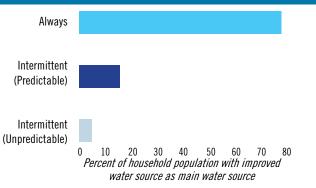


# **Select Water, Sanitation & Hygiene** (WASH) Indicators

## Number of Household Drinking Water Sources 80 Lowest quintile Second quintile 70 Middle quintile Percent of household population 05 05 09 09 Fourth quintile Highest quintile 10 0 Two Number of water sources Three or more

Most of the population lives in households that rely on one water source for their drinking water needs. This is true across wealth quintiles, meaning that wealthier households tend to rely on the same number of water sources as poorer households.

#### Reliability of Main Household Water Source



Among households whose main water source is improved, most report that their water source is always available.

### JOHNS HOPKINS BLOOMBERG SCHOOL

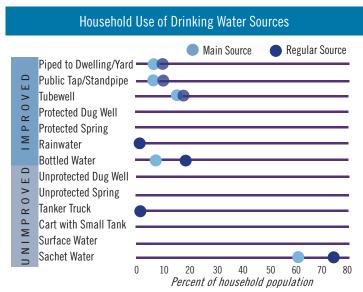
# BILL & MELINDA GATES INSTITUTE for

# PMA2016/LAGOS-R3

#### PERFORMANCE MONITORING & ACCOUNTABILITY 2020

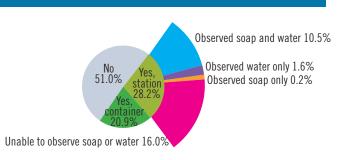
PMA2020 uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning and water, sanitation and hygiene (WASH). The project is implemented by local university and research organizations in 10 countries, deploying a cadre of female resident 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 Lagos are sachet water, bottled water, and tubewells.

#### Household Access to Dedicated Handwashing Station



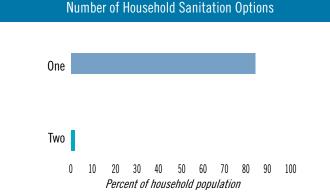
28% of households in Lagos can access a dedicated handwashing station. 11% of all surveyed households have a dedicated hand washing station with soap and water at the station at the time of the interview.





# PMA2016/LAGOS-R3

#### **INDICATORS FOR WATER, SANITATION & HYGIENE**

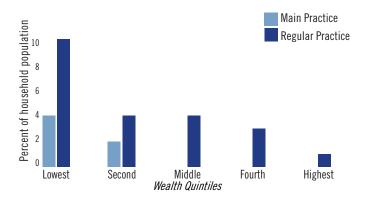


The vast majority of the population in Lagos reports using only one sanitation option. This sanitation option may include an improved, unshared facility, or various unimproved options: shared, non-improved, or the practice of open defecation.

# Main Sanitation Facility Improved not shared Shared Non-improved Open defecation 0 10 20 30 40 50 60 Percent of household population using sanitation facility as main practice

The use of non-improved (shared and non-improved facilities, and open defecation) make up roughly 50% of main sanitation facility usage in Lagos. 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.

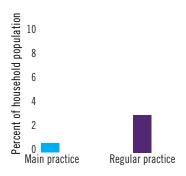
#### Open Defecation by Household Wealth Quintile



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.

#### Open Defecation as Main or Regular Practice



Open defecation is not common in Lagos. A higher pecent of the household population reports open defecation as a regular rather than main practice. Thus, the overall prevalence of open defecation practice is higher than that implied by the main practice indicator.

#### SAMPLE DESIGN

The PMA2016/Lagos-R3 survey used a two-stage cluster design. A sample of 52 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, with 40 households randomly selected. Households were surveyed and occupants enumerated. The final sample included 1,727 households with a total population of 6,131. 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: Akintunde Akinleye/NURHI (2012), Courtesy of Photoshare





