# Essential Needs Analysis

# Northwest and Northcentral Nigeria

(Sokoto, Zamfara, Katsina, Benue, Niger, Kaduna)

Key Findings from the October 2021 & February 2022 Assessment reports

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# I.    About this Report

This report is published by the World Food Programme, with support from the National Bureau of Statistics (NBS), National Programme for Food Security (NPFS) of the Federal Ministry of Agriculture and Rural Development (FMARD), National Population Commission (NPoPC), Food and Agricultural Organisation (FAO), Famine Early Warning Systems Network (FEWSNET) and cooperating INGO partners.

The report presents key findings as extracted from the October 2021 and February 2022 Assessments.

The main objectives of the October 2021 and March 2022 ENNA are as below:
- To provide comparative analysis on unmet essential needs among both general population and internally displaced populations (IDPs);
- Estimate the prevalence rates of global acute malnutrition (GAM) among children aged 6-59 months through MUAC from all coverage states;
- Support the design of interventions by recommending appropriate programme responses;
- Inform the October 2021 and March 2022 Cadre Harmonisé analysis and, programmatic decision making towards ensuring optimal planning, targeting and operational efficiency of humanitarian assistance.

**Context:**

Northern Nigeria has faced regular conflict incidents including recurrent banditry which has resulted in increased population displacement and disruption of lives, properties, livelihoods, and capacity to meet essential needs. In the states of Sokoto, Zamfara, Katsina, Benue, Niger, and Kaduna states, more than a million people have been displaced according to the International Organisation of Migration (IOM). The socioeconomic impact of COVID-19 pandemic, including high food inflation rates – exceeding 20 percent in 2021 – have further eroded households' purchasing power and added to the precarity of household's food security situation.

# EXECUTIVE SUMMARY

- The March 2022 Cadre Harmonise findings highlighted that 6.4 million people from the assessed six states are acutely food insecure during the June – September 2022 period, marking an increase of over one million people compared to last year.
- IDPs show higher prevalences of poor food consumption compared to the general population. Compared to February 2021 ENNA assessment[1], trends for IDP food consumption reveal a worsening food consumption among IDPs in Zamfara state, which has seen a 14-percentage point increase in poor food consumption in February 2022 as compared to February 2021.
- Malnutrition remains a concern in the northwest and should be closely monitored. The October 2021 Global Acute Malnutrition/Middle Upper Arm Circumference (GAM/MUAC) screening showed that while the GAM/MUAC prevalence was below the emergency threshold of 15 percent, in some states - IDP children under five were twice as likely to be malnourished compared to those from the general population.
- IDPs are more likely to engage in crisis or emergency livelihood coping strategies, with nearly a third of IDP households reporting use of at least one emergency livelihood coping strategy in February 2022.
- More than 40 percent of IDPs in Sokoto and Katsina show severe multidimensional deprivation, compared to just less than 20 percent of general population in these states. On the other hand, IDP households in Zamfara show similar levels of severe multidimensional deprivation as the general population, at around 20 percent.
- Food assistance is cited as the main priority for both general population and IDP households. In terms of main priorities for IDPs, food assistance was cited as a first priority by 80 percent of households, followed by shelter and livelihood support (over 30 percent) respectively.
- Conflict/insecurity was reported as the most significant shock by majority of surveyed households – both general population and IDPs -- with the highest prevalences reported in the states of Katsina, Sokoto and Zamfara. The second most significant shock cited is high food prices, followed by loss of employment or reduced income. IDPs were more likely to report general unsafe feeling, temporary displacement, and destruction of houses, land, or property as critical concerns. On the other hand, general population households were more likely to report debts, high fuel and transportation prices and crop failure as significant shocks.
- Conflict and insecurity have lasting impact on agriculture and livelihoods. In the [2021 high-resolution satellite imagery analysis](#) conducted by WFP with the EU-Joint Research Centre decrease in agricultural crop land in both locations. Significant crop losses were observed in Sokoto state (Rabah LGA), Zamfara (Anka and Maradun LGAs) and Katsina (Jibia LGAs) where violent incidents were also recorded.

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[1] WFP Nigeria Essential Needs Analysis – Northwest (Zamfara, Katsina and Sokoto) Nigeria February 2021 [link](#)

# II. Conceptual framework and methodology

The concept of essential needs is inspired from the definition of the Basic Needs Approach as identified by the International Labour Organisation (ILO, 1976)[2] and refers to '*Essential goods, utilities, services, or resources required on a regular, seasonal, or exceptional basis by households for ensuring survival and minimum living standards, without resorting to negative coping mechanisms or compromising their health, dignity, and essential livelihood assets*.[3]' International Humanitarian and Human Rights Law protects the right of crisis-affected persons to food, drinking water, soap, clothing, shelter, and life-saving medical care. Humanitarian Sphere Standards builds on this definition, adding essential sanitation, contagious disease prevention and education.

Among the listed essential needs, food is a central component, towards which households dedicate the largest share of their resources. Nonetheless, other needs interact with food security – be it in competition for household resources or enabling a household to achieve adequate food security and nutritional status in the short-, medium or longer-term. As such, rather than analysing the different needs independent of each other, looking at food security through an essential needs lens enables WFP to analyse food security in conjunction with other basic needs – thus providing a more comprehensive analysis of the food insecurity situation and its linkages with other vulnerability factors. The essential needs approach also provides a holistic understanding in which mutual relations with other goods, assets, opportunities, and services required to meet essential needs are factored in.

**The following analytical questions guide the ENNA:**

- What are the population's essential needs and how do people meet them?
- Which essential needs are unmet?
- Where are the people that are unable to meet these essential needs?
- How many people are unable to meet essential needs?
- Who are the people in need of assistance to meet these essential needs?
- Why is a population unable to meet these essential needs?
- How can households/individuals be assisted to meet these needs?

**Key Indicators**

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[2] The ILO report for the 1976 World Employment Conference defined basic needs in terms of food, clothing, housing, education, and public transportation. Employment was both a means and an end, and participation in decision making was also included.

[3] The definition is also closely aligned to one used by the Enhanced Response Capacity (ERC) consortium led by Save The Children, http://www.cashlearning.org/resources/library/1128-guidance-and-toolbox-for-the-basic-needs-analysis

Given that essential needs span various sectors and are interlinked with food security, the following three types of indicators are used to capture whether vulnerable households can meet their essential needs. A collection of food security sector specific indicators is used to define food security outcomes. These include the Food Consumption Score (FCS), Consumption-based Coping Strategy Index (CSI). Several independent variables on socio-economic characteristics of households are used to determine vulnerability profile of households. These include but are not limited to: Household status (IDPs, host community, returnee, etc), source of income and households' members participation in income-generating activities, sex of the Head of Household, education levels and literacy, living conditions.

Cross-sectoral indicators that capture respondents' overall well-being or ability to meet their essential needs. These include:

- Economic Capacity to Meet Essential Needs (ECMEN) and gap analysis, to understand how households' expenditures compare against the established minimum expenditure basket (MEB) values in humanitarian settings or against a poverty line cut-off;
- Utilisation of livelihood coping strategies and the underlying reasons;
- Debt;
- Priority Needs;
- Multi-Dimensional Deprivation Index (MDDI) based on the Alkire-Foster method[4].

## VI. Sampling Design

The essential needs assessment uses a quantitative household survey, with sampling allowing for results to be further disaggregated at the senatorial zones. A pre-designed household questionnaire was administered in the selected households by trained enumerators.

**Sample Size and Sample Allocation**

### a. October 2021 assessment

A total of 8,702 households were surveyed across the three states, with sampling representative at the senatorial zone level. The sample size required per senatorial zone for the ENNA, the principal sampling approach that powered the assessment, was drawn using two stage cluster sampling, while maintaining a confidence interval of 95 percent, 5 percent margin of error and Z-score of 1.96. The sample size was adjusted to an upper threshold of 300 households in most areas of Benue, Niger, Kaduna, Katsina, Zamfara, Sokoto, based on the premise that ten households would be covered across 30 clusters. Similarly, a dedicated sample of internally displaced households was added to allow for comparative analysis, with

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[4] Oxford Poverty and Human Development Initiative. Alkire-Foster Method.
https://ophi.org.uk/research/multidimensional-poverty/alkire-fostermethod/

each state having a dedicated sample size of 300 households of IDPs interviewed within the state, drawn randomly from list kept by the different State Emergency Management Authorities (SEMA). The IDP population was drawn from IDPs in host community, informal settlement and camps, across Zamfara and Sokoto, while for Benue, only IDPs from within camps were considered.

A total of 5,578 children under 5 (6 – 59 months) were screened for MUAC (middle upper arm circumference) from IDPs and host communities using opportunistic sampling. From within the host community, 4,576 male and female children were screened while 1,002 children had MUAC measurements for the IDPs.

### b. February 2022 assessment

For the February 2022 round, an abridged version of the October 2021 edition was implemented. The same survey design for October 2021 was maintained indicative at senatorial level sampling samples of 200 households per senatorial zone. Based on this sampling approach, a total of 2414 households were covered across the northwest Sokoto, Zamfara, Katsina and northcentral Benue states during the March 2022 assessment.

## VII. Training and Fieldwork

### a. October 2021 assessment

A centralized training of trainers (ToT) was held for a three-day period in Abuja, where national and state level representatives of the government and key strategic partners were kept abreast on the ENA methodology, the data collection tool and assessment timeline. The ToT was followed by a five-day face-to-face state level training of the enumerators. Training included lectures on interviewing techniques and the contents of the questionnaires, and mock interviews between trainees to gain practice in asking questions. Fieldwork began 11 September 2021 and concluded on 5 October 2021. Each data collection team was supervised by a leader from the NBS/National Population Commission.

### b. February 2022 assessment

A three-day refresher state level training was organized. Only experienced enumerators from the October 2021 edition of the assessment were considered during the February 2022 assessment cycle. Fieldwork began 5 February 2022 and concluded on 20 February 2022.

# III. Results

### 1.    Food Security and Nutrition Status

*Prevalence of acute food insecurity (Populations Phase 3 – 5)*

The March 2022 Cadre Harmonise findings highlighted that over 6.4 million people are acutely food insecure (Phase 3 – 5)[5] from the assessed states during the period of June – September 2022. This marks an increase of over one million food insecure people compared to June – September 2021 lean season. A three-fold increase in food insecure population was observed in Sokoto state, followed by a 50 percent increase in Benue state. The number of food insecure population remained largely stable in Kaduna, whereas in Niger state, the food insecure population reduced by a third.

**Table 1:  Trends in number of food insecure people (2022 vs 2021)**

| States | Number of food insecure people (Phase 3 – 5) according to the Cadre Harmonise | | Difference in projected values (2022 vs 2021) | |
|---|---|---|---|---|
| | June - September 2022 | June - September 2021 | Difference (absolute numbers) | Percentage difference |
| **Kaduna** | 1,344,921 | 1,419,436 | -74,515 | -5% |
| **Katsina** | 1,650,204 | 1,433,497 | 216,707 | 15% |
| **Niger** | 698,409 | 1,029,288 | -330,879 | -32% |
| **Sokoto** | 1,269,278 | 316,091 | 953,187 | 302% |
| **Zamfara** | 948,733 | 783,997 | 164,736 | 21% |
| **Benue** | 546,597 | 360,362 | 186,235 | 52% |

*Food consumption patterns and trends*

Food consumption score (FCS) is an index for household food security status, that aggregates household level data. It considers both dietary diversity, food frequency and the relative nutritional importance of different food groups on a 7-day recall period. This is used to classify households into poor, borderline, and acceptable categories. Poor and borderline households are grouped and classified as having inadequate food consumption.

A clear distinction is observed between the food consumption patterns between general population (Fig 1) and the IDP population (Fig 2). Among the general population, poor food

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[5] Nigeria March 2022 Cadre Harmonise for identification of risk areas and vulnerable populations in 21 states and Federal Capital Territory (FCT) of Nigeria https://fscluster.org/nigeria/document/cadre-harmonize-identification-risk

consumption ranges between two to 12 percent, with Katsina state showing the highest levels of poor food consumption during both assessment rounds (Fig 1). **IDPs have much higher prevalences of poor food consumption compared to the general population, a trend that is observed in all states in both rounds of assessment.** The trend of high poor consumption has persisted in the March 2022 for IDPs assessed in Sokoto, Zamfara and Benue states (Fig 4), with particularly concerning patterns observed for Benue state.
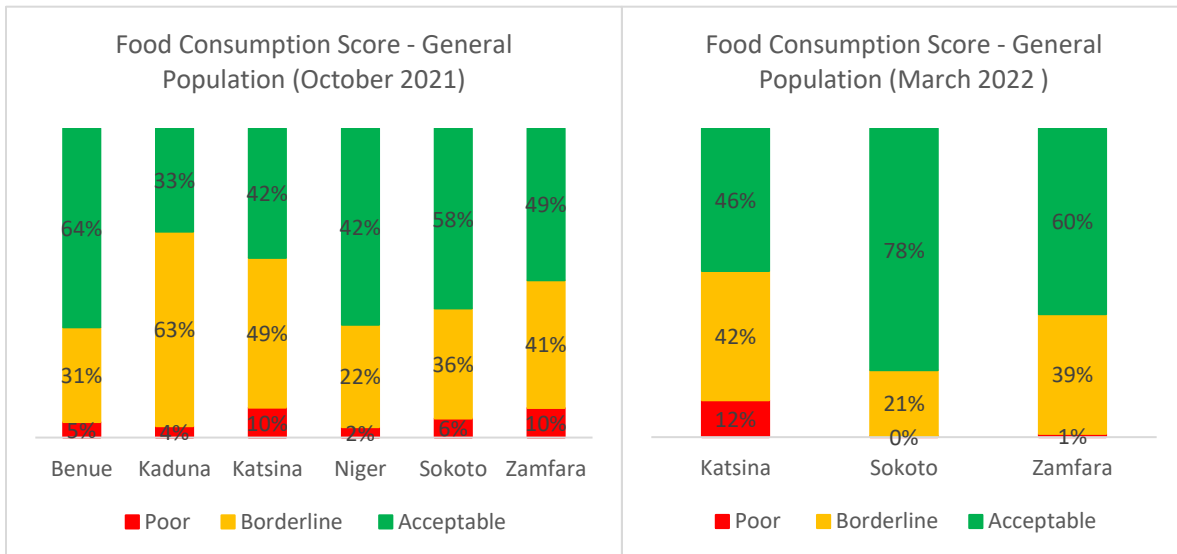


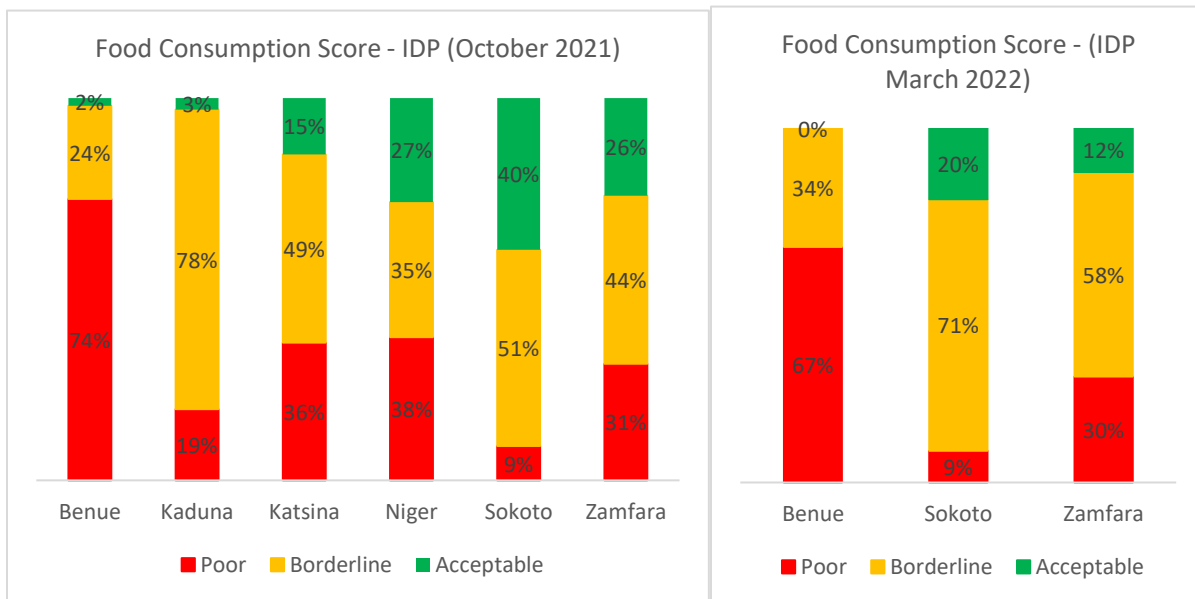**Figure 1:** Food consumption Score by State General Population (October 2021 and March 2022).



**Figure 2:** Food Consumption Score IDPs Northwest and Northcentral October 2021 and March 2022.

Compared to February 2021 ENNA assessment[6], **trends for IDP food consumption reveal a worsening food consumption among IDPs in Zamfara state, which has seen a 14-percentage point increase in poor food consumption in February 2022 as compared to February 2021**.

Households engage in one or more activities to source food. **Market purchase with cash is the most significant source of food**, with over 80 percent of households obtaining major food groups within the local market, including cereals, protein, milk, legumes, fats, and oil. The production of household food (13 percent) and gifts, market purchase on credit and exchange labor of items and food were also notable food source highlighted by the groups. Food aid and begging for food was the least food source recorded with less than 1 percent responses like the observation obtained from the October 2021 round of assessment. This could also be linked to few food aid actors present within those regions, hence less dependence on them for food.
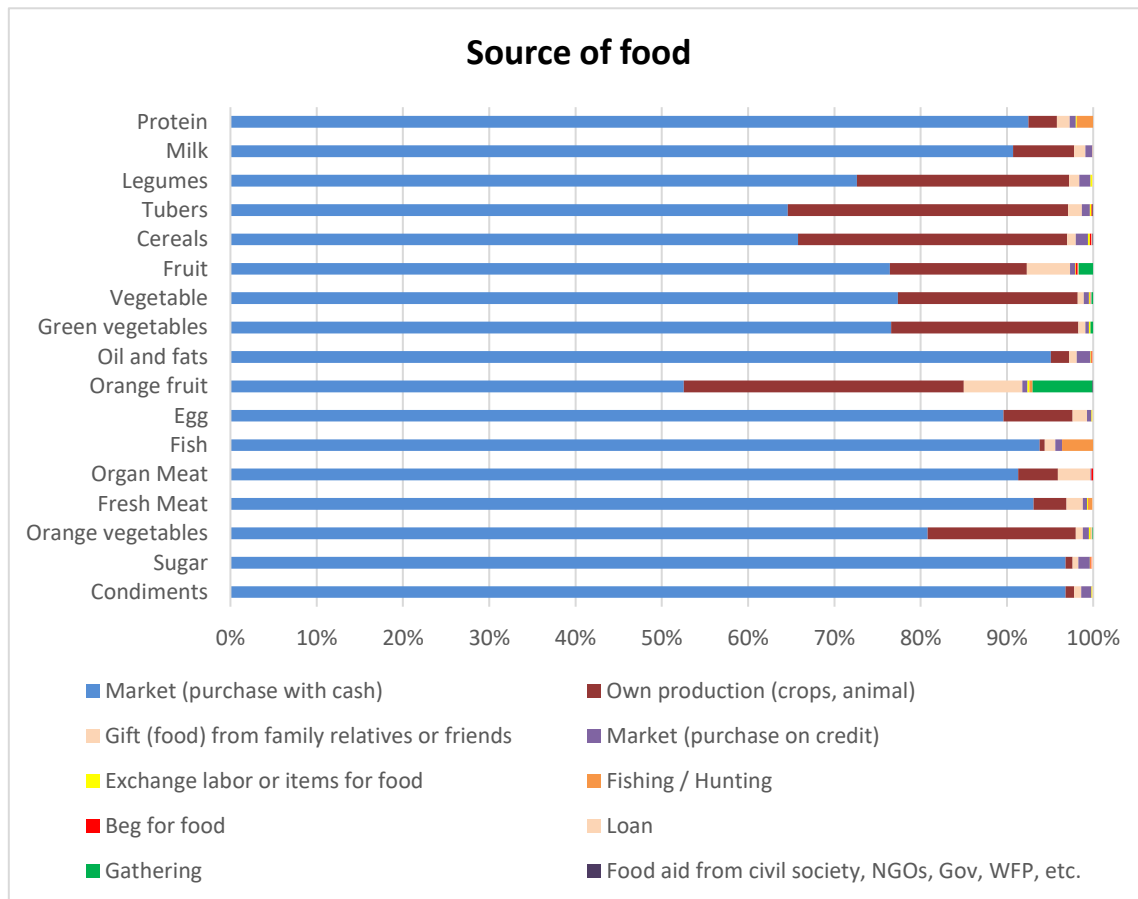


**Figure 3:** Food source by Household

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[6] WFP Nigeria Essential Needs Analysis – Northwest (Zamfara, Katsina and Sokoto) Nigeria February 2021 link

## Nutrition Status

The October 2021 assessment estimated the prevalence of global acute malnutrition (GAM) in the children between 6-59 months among both general population and IDP households using MUAC through the SMART survey methodology.

The IDPs GAM prevalence rates at 95% Confidence Interval (95% CI) showed MUAC (<125mm) is 7.7 percent (4.7 – 12.6) in Benue and 3.10 percent (1.4 – 6.6) in Niger. Overall the prevalence for GAM remains below the 15 percent emergency threshold. Comparing GAM prevalence rates between children from general population and IDP children using MUAC reveals that in Niger, the general population children have slightly lower GAM prevalence compared to the IDP children, whereas in Benue the GAM prevalence is much higher in IDPs than in general population.

For the general population among the northwestern states of Sokoto, Zamfara, Katsina states the GAM rate at 95% CI varied significantly. Katsina recorded the highest value with a total of 2.9 percent (1.9 – 4.4), Sokoto with 2.7 percent (1.7 – 4.1), Zamfara had a 2.1 percent (1.3 – 3.4) and Kaduna presented the least value with a 1.8 percent (1.1 – 2.9). For the IDPs, GAM using the MUAC measurement records its highest value at 5.3 percent (3.0 – 9.3) in Katsina, at 2.6 percent (0.7 – 9.0) in Kaduna, at 1.7 percent (0.6 – 4.8) and Zamfara with the lowest value of 0.0 percent (0.0 – 2.3).

**Table 2:** Global Acute Malnutrition (GAM) determined and measured by MUAC for IDP and general population Northwest and Northcentral region (Data as of October 2021).

|  | Prevalence of Global malnutrition | State | No of Children Surveyed | Percentage | 95% CI |
|---|---|---|---|---|---|
| IDP | Prevalence of Global Acute Malnutrition MUAC (<125mm and/or oedema) | Benue | 181 | 7.70% | 4.7 - 12.6 |
|  |  | Kaduna | 77 | 2.60% | 0.7 - 9.0 |
|  |  | Kastina | 206 | 5.30% | 3.0 - 9.3 |
|  |  | Niger | 192 | 3.10% | 1.4 - 6.6 |
|  |  | Sokoto | 181 | 1.70% | 0.6 - 4.8 |
|  |  | Zamfara | 165 | 0.00% | 0.0 - 2.3 |
| GP | Population Prevalence of Global Acute Malnutrition MUAC (<125mm and /or oedema) | Benue | 765 | 3.40% | 2.3 - 4.9 |
|  |  | Kaduna | 848 | 1.80% | 1.1 - 2.9 |
|  |  | Kastina | 750 | 2.90% | 1.9 - 4.4 |
|  |  | Niger | 739 | 2.80% | 1.9 - 4.3 |
|  |  | Sokoto | 748 | 2.70% | 1.7 - 4.1 |
|  |  | Zamfara | 726 | 2.10% | 1.3 - 3.4 |

## 2.    Economic capacity to meet essential needs.

The economic capacity to meet essential needs for the general population was estimated using a benchmark of monthly per capita poverty line at 11452.5 naira (NGN) developed by NBS/World Bank[7]. With reference to this benchmark, households with per capita monthly expenditures below this cut-off are considered lacking the economic means to meet their basic needs.

In Sokoto North and Kaduna North, economic capacity below poverty line is much more prevalent, with 90 percent and 82 percent of the households having economic capacity below per capita poverty line respectively, implying households have little financial means to purchase nutritious food and avail essential services such as health, education, and shelter (Fig 4). On the other end of the spectrum, in Katsina North and Benue Northwest, the situation is relatively better, with 31 percent and 35 percent of the population with expenditures above the poverty line (Fig 4).
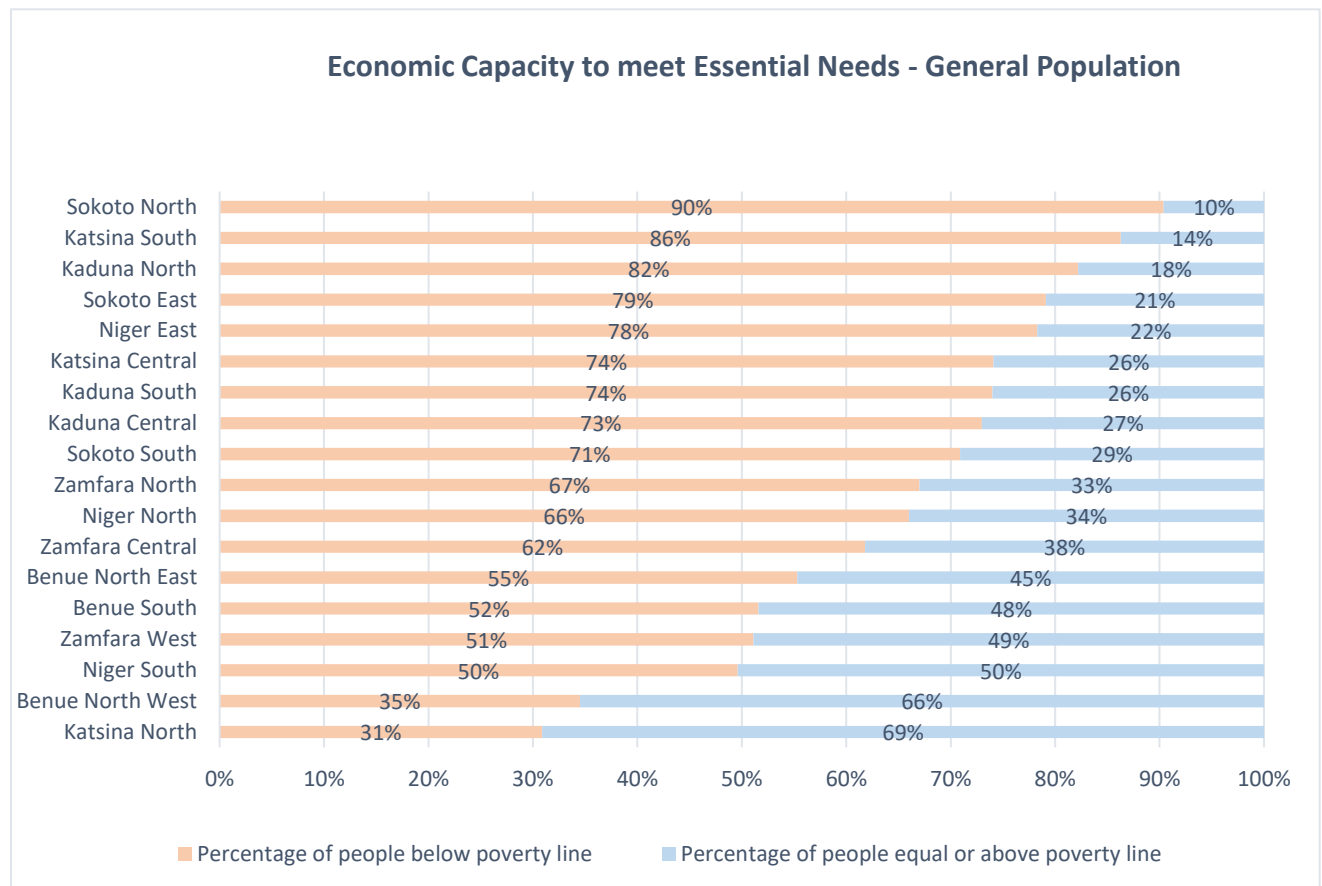
**Economic Capacity to meet Essential Needs - General Population**

| Region | Percentage of people below poverty line | Percentage of people equal or above poverty line |
|---|---|---|
| Sokoto North | 90% | 10% |
| Katsina South | 86% | 14% |
| Kaduna North | 82% | 18% |
| Sokoto East | 79% | 21% |
| Niger East | 78% | 22% |
| Katsina Central | 74% | 26% |
| Kaduna South | 74% | 26% |
| Kaduna Central | 73% | 27% |
| Sokoto South | 71% | 29% |
| Zamfara North | 67% | 33% |
| Niger North | 66% | 34% |
| Zamfara Central | 62% | 38% |
| Benue North East | 55% | 45% |
| Benue South | 52% | 48% |
| Zamfara West | 51% | 49% |
| Niger South | 50% | 50% |
| Benue North West | 35% | 66% |
| Katsina North | 31% | 69% |

**Figure 4:** Economic Capacity to meet essential needs (October 2021)

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[7] National Bureau of Statistics (NBS). 2019 Poverty and Inequality in Nigeria, May 2020.

### 3. Livelihood coping strategies and debt

Livelihood-based coping strategies assesses households' longer-term coping and productive capacities and their future impact on access to essential needs, including food, health, and education. While using a livelihood coping strategy may help a household achieve food security in the short-term, reliance on these strategies is particularly worrisome in the longer term due their negative impact on the future productivity of the affected households, thus making it more difficult to reverse. Derived from a series of questions regarding household behaviour over the past 30 days, the indicator is classified into the following three severity categories 'stress', 'crises and 'emergency'. Households may adopt more than one coping behavior, and as such households are classified according to the most severe of the strategies.

Findings from both rounds of assessment showed that IDPs are more likely to engage in emergency coping strategies compared to the general population. IDPs in Sokoto and Zamfara recorded the highest prevalence for emergency category of livelihood strategies. Similar trends were observed in the follow up March 2022 assessment.
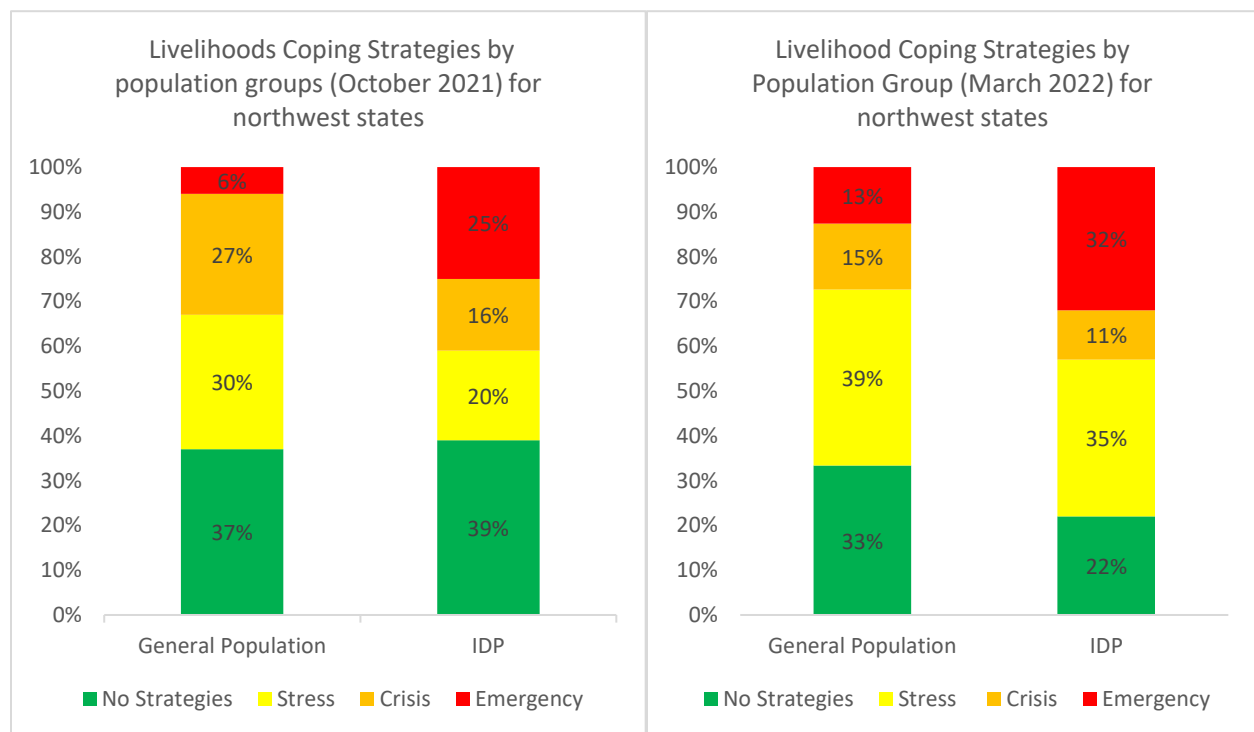


**Figure 5:** Livelihood Coping Strategies by Northwest Population Groups (October 2021 and March 2022)

Similarly in the northcentral states, IDPs were marked by a clear likelihood of engaging in any kind of livelihood coping strategy. Compared to 45 percent of general population households, only 17 percent of IDPs did not engage in a livelihood coping strategy. An

alarming 77 percent of IDP population in Benue reported at least one emergency coping strategy in the March 2022 assessment (Fig 6).
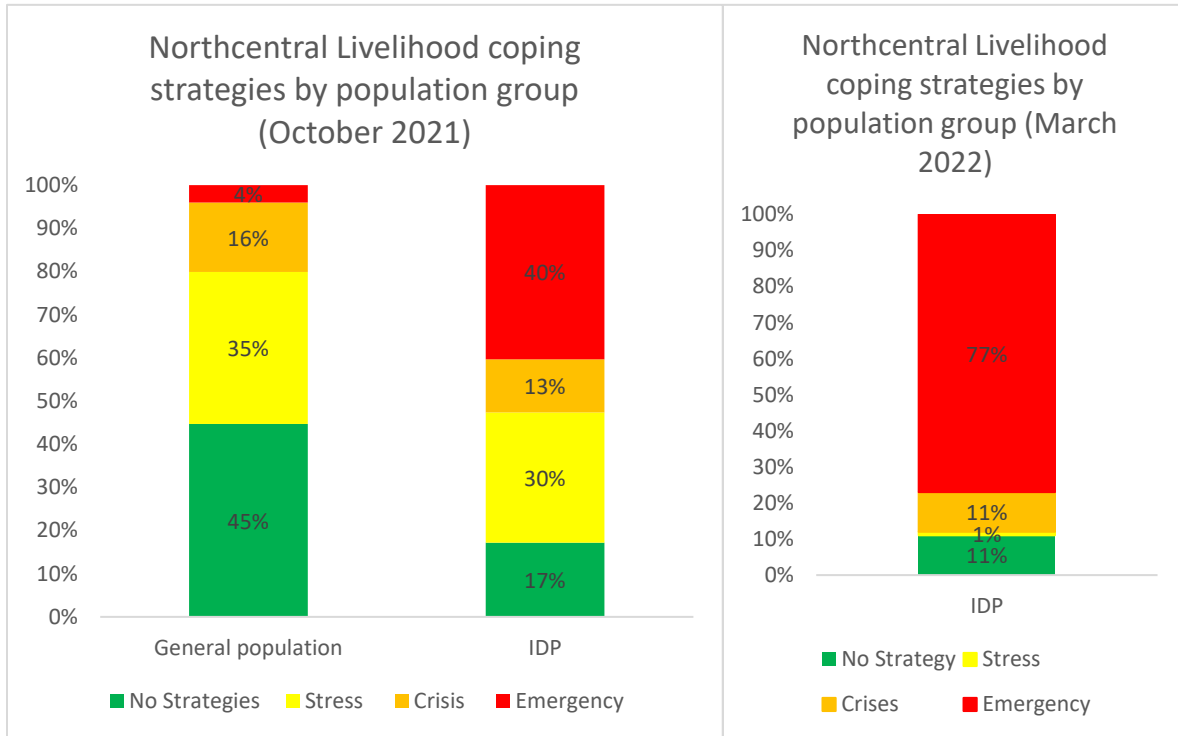


**Figure 6:** Livelihood Coping Strategies by Northcentral Population Groups

**43 percentage of households resorted to debt**. Among households reporting debt, the average median debt was 20,000 naira, with an overwhelming 91 percent using borrowed money to purchase food.

This was followed by other reasons including health (48 percent), agricultural inputs (27 percent) and education (21 percent). A small fraction (2 percent) of the population borrowed money for migration purposes.
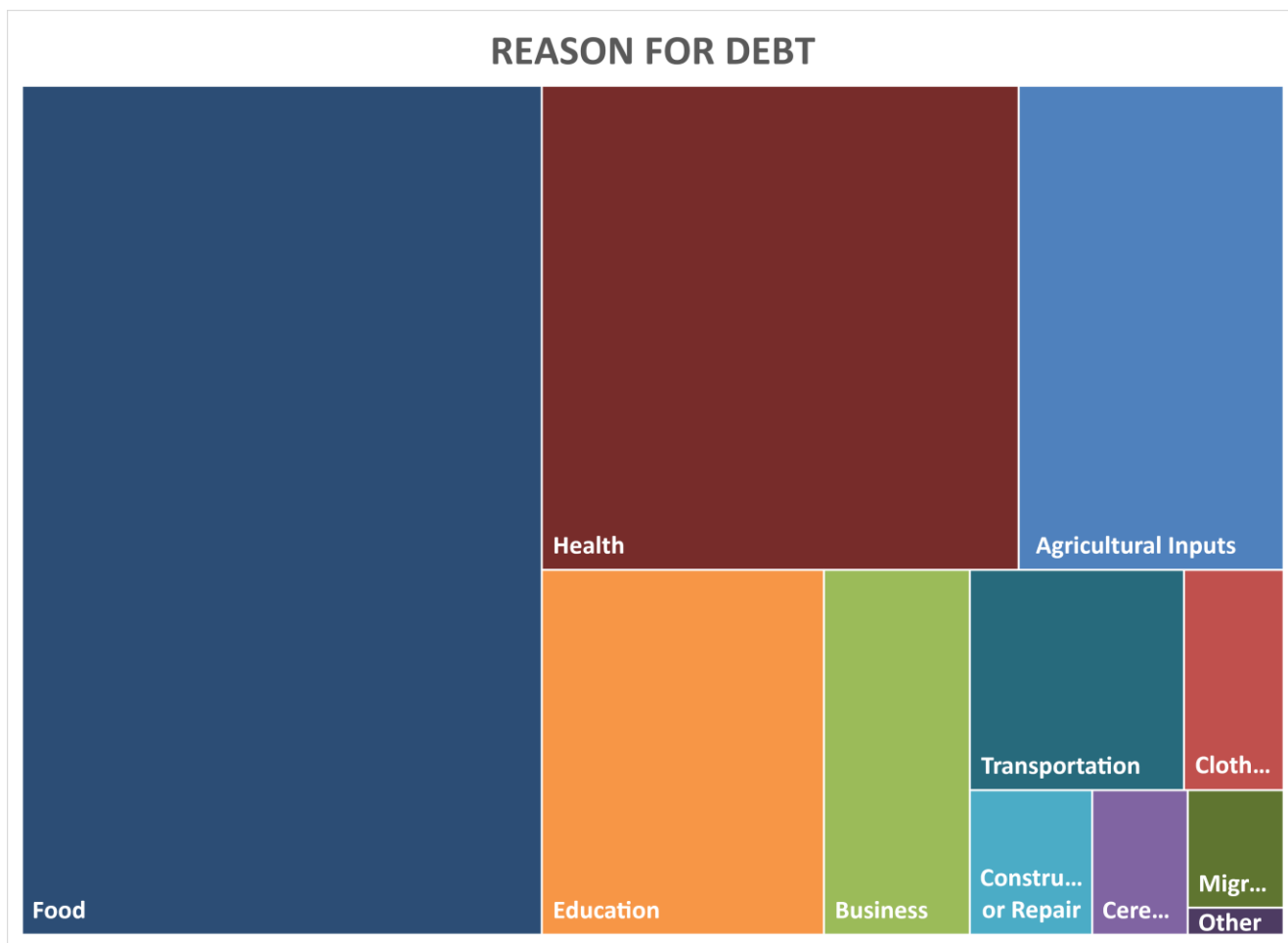
**Figure 7:** Household Population Reason for Debt

### 4. Multidimensional Deprivation & Priority Unmet needs

The multidimensional deprivation index (MDDI) calculates non-monetary poverty at the household level based on deprivation in the six essential needs dimensions: food, health, education, shelter, WASH and safety. A collection of related indicators is used to calculate each dimension. All dimensions are given equal weight in the overall measurement.

Multiple deprivations are more prevalent in Zamfara, Sokoto and Kaduna states for both the general population and IDPs. Niger and Benue, on the other hand, have the highest proportions of households with none to minimal deprivation – for both general population and IDPs.
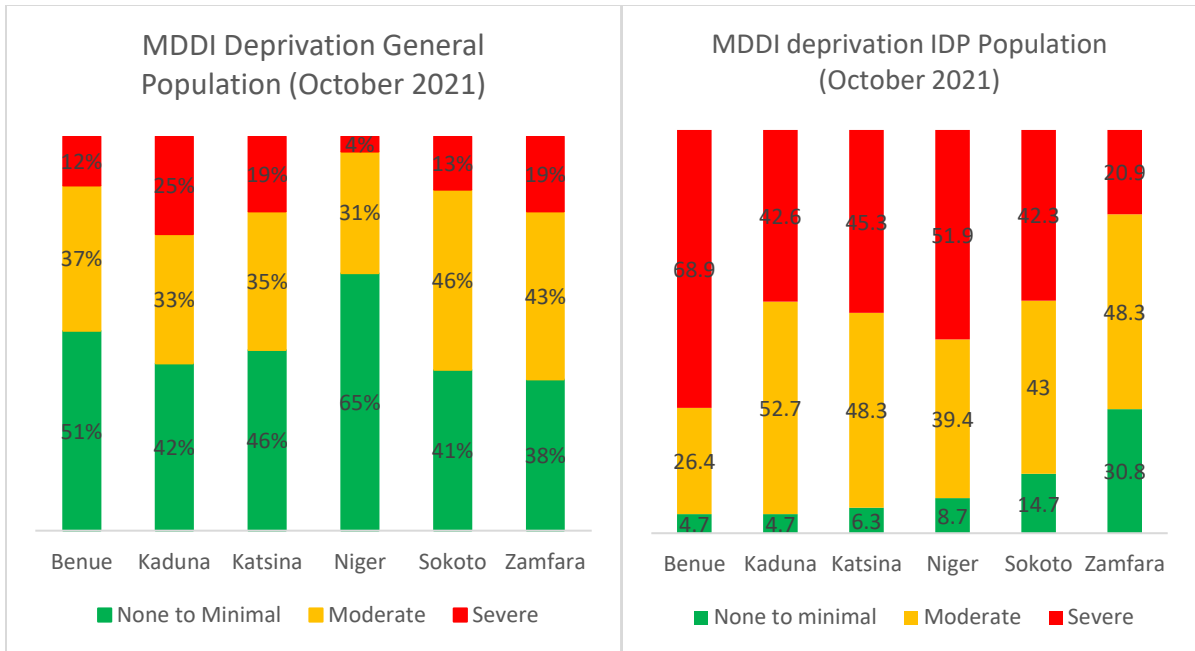
**Figure 8:** Multidimensional Deprivation at General and IDP Population State (October 2021)

Shelter needs are reflected across all levels of deprivation, followed by Food and WASH. This implies a widespread lack of adequate shelter which could be because of high levels of insecurity. This is followed by deprivation in food and WASH. Other dimensions such as education, health and safety become more prominent as severity of deprivation increases.
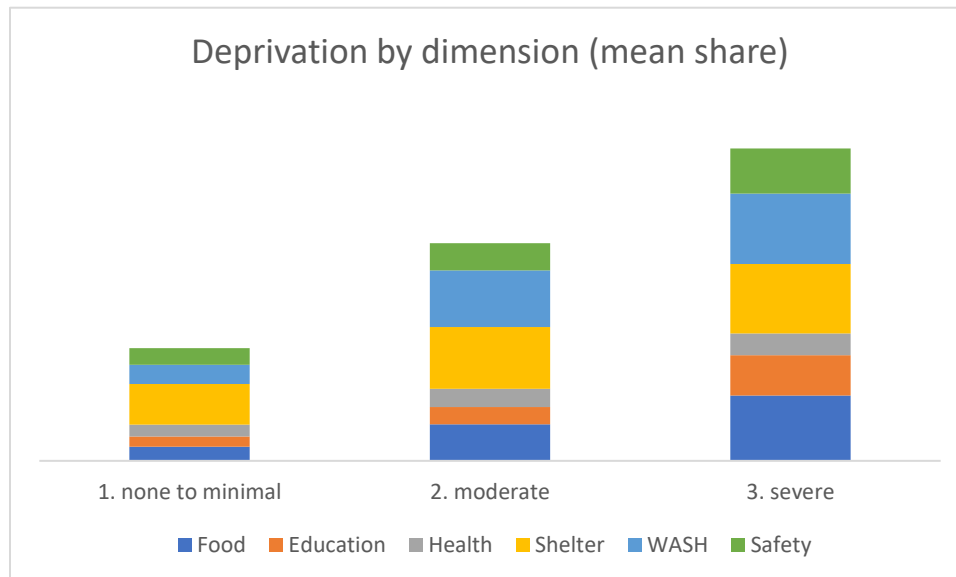


**Figure 9:** Economic Capacity to meet essential needs (October 2021)

In terms of priority needs, food assistance is cited as the main priority for both general population and IDP households. In terms of main priorities for IDPs, food assistance was cited as a first priority by 80 percent of households, followed by shelter and livelihood support (over 30 percent) respectively. Among the general population, food assistance, health and livelihood were the topmost priority for households above 70 percent, 30 percent, and 25 percent respectively (Fig 10).
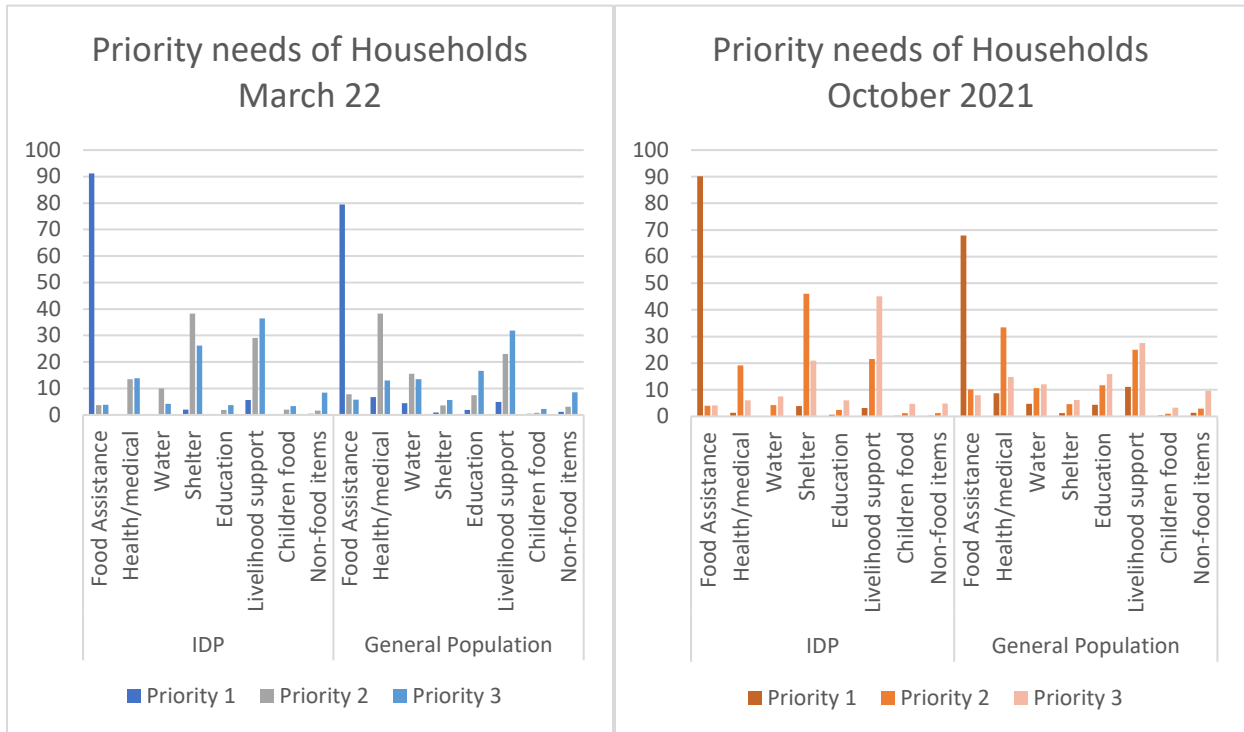


**Figure 10:** Priority needs for IDPs and General Population October 2021 and March 2022

## 5. Most significant shock faced by households (General Population and IDPs)

Conflict/insecurity was reported as the most significant shock by majority of surveyed households – both general population and IDPs -- with the highest prevalences reported in the states of Katsina, Sokoto and Zamfara.  The second most significant shock cited is high food prices, followed by loss of employment or reduced income.

Following these three commonly reported shocks, differences were observed between IDP and general population responses. IDPs were more likely to report general unsafe feeling, temporary displacement, and destruction of houses, land, or property as critical concerns. On the other hand, general population households were more likely to report debts, high fuel and transportation prices and crop failure as significant shocks. Theft was reported as one of the three shocks by 10 percent of both general population and IDP households.
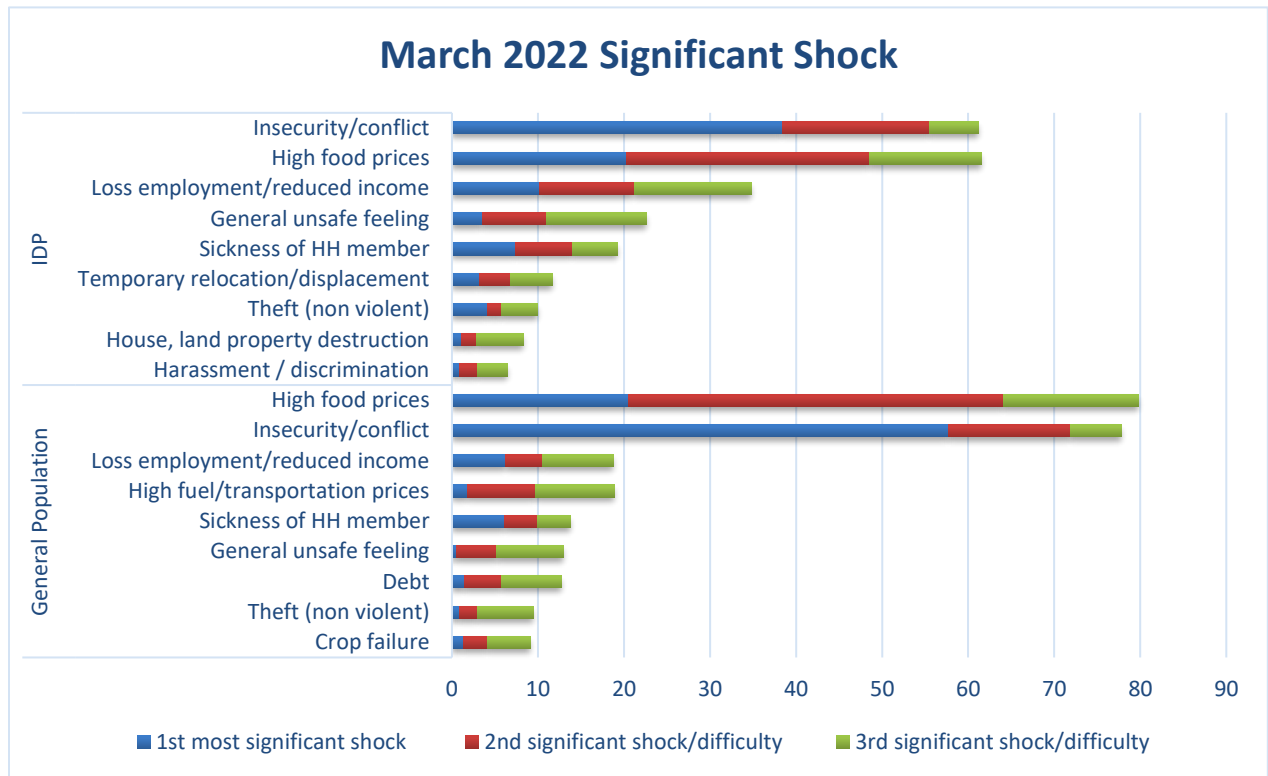


**Figure 11:** Most Significant Shock/difficulty faced by households - comparison between IDPs and General Population March 2022.

Conflict and insecurity have lasting impact on agriculture and livelihoods.  In the 2021 high-resolution satellite imagery analysis conducted by WFP with the EU-Joint Research Centre decrease in agricultural crop land in both locations. Significant crop losses were observed in Sokoto state (Rabah LGA), Zamfara (Anka and Maradun LGAs) and Katsina (Jibia LGAs) where violent incidents were also recorded.
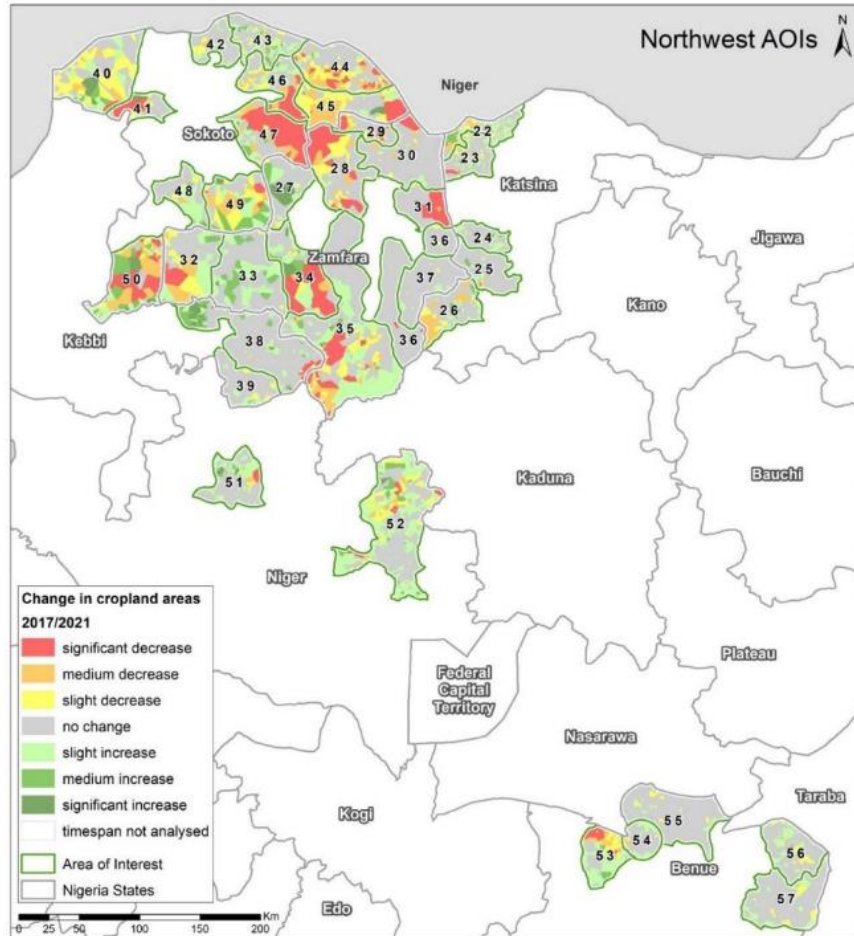


**Figure 12:** 2021 Satellite imagery analysis of cropland area change, damage settlements, and violent event

# IV. Conclusions and Recommendations

- Government and food security sector stakeholders must collaborate and communicate closely to provide tailored contextualized responses to the needs of the most vulnerable population in hotspot areas with declared low levels of food insecurity, with priority given to IDPs, and the most vulnerable households of the host communities. Where possible and appropriate, assistance could be channeled through existing social protection mechanisms. This is essential to prevent the fragile food security situation from further deteriorating in the next lean season. Food assistance should be supplemented with long-term livelihood support and other multisectoral support where possible to reduce the impact of acute food insecurity and enable most vulnerable households meet their essential needs.

- Households who are mostly agricultural dependent, and their resources have been heavily stretched by the influx of the IDPs should be targeted by seasonal support in the lean season.

- In the most severely impacted areas of the northwest, female-headed households, displaced households, most marginalized and poorest host community households, with limited livelihood opportunities and access to land, and households engaged in casual labor should all be targeted and prioritized for assistance.

- These programs should be supplemented with women empowerment measures to strengthen the resilience of female-headed families, as well as nutrition assistance by supplementary and therapeutic feeding centers to minimize the risk of malnutrition among children aged 6 to 23 months.

- Finally, ongoing onsite and remote monitoring of the food and nutrition situation is needed, using both traditional in-person interviews as well as through satellite imagery to inform analysis such as the Cadre Harmonise.

# Annex 1 – ENA October 2021 Tables: General Population

## Table 1: Food consumption score groups

| State | Senatorial Zone | Poor | Borderline | Acceptable |
|-------|-----------------|------|------------|------------|
| Benue | Benue North East | 3.2 | 31.4 | 65.3 |
| Benue | Benue North West | 2.3 | 19.3 | 78.5 |
| Benue | Benue South | 9.6 | 41.1 | 49.2 |
| Kaduna | Kaduna Central | 2.7 | 39.4 | 57.9 |
| Kaduna | Kaduna North | 2.5 | 67.8 | 29.7 |
| Kaduna | Kaduna South | 5.8 | 81.6 | 12.6 |
| Katsina | Katsina Central | 4.8 | 53.6 | 41.6 |
| Katsina | Katsina North | 7.6 | 31.7 | 60.7 |
| Katsina | Katsina South | 16.5 | 60.3 | 23.2 |
| Niger | Niger East | 6.2 | 48.1 | 45.7 |
| Niger | Niger North | 0.5 | 18.2 | 81.2 |
| Niger | Niger South | 0.7 | 6.8 | 92.5 |
| Sokoto | Sokoto East | 8.4 | 41 | 50.6 |
| Sokoto | Sokoto North | 0.7 | 37.4 | 61.9 |
| Sokoto | Sokoto South | 9.4 | 28.5 | 62.1 |
| Zamfara | Zamfara Central | 9.4 | 36.5 | 54.1 |
| Zamfara | Zamfara North | 15.7 | 56.6 | 27.8 |
| Zamfara | Zamfara West | 3.5 | 31 | 65.5 |

## Table 2: Reduced coping strategy index groups

| State | Senatorial Zone | rCSI_Phase1 | rCSI_Phase2 | rCSI_Phase3 |
|-------|-----------------|-------------|-------------|-------------|
| Benue | Benue North East | 44.1 | 22.5 | 33.4 |
| Benue | Benue North West | 56.1 | 27.5 | 16.4 |
| Benue | Benue South | 47.4 | 44.7 | 7.9 |
| Kaduna | Kaduna Central | 22.7 | 68.3 | 9 |
| Kaduna | Kaduna North | 14.5 | 40.8 | 44.7 |
| Kaduna | Kaduna South | 22.6 | 68.6 | 8.8 |
| Katsina | Katsina Central | 53.7 | 19.9 | 26.3 |
| Katsina | Katsina North | 22 | 48.7 | 29.3 |

| | | | | |
|---|---|---|---|---|
| Katsina | Katsina South | 31 | 35.2 | 33.8 |
| Niger | Niger East | 18.4 | 58.9 | 22.6 |
| Niger | Niger North | 55.1 | 43.9 | 1 |
| Niger | Niger South | 15.1 | 35.7 | 49.2 |
| Sokoto | Sokoto East | 12.5 | 69.7 | 17.7 |
| Sokoto | Sokoto North | 61.4 | 28.3 | 10.3 |
| Sokoto | Sokoto South | 34 | 60.9 | 5.1 |
| Zamfara | Zamfara Central | 25 | 37.8 | 37.2 |
| Zamfara | Zamfara North | 40.2 | 24 | 35.7 |
| Zamfara | Zamfara West | 30.9 | 43.2 | 25.9 |

## Table 3: Livelihood coping strategy index groups

| State | Senatorial Zone | No Strategies | Stress Strategies | Crisis Strategies | Emergency Strategies |
|---|---|---|---|---|---|
| Benue | Benue North East | 37.8 | 26.2 | 30.9 | 5.2 |
| Benue | Benue North West | 62.1 | 23.1 | 10.5 | 4.3 |
| Benue | Benue South | 18.6 | 65.6 | 12 | 3.8 |
| Kaduna | Kaduna Central | 23.1 | 25.5 | 37.7 | 13.8 |
| Kaduna | Kaduna North | 27.1 | 15.7 | 55.2 | 2 |
| Kaduna | Kaduna South | 43.6 | 14.2 | 39.2 | 3 |
| Katsina | Katsina Central | 55 | 16.6 | 21.6 | 6.8 |
| Katsina | Katsina North | 13.6 | 64.2 | 13.7 | 8.5 |
| Katsina | Katsina South | 36.8 | 48.1 | 11.3 | 3.8 |
| Niger | Niger East | 38.6 | 38.9 | 13.2 | 9.3 |
| Niger | Niger North | 79.4 | 7.5 | 12.4 | 0.8 |
| Niger | Niger South | 31.8 | 49.7 | 17.6 | 0.9 |
| Sokoto | Sokoto East | 11.2 | 31.6 | 44.4 | 12.8 |
| Sokoto | Sokoto North | 61.4 | 32.6 | 2.8 | 3.2 |
| Sokoto | Sokoto South | 56.1 | 19.3 | 15.6 | 9 |
| Zamfara | Zamfara Central | 44.4 | 30.1 | 24.9 | 0.6 |
| Zamfara | Zamfara North | 42 | 10.8 | 40.3 | 6.9 |
| Zamfara | Zamfara West | 30 | 49.2 | 14 | 6.8 |

## Table 4: Expenditure below or above the poverty line.

| State | Senatorial Zone | Exp < PovertyLine | Exp >= PovertyLine |
|---|---|---|---|
| Benue | Benue North East | 55.3 | 44.7 |
| Benue | Benue North West | 34.5 | 65.5 |
| Benue | Benue South | 51.6 | 48.4 |
| Kaduna | Kaduna Central | 73 | 27 |
| Kaduna | Kaduna North | 82.2 | 17.8 |
| Kaduna | Kaduna South | 74 | 26 |
| Katsina | Katsina Central | 74.1 | 25.9 |
| Katsina | Katsina North | 30.9 | 69.1 |
| Katsina | Katsina South | 86.3 | 13.7 |
| Niger | Niger East | 78.3 | 21.7 |
| Niger | Niger North | 66 | 34 |
| Niger | Niger South | 49.6 | 50.4 |
| Sokoto | Sokoto East | 79.1 | 20.9 |
| Sokoto | Sokoto North | 90.4 | 9.6 |
| Sokoto | Sokoto South | 70.9 | 29.1 |
| Zamfara | Zamfara Central | 61.8 | 38.2 |
| Zamfara | Zamfara North | 67 | 33 |
| Zamfara | Zamfara West | 51.1 | 48.9 |

## Table 5: Multidimensional deprivation index groups

| State | Senatorial Zone | 1. none to minimal | 2. moderate | 3. severe |
|---|---|---|---|---|
| Benue | Benue North East | 37.6 | 39.8 | 22.6 |
| Benue | Benue North West | 63.3 | 26.1 | 10.5 |
| Benue | Benue South | 51.1 | 44.8 | 4.1 |
| Kaduna | Kaduna Central | 65.9 | 23 | 11.1 |
| Kaduna | Kaduna North | 26.5 | 46 | 27.5 |
| Kaduna | Kaduna South | 34.8 | 29.6 | 35.6 |
| Katsina | Katsina Central | 36.2 | 35.5 | 28.2 |
| Katsina | Katsina North | 65.7 | 29.2 | 5.1 |
| Katsina | Katsina South | 35.7 | 40.5 | 23.8 |
| Niger | Niger East | 57.2 | 37.8 | 5 |
| Niger | Niger North | 80.8 | 17.2 | 2 |
| Niger | Niger South | 58 | 37.4 | 4.5 |
| Sokoto | Sokoto East | 24.8 | 50.4 | 24.8 |
| Sokoto | Sokoto North | 57.3 | 34.4 | 8.2 |
| Sokoto | Sokoto South | 40.3 | 52.4 | 7.4 |
| Zamfara | Zamfara Central | 60.8 | 28.7 | 10.4 |
| Zamfara | Zamfara North | 20.4 | 48.5 | 31.1 |
| Zamfara | Zamfara West | 34 | 50.4 | 15.6 |

# Annex 2 – ENA February 2022 Tables – General population

## Table 6: Food consumption score groups

| State | Senatorial Zone | Poor | Borderline | Acceptable |
|---|---|---|---|---|
| Katsina | Katsina Central | 8.5 | 42 | 49.5 |
| Katsina | Katsina North | 14.8 | 48.1 | 37.1 |
| Katsina | Katsina South | 12.5 | 35.5 | 52 |
| Sokoto | Sokoto East | 0 | 26.5 | 73.5 |
| Sokoto | Sokoto North | 0.5 | 8 | 91.5 |
| Sokoto | Sokoto South | 0.5 | 29.5 | 70 |
| Zamfara | Zamfara Central | 0.5 | 22 | 77.5 |
| Zamfara | Zamfara North | 0.9 | 46.1 | 53 |
| Zamfara | Zamfara West | 1.8 | 48.2 | 50 |

## Table 7: Reduced coping strategy index groups (rCSI)

| ADMIN1Name | Senatorial Zone | rCSI_Phase1 | rCSI_Phase2 | rCSI_Phase3 (>19) |
|---|---|---|---|---|
| Katsina | Katsina Central | 26.5 | 55 | 18.5 |
| Katsina | Katsina North | 50.5 | 35.7 | 13.8 |
| Katsina | Katsina South | 11.5 | 55 | 33.5 |
| Sokoto | Sokoto East | 20.5 | 53.5 | 26 |
| Sokoto | Sokoto North | 35.3 | 36.3 | 28.4 |
| Sokoto | Sokoto South | 42 | 48 | 10 |
| Zamfara | Zamfara Central | 32.5 | 56 | 11.5 |
| Zamfara | Zamfara North | 16.8 | 56.9 | 26.3 |
| Zamfara | Zamfara West | 17.6 | 69.4 | 12.9 |

## Table 8 Livelihood coping strategy index groups

| ADMIN1Name | Senatorial Zone | No Use of Strategies | Stress Strategies | Crisis Strategies | Emergency Strategies |
|---|---|---|---|---|---|
| Katsina | Katsina Central | 15.5 | 52 | 11.5 | 21 |
| Katsina | Katsina North | 52.9 | 28.6 | 15.7 | 2.9 |
| Katsina | Katsina South | 20 | 32.5 | 14.5 | 33 |
| Sokoto | Sokoto East | 30.5 | 41.5 | 17 | 11 |
| Sokoto | Sokoto North | 41.8 | 38.8 | 11.4 | 8 |
| Sokoto | Sokoto South | 42.5 | 24 | 12 | 21.5 |
| Zamfara | Zamfara Central | 30 | 51 | 11 | 8 |
| Zamfara | Zamfara North | 33.6 | 34.9 | 26.7 | 4.7 |
| Zamfara | Zamfara West | 33.5 | 50.6 | 12.4 | 3.5 |

# Annex 3 – Additional Tables for IDPs

Table 9: Expenditure below or above the poverty line (October 2021 Assessment)

| State | Exp < Poverty Line | Exp >= Poverty Line |
|---|---|---|
| Benue | 47.2 | 52.8 |
| Kaduna | 76.5 | 23.5 |
| Katsina | 64 | 36 |
| Niger | 63.8 | 36.2 |
| Sokoto | 80.1 | 19.9 |
| Zamfara | 60.4 | 39.6 |

Table 10: Livelihood Coping Strategies by state (October 2021 Assessment)

| State | No Strategies | Stress Strategies | Crisis Strategies | Emergency Strategies |
|---|---|---|---|---|
| Benue | 25.4 | 4.3 | 12.4 | 57.9 |
| Kaduna | 82.4 | 11.1 | 6.4 | 0 |
| Katsina | 18.3 | 11 | 11.7 | 59 |
| Niger | 9 | 56.1 | 12.2 | 22.8 |
| Sokoto | 26.3 | 28 | 29 | 16.7 |
| Zamfara | 29.1 | 28.8 | 19.2 | 22.8 |

Table 11: Livelihood Coping Strategies by state (March 2022 Assessment)

| State | No Strategies | Stress Strategies | Crisis Strategies | Emergency Strategies |
|---|---|---|---|---|
| Benue | 11 | 1 | 11 | 77 |
| Sokoto | 29 | 44 | 5 | 22 |
| Zamfara | 15.4 | 26.9 | 16.4 | 41.3 |