CASE STUDY

NIGERIA 2017–2020 / CONFLICT

KEYWORDS: Coordination, Land advocacy, Site management, Site planning

CRISIS	**Armed conflict, Northeast Nigeria**
PEOPLE DISPLACED	Over **2.15 million people** as of December 2020*
HOMES DAMAGED/ DESTROYED	Over **986,000** as of September 2017**
PEOPLE WITH SHELTER/NFI NEEDS	**2.5 million people***
PROJECT LOCATION	Bama town, Bama Local Government Area, Borno State.
PEOPLE SUPPORTED BY THE PROJECT	**7,717 HHs** (estimated over 30,000 individuals) shelter support Over **18,000 individuals** transit/reception assistance
PROJECT OUTPUTS	**5,896 individual emergency shelters** | **31 communal shelters** (560 HHs) | **175 emergency shelter kits** | **66 buildings** rehabilitated (1,086 HHs). Reinforcement of **2,531 shelters** | **450 shelters** replaced
SHELTER SIZE	Emergency shelters: **16.2-19.8m²** per HH | Communal shelters: **9m²** per HH | Rehabilitated buildings: **15.4m²** per HH on average | Emergency Shelter (ES) Kits: **9m²** per HH
SHELTER DENSITY	Emergency shelters: **3.8-4.7m²** per person | Communal shelters: **2.1m²** per person | Rehabilitated buildings: **3.7m²** per person on average| ES kits: **2.1m²** per person
SITE DENSITY	Site area: **932,600m²** Overall site density Dec 2017: **58m²** per person Overall site density Dec 2020: **24m²** per person
DIRECT COST	Emergency shelters: **USD 254** | Communal shelters: Type 1: **USD 318** per HH, Type 2: **USD 134** per HH | Rehabilitated buildings: **USD 318** per HH on average | ES Kits: **USD 100** | Shelter reinforcement: **USD 72** per HH
PROJECT COST	**USD 420** per HH on average

PROJECT SUMMARY

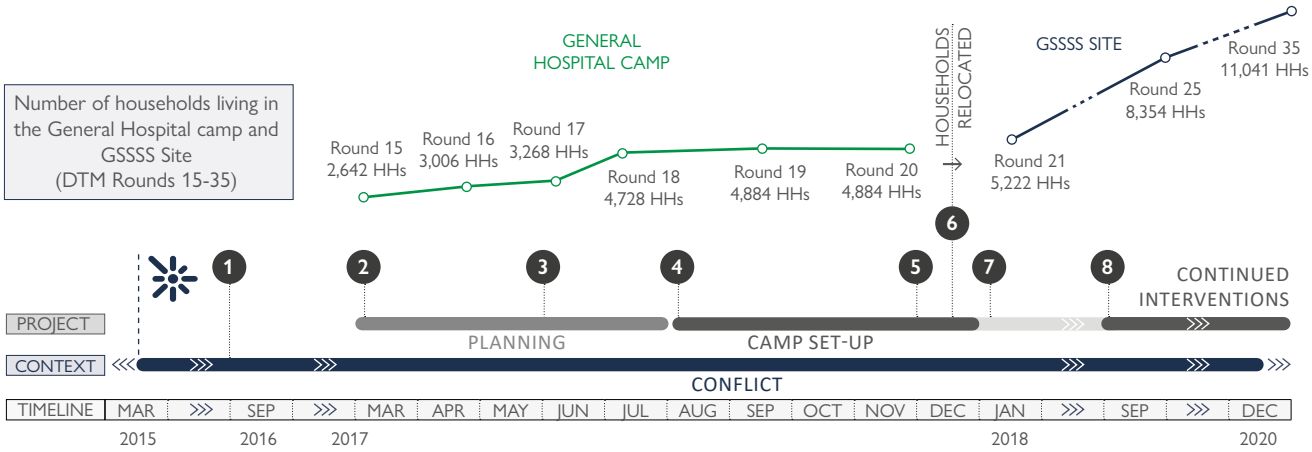
The Government Senior Science Secondary School (GSSSS) camp in Bama was set up by the government and humanitarian partners to host over 5,000 households following a large-scale influx of IDPs into Bama town, with two shelter organizations taking the lead for provision of shelter assistance. Despite attempts to advocate for the expansion of the camp and the establishment of additional sites, the initial camp remained the only safe option to host the continuous flow of new arrivals. By the end of 2020 the camp hosted over 10,000 households. This case study focuses on the site planning and set-up and on subsequent shelter interventions, aiming to provide dignified shelter solutions for displaced populations within the limited land available.

* Source: Nigeria HRP 2020 and DTM Round 35 Report

** Source: https://www.newsweek.com/cost-terrorism-boko-haram-nigeria-648854

An aerial view of the GSSSS camp during camp set-up. The camp, located on the edge of Bama town was set up to enable the relocation of IDPs from the overcrowded General Hospital camp.

TIMELINE



Mar 2015: Nigerian Armed Forces regain control of Bama from Non-State Armed Groups. Hundreds of IDPs are brought to General Hospital Camp.

1. **Sep 2016:** Borno State Government starts reconstruction of Bama town.
2. **Mar-Apr 2017:** Alternative site assessments and identification of GSSSS site.
3. **Jun 2017:** Uncoordinated shelter construction begins at the GSSSS site.
4. **Aug-Sep 2017:** Infrastructure mapping and site planning of GSSSS site.
5. **Dec 2017:** Completion of 5,000 emergency shelters at the GSSSS site.
6. **Mid-Dec 2017:** Relocation of all families from General Hospital to GSSSS camp.
7. **Jan 2018:** New GSSSS camp is fully operational, while construction of camp infrastructure and WASH facilities are partly still ongoing.
8. **Sep 2018:** Additional shelter interventions commenced: communal shelter construction, partitioning of rehabilitated buildings, new shelter construction and distribution of emergency shelter kits.

CONTEXT

For more information on the overall context, see case study A.18 in Shelter Projects 2015-2016.

Bama Local Government Area (LGA) was one of the most severely affected by the conflict in Northeast Nigeria. Before the crisis, Bama town – the second largest in the State – had been home to 250,000 people. Prior to being retaken by the Nigerian Armed Forces in 2015, it had been repeatedly attacked and finally seized by Non-State Armed Groups (NSAGs). A camp was soon established by the military to host internally displaced persons on the General Hospital grounds, with humanitarian partners providing support after access was possible in 2016. Like many other locations in Northeast Nigeria, Bama was surrounded by a security perimeter controlled by the Nigerian Armed Forces.

SITUATION IN BAMA IN 2017

By the end of 2016, the state government announced the plan for the reconstruction of Bama – which was largely deserted apart from the General Hospital camp – focusing on housing repair, key infrastructure and reopening the main road to Maiduguri, the state capital. This led to a significant increase in new arrivals into town and a push to reopen key facilities such as the hospital. In the second part of 2017, mass movements of populations back to Bama led to the over-congestion of General Hospital camp, which at its peak had only 10 square meters of space per person.

The conditions of the camp rapidly deteriorated, with the main concerns being poor sanitation (such as latrines being quickly filled up) and lack of shelter (up to 1,000 households sleeping outside). This was further compounded by lack of adequate drainage during the rainy season, with a rapid increase in cases of diarrhea and a small cholera outbreak.

The General Hospital camp shown here was closed at the end of 2017, with camp residents relocated to the new GSSSS camp.

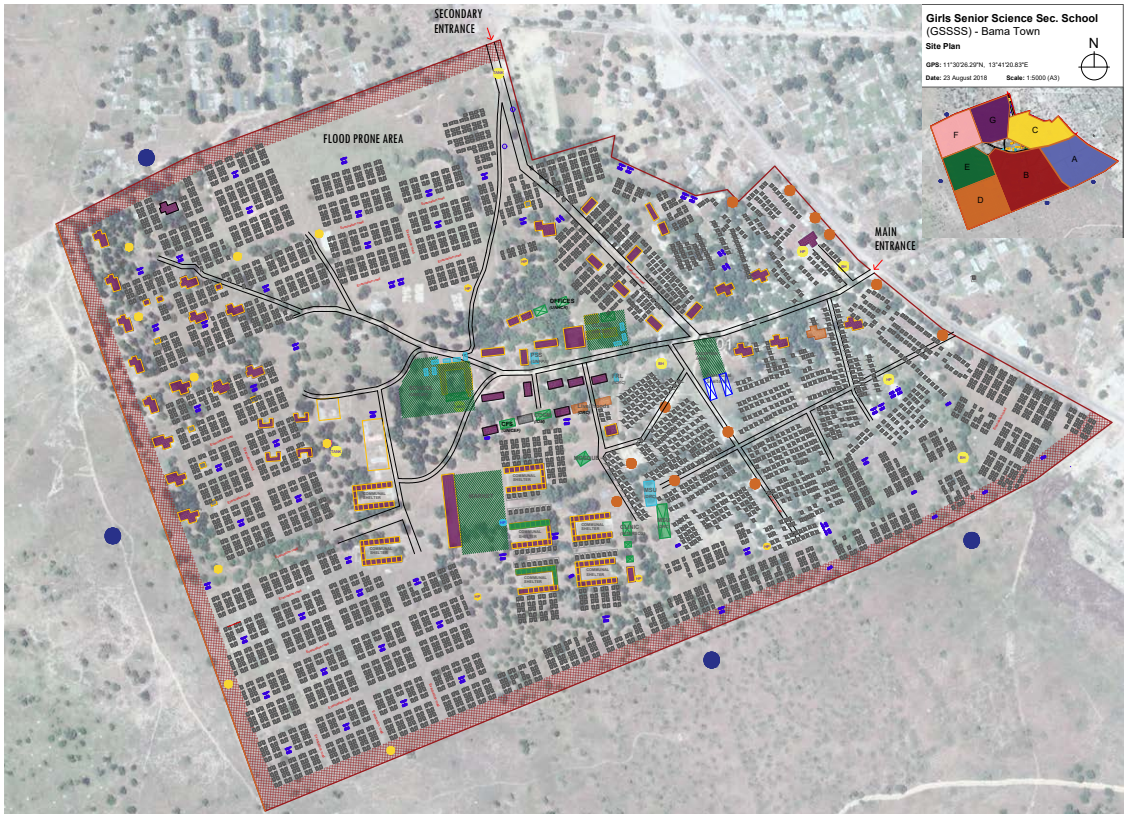
MULTISECTORAL RESPONSE PLAN

Since late 2016, the joint Shelter/CCCM Sector, led by the government with the support of two international organizations, was closely monitoring new arrivals, leading needs assessments, gaps analysis and response across the accessible areas of Northeast Nigeria. Plans to rehabilitate and re-open General Hospital meant that the camp needed to be relocated. Additionally, as the military did not have the capacity to protect two sites, it was decided to identify a single large site that could host the whole existing displaced population in Bama, plus the projected new arrivals. Land exploration and site assessments began in March 2017 and out of three options, only the Government Senior Science Secondary School (GSSSS) compound was considered viable. The school had been closed since 2014 and, unlike some of the other schools in Bama, there were no immediate plans for it to be rehabilitated and reopened. All except a few buildings on the site were damaged or destroyed. As the school had previously been used by the NSAGs during their occupation, the grounds had to be swept for possible unexploded ordnance.

SITE PLANNING AND NEW CAMP SET-UP

By mid-2017, although a joint response plan with partners' commitments had been developed, one organization started construction at the GSSSS site prior to the agreed implementation timeline, in an effort to decongest General Hospital Camp. This initially caused some challenges, such as the available space not being maximized and some shelters and latrines being built on flood-prone areas. However, shelter partners then rapidly came together with other sectors under the Shelter/CCCM Sector and followed a multisectoral plan, agreed upon at the Humanitarian Country Team level, which included roles and responsibilities and a single site plan. The site plan comprised seven zones and was based on a mapping of existing infrastructure, mainly damaged school buildings, and the nearly 1,200 shelters that had previously been constructed in zones A, B and C. Priorities in site planning included making best use of space given the limited area, while considering GBV mitigation measures, flood risk, fire safety considerations, and planning around the many existing trees on the site.

By October 2017, setting out and shelter construction started with two main shelter partners implementing an additional 3,700 shelters in phases. One organization used multiple private contractors while the other implemented via a government agency. This was mainly due to the scale of the operation and the limited timeframe to complete construction. Works were always supervised by technical staff of the implementing organizations. Although some delays in materials supply were experienced, the initial capacity to accommodate the population in General Hospital was achieved in around two months. The implementation of water and sanitation facilities, as well as other services, had also been started by a range of humanitarian partners. Commitments and construction updates were being coordinated with dedicated meetings and captured with frequent updates of the site plan, led by one of the shelter partners.



With the input of partners a single site plan was developed, which aimed to make the best use of the limited available space.

RELOCATION PROCESS

The sector strategy initially envisioned to complete essential facilities (shelters, sanitation blocks and water points) and then start relocation in January 2018 following an agreed plan, but the constant influx of new arrivals and poor conditions of General Hospital camp led the government to bring forward the relocation to mid-December 2017. The relocation happened over two weeks and was mainly led by the military, which was also providing security between the old and new camp. Humanitarian partners assisted with transport and by facilitating the reception and shelter allocation processes. This meant that not all basic facilities were ready when people started moving into the new camp. In particular, zones E and F, further away from the entrance lacked sanitation facilities for nearly two months.

Prior to the relocation, camp management staff conducted consultations and community mapping in General Hospital camp to understand the IDPs' concerns regarding the relocation and particularly which groups wanted to be relocated together in the new camp. Since the government-led relocation had started earlier than planned, camp management staff arrived only after the first few days and in the beginning did not manage to follow the community mapping. However, the mapping was later implemented during shelter allocation as much as possible.

Two reception structures were constructed and paired with reception management services near the camp entrance. These were soon overwhelmed due to the constant influx of new arrivals and could not cater for people relocating to shelters in the zones further away. After the first wave of relocation from the old camp, the shelters in zones A, B and C were mainly occupied. To facilitate reception activities, a second location within the camp was designated for zones D, E and F. Shelters were allocated based on community of origin and household size and composition. In some cases, due to the limited availability of shelters, two small female-headed households would be allocated to one shelter if they chose to. When new arrivals were registered, camp management would encourage them to do go-and-see visits around the camp to identify relatives or fellow community members, so that they could be allocated to the same or nearby shelters.

During the period of relocating the camp from General Hospital to GSSSS, a camp closure coordination meeting was held and the plan for decommissioning the General Hospital site was initiated, enabling the later rehabilitation of the hospital.

CONTINUOUS INFLUX AND NEW SHELTER INTERVENTIONS

In the second half of 2018, a significant influx of people into Bama required shelter partners to come together to increase the capacity of the camp. By September 2018, around 1,900 households were living without shelter. One organization constructed 250 additional shelters, while another partner constructed 175 shelters using shelter kits. Some challenges were faced in finding land for these interventions, as most of the remaining space available was being used by the camp residents for communal and recreational activities. However, following consultations with the community and in the absence of alternatives, it was agreed to proceed with the construction.

Since space for new construction was rapidly being exhausted while the capacity to host new arrivals was still insufficient, shelter partners decided to explore different shelter assistance options which had not yet been implemented in the context of Northeast Nigeria; the construction of partitioned communal shelters and the rehabilitation and partitioning of existing buildings. This required extensive consultations at the sector level, as well as an adaptation of programs following discussion with the donors.

Shelter and latrine construction commenced in October 2017 in preparation for the anticipated relocation date of January 2018 (which was later brought forward to mid-December 2017).

There were many existing trees on the site which were integrated into the site plan.

BUILDING REHABILITATION

There were many existing buildings within the GSSSS site; mostly classrooms and teachers' accommodation. Most did not have roofs, doors and windows due to fire or vandalization. A few had been destroyed, while only two were in good conditions. One organization conducted a comprehensive inventory of all the buildings in the camp, including an estimate of all the rehabilitation works required, which focused mainly on the reconstruction of roofs, rehabilitation of some damaged walls, provision of doors and windows and partitioning using plastic sheeting. Due to funding constraints, only some of the buildings could be rehabilitated in 2018, while more were rehabilitated the following year.

Initially, contractors were engaged to provide all materials and conduct the rehabilitations. In 2019, one organization used a different approach based on the availability of an existing stock of emergency shelter kits. These were used to construct the roofs and to clad openings and partitions for an additional 39 buildings. Throughout, community carpenters were engaged through a Cash-for-Work modality. In this case, plastic sheeting was used for the roofs instead of corrugated iron sheets, thus reducing the lifespan of the intervention. However, the involvement and on-the-job training of carpenters from the camp provided new skills and income opportunities to the IDPs.

COMMUNAL SHELTERS

Due to the lack of space for individual shelter construction, one organization piloted the construction of 14 communal shelters of 20 rooms of 3x3m each in available pockets of space within the camp. This was implemented via contractors and was then adopted as a model for reception facilities across the state. Initially intended to be a temporary solution, the continuous influx of new arrivals and the inability to acquire additional land meant that these shelters continued to be used as accommodation. This shelter solution was initially criticized by some based on claims of limited privacy and cultural appropriateness. This led to the sector deciding to discontinue this type of intervention as a shelter solution, while it continued to be used for reception facilities. However, through later discussions with the Protection Sector, it was accepted that partitioned communal shelters were still a better solution than exposing IDPs to the weather.

In 2019, following large-scale influxes across locations and advocacy by one organization, the sector approved the introduction of a more affordable model of communal shelter – with 16 rooms and plastic sheet roofing – which was implemented via community carpenters. In the case of Bama GSSSS camp, a total of 10 structures were built on available space in 2019 and an additional five in 2020. Despite the initial criticism, findings from a survey in 2019 showed that only very few households complained about the lack of privacy, while over 95 per cent of respondents were satisfied with this shelter type and reported that it had significantly improved their living conditions.

Existing buildings on the site were rehabilitated and partitioned (right) to provide additional shelter in the camp. Partitioned communal shelters (left) were also constructed due to the lack of space for individual family shelters.

MATERIALS AND SUPPLY

A preliminary assessment of the local market prior to implementation revealed that there were no suppliers of construction materials in Bama. Due to the scale and limited timeframe to set up the camp, all materials were procured in the state capital Maiduguri, stored in the organization's warehouse and transported to Bama via military convoys. Over time, small suppliers started to appear; however, they were not always present in town and did not have sufficient stocks for the scale of construction activities conducted in the camp.

LINKS WITH RECOVERY

The GSSSS camp remained for a long time the only safe settlement option in Bama since the military was directing all new arrivals to the camp and could not protect other areas in the host community. Most efforts and resources from humanitarian partners were invested in the camp, while the government focused on the recovery of infrastructure and housing outside the camp. Since the GSSSS camp was first established, there was the intention to rehabilitate the existing buildings so that after camp closure, these can be handed over to the host community in good condition.

At the time the camp was set up, there was no host community as such as Bama was uninhabited,t hus restricting the options of shelter partners to provide assistance in out-of-camps settings and, therefore, stimulating recovery. Looking forward, the organization planned to focus more efforts in support of returnees and host communities – while also continuing to support new arrivals and displaced populations living in the camp – as well as advocating for additional land for decongestion.

MAIN CHALLENGES

Unplanned movement. Although a plan had been developed, the government-led movement process from the old to the new camp was rushed, leading to an uncoordinated movement and allocation of shelters in the first few days, which was later put back on track with support of humanitarian partners. The sudden relocation also meant that entire zones in the camp were inhabited prior to basic services such as sanitation facilities being completed. For several weeks, IDPs in some parts of the camp had to walk long distances to access dignified latrines and showers, while many used damaged buildings or practiced open defecation.

Land scarcity and congestion. From 2018 onwards, extensive efforts were made to identify and advocate for additional land for the decongestion of GSSSS camp. Three plots of public land were assessed and approved by state and local authorities in 2018 but were never approved by the military, which did not have sufficient capacity to protect multiple sites. Further advocacy was then conducted in 2019-2020 to expand the existing perimeter of the site. Three options were identified; however, lack of approval by land owners and additional requirements for military installations meant that, at the time of writing, no solution had been found yet. Shelter partners had to continue to resort to the construction of additional shelters in the very limited available space remaining within the camp perimeter, often having to reduce the width of major roads and encroach on areas used for community activities.

Topography and drainage. The GSSSS site presented an undulated topography with small elevations and lower, flood-prone areas. A flood-risk assessment was conducted by the Shelter/CCCM sector which was taken into consideration when the site plan was prepared, avoiding lower lying areas which are known to flood. However once the shelters were constructed and the site occupied, the site's natural water flow networks were disrupted and therefore other areas also experienced flooding. A comprehensive drainage assessment was later developed, however its overall cost was beyond the available resources of humanitarian partners and limited donor interest in funding drainage activities was identified. Because of this, only a few drainage interventions were actually implemented for the worst affected areas.

WIDER IMPACTS

In terms of shelter solutions, Bama represented a pilot location for implementing new types of activities that were later scaled up or more widely adopted. For example, the rehabilitation and partitioning of existing buildings was later repeated in other LGAs by the same organizations and by other partners, and was also recognized by the sector as a preferred type of intervention in the absence of land for shelter construction. The communal shelters, although initially criticized by some, were also implemented for the first time in Bama and then used across the state for reception facilities for new arrivals.

The engagement of community carpenters from within the camp population supported skills development and livelihood opportunities.

Given the continued population increase in the camp with limited options for site expansion, the levels of congestion within the camp continue to increase.

STRENGTHS, WEAKNESSES AND LESSONS LEARNED

STRENGTHS

√ **Speed and scale of camp set-up.** The shelter partners constructed nearly 4,000 shelters in under three months significantly improving living conditions. This was achieved despite security and accessibility challenges.

√ **Multisectoral coordination and site planning.** The overall planning and camp set-up was well-coordinated within the Shelter/CCCM Sector and with all sectors and partners implementing services in the camp. Having one lead organization for site planning and setting-out and one lead sector for coordinating services ensured that minimum site planning standards could be maintained and partner commitments were coordinated under a joint plan.

√ **Flexibility of shelter solutions.** Following the large-scale influx of new arrivals and limited land availability, shelter partners defined alternative assistance approaches. Due to site constraints, partners constructed communal shelters and rehabilitated existing buildings.

√ **Registration and shelter allocation process.** Despite challenges at the beginning of the relocation, camp management was then successful in providing adequate reception and registration services for new arrivals. Shelters were allocated based on communities of origin and the registration and allocation process also enabled reuniting of families who had been separated.

√ **Engagement of community carpenters.** Despite some challenges related to the payment of workers and speed of approach, hiring IDP carpenters improved skills and livelihood opportunities. Most community carpenters continued to work in the camp in the site maintenance committees.

WEAKNESSES

× **Initial phases of camp set-up.** Prior to the agreed implementation of the joint site plan, one shelter organization started building without being able to actively monitor construction due to security concerns at the time. This led to some shelters being constructed in flood-prone areas or too close or too far from sanitation facilities and did not maximize the use of available space.

× **Limited community participation in shelter and site planning.** Due to the limited implementation window and pressure to relocate IDPs to the new site, initially shelter construction and site planning were largely conducted without consultation with, or participation of, the affected population. Engagement then improved following this initial phase.

× **Lack of proper site development.** Site preparation could not be prioritized and implemented due to limited resources available at the time, leading to several areas in the camp being flooded, even following the adoption of the joint site plan. In addition, there was lack of clarity among donors regarding which sector and funding stream should cover the activity – whether WASH, CCCM or Shelter.

× **Focus on emergency solutions and limited links to recovery.** Partly owing to contextual factors, shelter partners focused all their resources within the camp and predominantly on temporary shelter solutions. While this was inevitable at first, over time more efforts could have been made to support returnees and recovery outside of the camp. However, at the time of writing, the access in and out of the camp was still highly controlled, so only few IDPs were allowed to live within the host community.

LESSONS LEARNED

- **Land advocacy efforts.** In the initial stages of land exploration and site assessments, most options were discarded by the government due to a variety of critical factors. In hindsight, more efforts could have been made at senior inter-agency level to continuously advocate for a larger plot of land in anticipation of future influxes of IDPs and adapting to the ever-evolving context.
- From the shelter and site planning perspective of an implementing agency, the **CCCM-led coordination model** adopted for the planning and set-up of the camp was a success and was later reused for other large-scale camps and relocations in the state. Continuous monitoring visits and adaptations of the site plan were also essential to keep track of construction progress and update all partners and sectors involved.
- **The community mapping process** provided an understanding of the different groups and their expectations for the GSSSS camp. While the relocation process being brought forward before the planned time-frame meant that it was not fully utilized at the start of the relocation process, it still proved relevant in the latter phases of the relocation and the approach was also adopted in other locations following this project.
- Despite limited resources, more efforts should be made by the donor community to support shelter and camp management partners to **ensure at scale and phased site preparation prior to construction and allocation**. Site preparation was a mandatory step in the sector-endorsed site set-up process and following this experience, this was further enforced and funded in the establishment of more recent camps.