

Select Water, Sanitation & Hygiene (WASH) Indicators

Number of Household Drinking Water Sources Lowest quintile 70 Second quintile Middle quintile 60 Fourth quintile Percent of household population Highest quintile 50 40 20 10 0 0ne Number of Water Sources

Most of the population in Kaduna lives in households that rely on one water source for their drinking water. The wealthiest households tend to have more options than the poorest households.

Reliability of Main Household Water Source Always Intermittent (Predictable) Intermittent (Unpredictable) 30 40 50 60 Percent population with improved water source as main water source Among households whose main water source is improved,

the majority report that it is always available.

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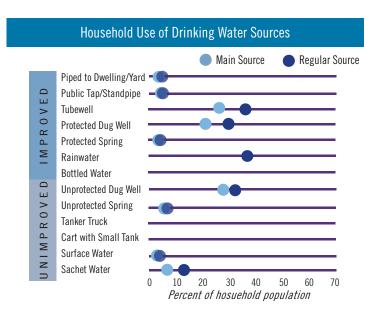
BILL & MELINDA GATES INSTITUTE for POPULATION and REPRODUCTIVE HEALTH

PMA2016/KADUNA-R3

PERFORMANCE MONITORING & ACCOUNTABILITY 2020

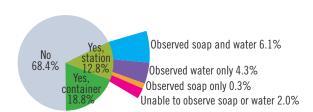
PMA2020 uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning and water, sanitation and hygiene (WASH). The project is implemented by local university and research organizations in 10 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Nigeria was carried out in Lagos and Kaduna states in 2014 and 2015, and in seven states in 2016 for round 3 (Anambra, Kaduna, Kano, Lagos, Nasarawa, Rivers and Taraba). PMA2020/Nigeria is led by the Centre for Research, Evaluation Resources and Development (CRERD) and Bayero University Kano (BUK). The survey is endorsed and supported by the Federal Ministry of Health, the National Population Commission, the National Bureau of Statistics, and the State Ministries of Health. Overall direction and support is provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health through a grant by the Bill & Melinda Gates Foundation.

For more information on PMA2020 please visit http://www.pma2020.org.



Households identify one source as the main drinking water source. A regular drinking water source is used at least a few times a week for a season of the year. The most commonly used drinking water sources in Kaduna are tubewells, rainwater, protected dug wells and unprotected dug wells.

Household Access to Dedicated Handwashing Station



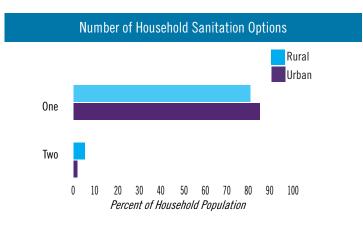
Only 13% of households in Kaduna can access a dedicated handwashing station. 6% of all surveyed households had a dedicated hand washing station with soap and water at the station at the time of the interview.



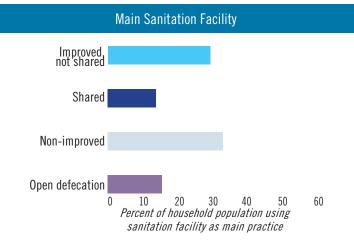


PMA2016/KADUNA-R3

INDICATORS FOR WATER, SANITATION & HYGIENE



The vast majority of the population in Kaduna reports using only one sanitation option. This sanitation option may include an improved, unshared facility, or various unimproved options: shared, non-improved, or the practice of open defecation.



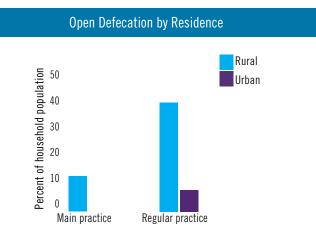
The use of non-improved (shared and non-improved facilities, and open defecation) make up roughly 68% of main sanitation facility usage in Kaduna. Note here that a "shared" facility depicts a facility that is shared by multiple households, or which is publicly shared, and is thus not considered an improved facility.

Open Defecation by Household Wealth Quintile Main Practice Regular Practice Regular Practice Highest

The practice of open defecation is inversely related to household wealth.

Across all wealth quintiles, the percent of the household population reguarly practicing open defecation is greater than the percent reporting open defecation as their main practice.

Wealth Quintiles



Open defecation is more common in rural than urban areas. A higher pecent of the household population reports open defecation as a regular rather than main practice. The overall prevalence of open defecation practice is higher than that implied by the main practice indicator.

SAMPLE DESIGN

The PMA2016/Kaduna-R3 survey used a two-stage cluster design with urban-rural as strata. A sample of 66 enumeration areas (EAs) was drawn from the National Population Commission's master sampling frame. In each EA households and private health facilities were listed and mapped and 35 households randomly selected. Households were surveyed and occupants enumerated. The final sample included 2,242 households with a total population of 13,037. Data collection was conducted between May and June 2016. The definitions of improved and unimproved water sources and sanitation facilities follow the definitions used in the 2013 Nigeria Demographic and Health Survey.

Photo Credit: eHealth Africa (2014)





