have an impact on health etc).

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- *Amount:* most of CTP being distributed is already beyond working rate. Start discussions early with authorities. Entry point for advocacy / discussions; incomes from work can be 2 by HH, MPG is 1 transfer per HH.

Detailed notes from the meetings

Protection – 12/09/17 9.00 – 11.30

Participants:

- Josiah Flomo (UNHCR, sector co-lead)
- Anil Mani Acharaya (UNHCR)
- Mohammed Farah (UNICEF)
- Michael Ajwang (UNHCR)

1) **BNA**

Weaknesses

UNHCR is focusing more on returnees but this is not a category assessed in the BNA (to be clarified with the raw data). This category is priority for UNHCR and has very specific needs (shelter for example, that would be a much higher priority than what is assessed in the BNA). Also specific risks (tensions between IDPs occupying abandoned lands/houses and returnees)

Strengths

Findings are very good, provide comprehensive vision of assistance and help tailor assistance in different LGAs and for different types of populations. All cash actors with specific sector objective (shelter, food) have seen in PDM that cash is spread over a large range of needs, but still no real "MPG" in place. Really highlight the need to keep flexibility and to do micro level assessments. For future assessments, need to engage at early stage with protection actors to know what kind of data the sector needs to capture.

Distance with markets (within 2 hour walking) can be preoccupying and need more detailed analysis.

2) **FSP assessment**

Findings are all relevant. Participants will go through the full report and provide more feedback.

Inputs: UNHCR is linking with the Government pilot SP programme (CCTs) in Borno State for future exit strategy.

MoU with 6 organizations (including WFP) are setting up one delivery platform with 1 FSP, but mid-term approach (hopefully 2018). Because of security and difference between areas they are for now using implementing partners for 2016-2017 while building capacities and preparedness to move to 1 single delivery platform. Moving bit by bit = harmonizing procedures, building staff capacities, sensitization of beneficiaries… When at response analysis stage, look carefully at delivery mechanisms, consider familiarity and financial literacy.

3) **Acceptance & capacity assessment**

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Findings are in line with UNHCR's experience: Government is giving direct cash in camps, beneficiaries are familiar with cash and banks in urban areas.

Complements:

- Capacities in CTP remain limited.

- Several reports of men taking second wife after receiving cash

- Risk of children not getting the cash or its result (nutrition outcomes for example) = mitigation measure is also how we calculate cash to ensure CTP distributed is covering basic needs to protect sector specific outcomes (if food needs are not covered, higher risk of diversion of CTP for nutrition outcomes)

- Lack of assessment on sharing and redistribution of cash within communities. It's not ones receiving and others non-receiving, it's more complex. Should be taken into consideration when assessing risks and tensions in communities.

Recommendations:

- Use more local partners to deliver CTP

- Protection WG position: unless in case of woman-headed HH, cash should be given to men

- Need preference analysis broken down with gender; very likely that women would prefer in kind, because of time, risk exposure, risk of diversion and HH conflict with husbands because of cash.

- Same for child-headed HH, the group expressed concerns that cash is distributed to those. CTP is not appropriate for this profile. If combined with other modalities, risk that cash is seen as "pocket money" or that handling money would scare off children.

- Cash coordination requires further strengthening + still need to mainstream cash in intersector coordination. There are now active CWGs in Yola and Damaturu

4) MSMA

Only final recommendations were shared. More info was shared from UNHCR: their experience is that in newly liberated areas vendors are coming. In IDPs in camps, movements are restricted by military so cannot go to markets as they want, and markets will not mushroom much. But still, it's expected that with cash vendors would come closer to IDPs sites; where there is demand, vendors will go. In Konduga there is less dynamism, but globally vendors have access to escorts to conduct commodities. Scoping and learnings should be done bits by bits.

Humanitarian actors, FSPs, vendors… there is a collective will to go back to the field and provide support anytime possible.

5) Beyond findings

Profile & Size of priority groups: Returnees, IDPs, host communities and population in inaccessible areas + populations in newly liberated LGAs in the coming months. The group will get back to the consortium for more info on group size and objectives of assistance.

WASH – 12/09/17 2.00 – 5.00

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Participants:

- Souleymane Sow (Unicef, lead of the WASH sector)
- Michael Ajwang (UNHCR)
- Hailu Teka (INGO Forum, technical lead of the CWG)
- Bethal Ukazu (IOM)

1) **BNA:**

Assessment findings are in line with what the sector observes, especially on priority needs & population most affected. Konduga is prioritized by the Wash sector, hot spot for humanitarian needs. Jere is now also being prioritized because of Cholera outbreak, but there are capacities and response in place.

Food and shelter are indeed top priorities, all health structures are overcrowded. Potable water comes after.

Causes for unmet needs; WASH Sector working a lot on discrimination because of prejudice that would be a major obstacle. Very informative to see that assessment said the contrary (though discrimination is higher for access to water than for other sectors). Remark: disaggregated data by gender may give another result.

- Remark on "natural resource". No natural resource in Northern Nigeria gives access to potable water. Either take it out or put it as non-potable water. Rain collection is not a common practice in the region. Even if, it would not be put as potable water as conditions of collection and storage are poor.

- Distribution of cash across needs with a 10 000 Na unrestricted grant: shelter may come lower than needs identified because the amount is too small to cover housing, so not prioritized. Also largely depends on profile of the population.

- It was expected that expenses for potable water would be higher in urban areas (MMC) but not confirmed by assessment, on the contrary. Possible interpretation: more service providers in MMC (public & private actors), which may lower the prices. Higher prices in Konduga would need more analysis.

- Balance of preference between cash (lack of purchasing power being seen as main cause) and inkind = IDPs in camps may prefer to get inkind as water available in sufficient quantity and quality. Part of service provided by Local / national authorities and humanitarian aid is huge, which may explain preference for inkind (but this preference is balanced in the graph). Urban areas may prefer cash, because of good access to vendors. Maybe switching modalities depending on season (see MSMA for findings on seasonality). In host communities, children are sent to queue to collect water (free below 10 L) => concerns for child protection. What would be cash impact on this situation?

Expenses on hygiene / sanitation, hygiene commodities and potable water are well reflecting the needs.

2) **MSMA:**

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- Question on capacity to expand: OK on production, boreholes should be able to cope with increased demand. However concerns that needs are not currently fully covered per HH (Sphere Standards). Issue will be on transport capacities and storage.

- Validate the idea that transport and distance are the main factors influencing prices.

- One thing that is missing is water trucking activities from humanitarian actors that must be impacting availability and prices + availability of vendors (who prefer to contract with organizations rather than selling water to HH). Should be assessed.

- Proposed activities: maintenance and trainings are not relevant. There are available skills + wash committee in charge for each borehole. Committees should be made more formal, should be linked with the Ministry to make them accountable.

- Water vendors association exist but no assessment and no formal information. Need a mechanism to connect vendors and customers, there is a huge gap here. Cooperatives could support IDPs reintegration.

- Not only Sphere Standards apply but also the Nigeria Water Act. For infrastructure rehabilitation also skills are available and ongoing initiatives led by development actors (UNDP, WB). Avoid overlapping with dev actors.

- Cash seems appropriate in MMC and Jere, some vendors also in Konduga but service provided by humanitarian agencies & governments seem to be appreciated by populations. Attacks to get food in IDPs camps guarded by military were reported in Konduga. Would need further risk & security analysis for all modalities at LGA level with Oulemas, in Konduga particularly.

- Disagreement about the 9000 Na for water. Calculation is not based on 2011 Sphere Standards. Need to be recalculated considering that HH is getting 140L per day (7 jerry cans), taking an average of 8 persons by HH (not 6 as usual average but 8 to align with BNA and consider specificities of IDPs).

3) Beyond findings

HH expenditure figures: see above. Discussion about standards, not clear if there is a gap.

Profile & Size of priority groups:

In priority order: Konduga (188 117 individuals, should all be considered. Severe needs + cholera and hepatitis epidemics.) Jere (607 063 individuals) and MMC (1 030 217) all 3 LGAs are already prioritized by Unicef and WASH Sector. In the last 2, priority groups will be defined in HNO, but in any case IDPs, all people living in camps (formal & informal), IDPs in host communities, host communities, refugees, population affected by epidemics. Possible additional prevention activities in highly exposed areas. Risks of contamination within camps + poor WASH conditions. Jere and MMC are cholera endemic areas, because of travellers that are more likely to return to those LGAs rather than in Konduga (because of restricted movements in that LGA).

Objectives of assistance:

All 3 sub sectors would be priority (Water, Hygiene, Sanitation). Priority would be quality and continuity of assistance.

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Ensure humanitarian imperatives (Sphere standards) are met. Ensure basic needs are covered, no "comfort" interventions (that could happen in Yobe and Adamawa but not in the 3 LGAs mentioned here).

Early Recovery – 13/09/17 9.00 – 12.30

Participants:

- Bernard Lukwiya (Sector coordinator UNDP)
- Emmanuel Ufot (IRC)
- Bethal Ukazu (IOM)
- Hailu Teka (Technical lead of the CWG, INGO Forum)

1) BNA

No much info on livelihoods in the BNA. Very disrupted in MMC.

Findings of the BNA generally capture well the situation. Low severe needs in MMC. Healthcare / Education is indeed an important need, because of destroyed infrastructures, no hospitals etc.

Education profiles are very much in line with assessments they have.

Lack of purchasing is a very big issue in their sector, because of disrupted livelihoods. Debts and major expenses on food are major issues to consider early recovery.

Agreement on how people get what they need. MMC have more accessible and well working markets. In Konduga, SC and IRC are doing CTP. Appeared to be an appropriate modality and very efficient to address needs. In this LGA particularly, there is little support from the Government especially on food.

Production is much lower than 5 years before, cant' go beyond a radius of 1 to 2 km around home so very difficult to crop. In Jere, security, quail birds are causes why all farming activities stopped.

MEB: average amount is overestimated. There will be challenges in aligning with the SSN as the government is giving a 5000 Na grant / HH / month (+ top up of 2000 Na for nutrition). FS basket has managed to go per capita (3500 Na / Per / month). Take into account social / cultural systems, supporting livelihoods; some of the needs they managed to cover prior to the crisis were covered by borrowing within the community, may not be purchased as such. Not because they said a value that they were actually spending that amount of money. Average income is said to be 15000 Na per month, not coherent.

Reminder: MEB is not the transfer amount but also advocacy tool to get as close as possible to covering actual needs.

Why Konduga is so high in comparison to MMC? Level of expenses between all LGAs is questionable.

Possible interpretations:

- MMC has more access to many basic services, which may decrease pressure on prices.

- Can be linked to higher number of HH members in that LGA?

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- Shelter commodities and all commodities in Konduga are coming from MMC. So even before the crisis prices were higher in Konduga than MMC (transport, police taxes etc). Houses in Konduga also require typical maintenance.

- Bias: expenses are based on declarations

10 000 Na restricted grant: agreement on interpretation that shelter may be lower than for top basic needs identified as amount provided do not allow to cover housing. Also different findings per group, should be disaggregated.

2) MSMA

Core relief items

- What are the rental costs on different markets?

- Could we have %age of male and female vendors on markets?

Different prices and market integration: Monday market is bigger so price are lower and other markets are fed from there, so ok that prices are lower than in other markets. But no consistent for all items: other vendors and markets may provide items to Muna Garaj and Custom markets.

Interpretation of differences in prices and seasonal increases: poor integration, structural factors impacting prices in each market (access, transports, taxes etc).

Vendors' declarations should be taken carefully. Though it is realistic to say that offer should adapt rapidly (no major shortages), it's likely there will be an increase in prices.

Recommendations on support to traders are in line with requests received by the sector. Financial service is important, and market place improvement is a top priority. It's important to improve security on market places, as insecurity is preventing customers to spend time shopping on markets.

Other recommendation: check with FAO is possible to distribute transformed ovens to provide alternatives to the use of charcoal and avoid increased demand. Check what UNHCR is doing in camps.

Low income rental

OK with findings. Because market is saturated and many sub optimal housing units, risk that giving CTP would encourage access to sub optimal rental, but ok to give directly to landlords for those already occupying housing to avoid eviction. Then need to give a tent for those not finding housing to avoid increasing the gap.

Very hard to reach Sphere Standard for shelters. Number of people per shelter is often beyond standards.

3) FSP assessment

Hawalas-alike systems not yet regulated in Nigeria; could not this be considered?

Adapted procedures: instead of registering all beneficiaries' SIM Card with biometrics data and pictures, IRC is buying all Sim Cards from mobile phone operator and matches cards with beneficiaries.

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Mobile Money operators are not reliable at all, would not recommend to use any of them.

Less optimistic than key findings: expansion of FSPs is very unlikely. There is no business opportunity for them, except if cash coordination improves and actors comes together to negotiate as a group.

4) Beyond findings

HH expenditure figures: CFW was done for returnees based on needs, not aligned on official rate but not creating competition with labour market. Will share info on how it was calculated.

Profile & Size of priority populations:

MMC is for now the priority areas, and host population is the priority group.

Objectives of assistance: Restore social coalition and livelihoods of returnees, provide services for those already in the area, and restore market services.

Livelihood interventions as complement; providing inputs and pre-financing businesses.

Ensure that all humanitarian interventions are linked to a longer term perspective, what will happen in 5 years of time?

CCCM / Shelter / NFI – 13/09/17 2.00 – 4.00 pm

Participants:

- Brice Degla (UNHCR)
- Alex Nwoko (IOM)
- Michael Ajwang (UNHCR)
- Bethal Ukazu (IOM)
- Hailu Teka (Technical lead of the CWG, INGO Forum)

1) BNA

Be careful and consistent with sectors' terminology: "tents" for Emergency shelters? Collective centres = Camps? Formal and informal? What about transitional shelters?

Severity of needs would be probably different if broken down by sectors. Very little has been done in terms of shelter and NFIs, severe needs may be higher or different across LGAs. Period of assessment is also key, lot of this information has changed since May: in the last 3 months, population in Jere and MMC has dropped because people are back to camps closer to their home.

Causes for unmet needs is well reflecting what they observe. Also for how they get what they need, though a few comments:

- Jere: makes sense that natural resources are more used (timber, more natural landscapes in that area)

- MMC: IDPs are more in permanent constructions, so would be expected to have higher number of IDPs purchasing on markets, but proportions are probably impacted by the high number of Emergency Shelters built by humanitarian actors in this area.

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- Konduga: Level of support from NGOs is not reflecting what is really happening. Highest number of interventions are in this LGA (and was also the case in May). Proportions may be explained by the total number of IDPs there.

- Konduga is placing shelter / housing as a top need, more than other LGAs + need support to get materials. If they received an Emergency Shelter several months ago beneficiaries may not consider it good and do not declare it

MEB: Konduga is not reflecting reality (same concern than with other sectors). Expect MMC to be higher (but no assessment to confirm it). Interpretations:

- Access to markets can explain higher prices in Konduga

- Distance = the most we get far from MMC the most prices increase. Check relation distance / price

- Labourer can be more expensive; because Konduga is not using much natural resources, maybe they use labourers to build housing.

- Period of needs may also explain = if we'd do this assessment now that people are settled, maybe costs for shelter and shelter commodities would be lower.

Oxfam MEB: categories are not aligned with Shelter / NFI categories. Need more background information on how it was developed.

NFIs are very high in level of expenses, which is normal.

2) **MSMA**

Findings of MSMA are ok.

Would be interesting to analyse further dynamics between overcrowded housing and impact on prices. Assess occupied m²/person & segregation by gender and age and by group profile.

Findings of low income rentals market are very expected. From the sector's assessment, camps especially in Konduga are particularly suffering from congestion. Rental is not a very used option for housing / shelter. What would be more interesting would be to do this assessment in Konduga and Jere and for timber market in Jere.

Government policy is to build emergency shelters now in original places. In 2018 there will be no more emergency shelters.

Market map is OK but.

Paying directly to landlords in not sustainable.

3) **FSP assessment**

Bama, Gana, Damassak; those are ghost cities, absolutely no FSP around. Coordination of humanitarian actors is key for negotiation. Need to acknowledge the need for investment and support to FSP for expansion.

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Organizations and assessment are focusing too much on digitalized cash, online payments. There are vendors, big vendors, militaries, civil servants who still work in those areas, those people are getting paid and not coming to MMC to queue at the bank to get their money. We need to observe how local systems are doing. Local actors can deliver cash for partners in areas they can't reach, taking commission. Those options can be limited in terms of scale, but should be considered.

4) Beyond findings

HH expenditures: standard kits value will be shared

Profile & size of priority groups:

Top priority will be IDPs in host communities for which there is less interventions and larger population. IDPs in overcrowded camps (collective centres). Konduga and Jere will be top priority.

Objectives of interventions: Provide adequate shelter (all 3 phases: emergency, temporary and permanent shelters) for HH in host communities. Cash could be useful for rehabilitation.

FSL – 14/09/17 9.00 – 12.00 pm

Participants:

- Moustapha Touré (WFP)
- Fisayo Jassey Jabarr (FAO)
- Edwin Too (FAO)
- Usman Buhari (FAO)
- Lovermore Dumba (ACF)
- Kudomi Damidola (FAO)
- David Kato (ADRA)
- Hailu Keta (Technical lead of the CWG, INGO Forum)

1) BNA

Severe needs are well reflecting reality in terms of priority locations, but IDPs in host family are probably higher than said.

Means of getting what they need: debate over whether the government is actually providing more than declared by populations. No assessment to inform this.

Possible interpretation; at the time of the assessment the government was doing less but is now increasing its contribution.

Distance with markets: 2 hour distance is too much, communities are very small. Would be interesting to see among this 93% how much is less than 1h away from markets to have a better idea of access. Rapid assessment from WFP in Konduga. Access is not only distance, markets are randomly closed and accessible + movement restriction and insecurity preventing beneficiaries to actually access markets. Roads, rains are not the problem.

In Jere, proportion of needs covered by humanitarian aid must be much higher now. Triangulating with the Lean Season response Plan; 62% of needs covered by assistance (for people ranked from 3-5 IPC. Maybe population is not exactly the same, but still cover IDPs + hosts).

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Cross check with HEA. Ministry of agriculture could also provide explanations on why level of expenses is different across LGAs.

Level of expenses for Konduga on shelter and shelter commodities is not surprising, because the type of constructions requires a lot of maintenance, often re buying materials to repair their shelters. Construction materials are also more expensive.

Average amount of total expenses is probably over estimated. Preferred assistance: across board cash is largely preferred. Regarding concern raised with protection group on disaggregated data for women, ACF data from PDM show that even when asking preferred assistance separating women and men, all groups will in average largely prefer cash. In MMC in particular. In areas like Monguno is a bit different, prefer inkind because markets are not well functioning.

Few cases should not be generalized. On the contrary to protection WG, the group encourage to give money to women (the Governor of Borno also made that recommendation), keep it flexible. Both groups (FS and protection) should discuss, cash and food have same risks according to the group. Need to do sensitization that money is given for the HH (whether it is given to men or women).

Issue is that not enough assessments are available to measure what is the higher risk (in terms of occurrence, not impact) between diversion (if cash is given to men) and HH tensions (if cash is given to women). Even impact is not obviously higher: risk for women in case of HH tension but risk of abandon/malnutrition etc in case of diversion.

2) **MSMA**

Charcoal is a major concern. There is a WG being set up to work on safe energy (environment and safety).

Regarding scenarios: MPG should not target only IDPs, host communities should be included.

Amount for WASH on MSMA is not correct (see discussions with WASH sector, on Sphere Standards, costs etc). Depends on water quality but in any case it is not accurate.

3) **FSP assessment**

MoU with WFP and other organizations; shared mid-term (not immediate) objectives, working together to get prepared for a single delivery platform. Role of the CWG on preparedness and negotiation with FSPs.

4) **Beyond findings**

Priority groups and size:

IPC 3-5, IDPs in tents & collective centres, especially informal camps + pay attention to host communities. But based on socio economic vulnerability, not on status. Priority location would be Konduga where there are the most severely affected people, total reliance on aid. MMC will come second because it has the largest part of IDPs. Jere the last. Size is determined by Cadre Harmonisé.

HH expenditure figures: food basket, per capita. The value per capita is too low for 1 isolated person with specific needs (elderly for example). Maybe consider a top up for people with specific

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needs? Approach per capita is so very much appreciated by large HH but not much by very small HH.

Objectives: Meet their immediate needs and prepare recovery, increase capacities of resilience.

Education – 14/09/17 3.00 – 5.00 pm

Participants:

- Charles Michael Mwagi (Unicef, sector co-lead)
- Richard Baker Sennoga (Unicef)
- Hailu Teka (Technical lead of the CWG, INGO Forum)

There are lots of consumables in education, (uniform is critical for schooling, school materials) currently school kits are coming from Copenhagen.

1) BNA

Konduga; needs are indeed more severe because almost all camps are informal, which explain also why little is provided by the Government.

Source: DTM Round XV, now round XVIII. A bit outdated.

On top needs, other assessments would put education on top 3 or 4 priority needs (higher than the BNA). Interpretation: those other assessments are covering all 3 states (including Yobe and Adamawa where needs are more "live saving" so may influence general ranking of needs. Also, low priority of education commodities and service does not mean that education is not a top priority needs. Education outcomes like increased schooling can be achieved through food sec / health or other sector outcomes. Impact of food on schooling for example is not assessed, MPG could enable this.

2 ACAPS consultants will come in the coming 2 weeks to do an assessment on education system in 3 North East states. Access, quality etc. Findings could be available in October.

Education profile: sector don't have recent assessment or available data but seems to reflect reality.

IDPs are most affected by host families. But host families are also impacted; fees charged by school are higher, HH have to buy everything, classrooms overcrowded = drop out from host families

Situation where some children have not been to school for the last 5 years, some aged 18 yo have never been to school. Reintegration is very hard. Very low investment and support in education. Even since the Oslo Conference where education was in the top 3 priorities with nutrition and health, very little was done since.

Sector would like to do specific assessment for people with disability.

Level of expenses: distance is key to determine costs. Konduga is so unpredictable. MMC demand is higher but offer is also higher. More private institutions that are expensive. At the end, higher gaps in education service. More offer in number but not comparing with population.

2) Beyond findings

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Priority group and size: children from 3 to 17 (primary school), IDPs and host communities (so mixed in this context, don't want to discriminate between IDPs and returnees). Right based approach, prevent illiteracy.

HH expenditure figures: would need to do price monitoring / frequency / units but main items would be:

Children	Teacher	Schools
Notebook	Housing or other incentive	Learning desks
Ruler	Incentives for extra lessons	Dark plates
Scissors	Incentive for Double shift	Markers
Maps	Notebook	Chalks
Pencils	Pens	Food
Rubber	Bag	
Geometric set	Umbrella	
Mats	Big ruler	
Sandals		
School uniform		
School Bag		
Text Book		
Sanitary pads for girls		
Soap		
Tooth paste		
Tooth brush		

Objectives of assistance:

Ensure that children complete primary education, give children opportunities in life.

When boys and girls achieve basic education = lower malnutrition, lower child mortality in next generation.

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