PHASE 4 – Leave no one behind!

Case Studies: Evidence of Change

THE EIGHT CASES

1. Five changes in a Uganda refugee settlement (UNHCR)

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Case Study 1 — Five changes in a Uganda refugee settlement

Background

UNHCR, the UN refugee agency, leads refugee protection in Uganda and oversees the water user committees responsible for managing water points in refugee settlements. Before the iWASH training, WASH staff recognised a gap between policy commitments and day-to-day practice. Disability inclusion was considered important, but staff had not received structured training or systematically assessed how inclusive their work was. The iWASH training, therefore, represented the first organised effort to provide practical tools and build staff confidence to strengthen inclusion within their existing roles.

The shift in thinking

The most significant change was a shift from **passive** to **active** inclusion. Rather than assuming that people with disabilities would come forward or that others would represent their views, staff began actively seeking their participation in planning and decision-making.

Routine processes had often left people with disabilities invisible—not through deliberate exclusion, but because standard approaches did not always reach them.

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“It is not that they exclude people with disability intentionally, but there is less effort to mobilise these people, less effort to hear from them. The training made clear: we need to hear from these people.” — UNHCR WASH staff member

Five changes in practice

Field monitoring identified five changes directly linked to the training.

1. Disability representation on water user committees

UNHCR now requires that **at least one female committee member is a person with a disability**. Previously, committee requirements focused only on gender balance. This represents a settlement-wide governance change: the requirement applies to all water user committees, not just individual projects.

2. Ramps standardised on rehabilitated tap stands

Partners repairing damaged tap stands now install ramps as standard. Previously, kerb-like edges prevented wheelchair users and people who crawl from accessing taps. The new approach is applied consistently across all tap-stand rehabilitation, embedding accessibility into routine infrastructure work.

3. Priority queues at water points

People with disabilities who join a queue are now given priority by the water point manager. This operational change requires no additional infrastructure—only an intentional adjustment to how water points are managed.

4. Higher prioritisation within the specific-needs system

Within UNHCR’s existing specific-needs category, people with disabilities are now given the **highest priority** for housing support, construction assistance and service allocation. This represents a shift in how resources are targeted, rather than the creation of a new system.

5. Community support for isolated individuals

Where a person with a disability lacks family support, UNHCR now identifies neighbouring households that can assist. This helps bridge the gap between formal services and individuals who may otherwise be unable to access them independently.

Significance

These changes extend beyond individual staff practice. Because UNHCR coordinates water user committees and sets governance requirements for WASH partners, adjustments introduced through the training can influence practice across the entire settlement.

The case also demonstrates that disability inclusion does not always require major additional resources. Several changes involved simple modifications to existing systems—committee membership, queue management and community support—while others embedded accessibility into routine infrastructure rehabilitation.

UNHCR has since requested refresher training within six months, recognising that inclusive practice requires reinforcement as staff change and new organisations begin operating in the settlement.

Evidence

- **Training:** iWASH settlement training, Uganda, 2025
- **Corroboration:** Findings were confirmed by HI Uganda programme staff and the Office of the Prime Minister's WASH Focal Point, Kyaka II.
- **Strength of evidence:** Strong–Medium — findings draw on multiple sources, with key governance changes independently corroborated.
- **Sources:** Key informant interviews; HI Uganda programme documentation; Uganda monthly reports, 2025–26.

Case Study 2 — OPD–INGO partnerships in the Wau response

Background

Before the Wau iWASH training, WASH organisations and local organisations of persons with disabilities (OPDs) had limited interaction. WASH actors focused primarily on service delivery, while OPDs concentrated on disability rights, with few mechanisms linking the two.

Under Phase 4 of the Leave No One Behind (LNOB) programme, PWDS — a Wau-based OPD — received a sub-grant to co-facilitate the iWASH training. PWDS staff co-led the disability inclusion modules alongside HI. This shared facilitation role helped build relationships, strengthened OPD visibility and established PWDS as a programme partner, creating a foundation for collaboration after the training.

The shift in thinking

The key shift was from viewing an OPD as a source of information to recognising it as a programme partner.

PWDS participated not as observers or guests but as peer co-facilitators. This gave WASH actors direct experience working with OPD staff and demonstrated OPD expertise in practice.

"We saw WASH actors collaborating and engaging with OPDs in a way that had simply not been happening before the training."

Post-Training Developments

1. Joint needs assessment and NFI redistribution

Malteser International, the lead WASH actor in Wau, subsequently asked PWDS to jointly assess WASH needs among people with disabilities. Together, they redistributed 689 WASH NFI (Non-food item) kits to people with disabilities — many of whom had not previously received disability-targeted WASH supplies.

This is the first documented example under Phase 4 of WASH supplies in Wau being specifically targeted on the basis of disability status. The distribution is recorded in HI South Sudan's training reports.

2. Disability-inclusive targeting during the cholera response

During the cholera outbreak in October–November 2025, two to three months after the training, a WASH organisation partnered with the OPD CVIDO to distribute hygiene supplies to people with disabilities as part of the emergency response.

This provided a second example of WASH–OPD collaboration resulting in disability-inclusive targeting during an emergency — an approach not documented prior to the training.

What this suggests

Both examples highlight the potential value of sub-granting OPDs as co-facilitators rather than involving them only as training participants or guests. Co-facilitation created opportunities for WASH actors and OPDs to work together directly, while strengthening OPD capacity and visibility as programme partners.

The effect appears to have extended beyond the training period. By the time of this review, PWDS was receiving requests from other Wau WASH partners to deliver training but lacked sufficient funding to meet demand.

"Shifting the knowledge to the OPD — even if HI is not there, the OPD can do the training."

This suggests that capacity may no longer be the main constraint; funding and access to delivery opportunities are now the limiting factors.

Significance

The Wau experience indicates that co-facilitation can do more than improve the quality of a single training event. It can help establish ongoing relationships between OPDs and WASH organisations and create opportunities for OPDs to apply their expertise in programme delivery.

The evidence is based on two documented examples, so it should be interpreted as a promising pattern rather than a proven causal effect. Nonetheless, co-facilitation is a relatively low-cost approach that could be tested and monitored in other locations.

Evidence

- **Training:** iWASH training, Wau, South Sudan, 2025
- **Verification:** 689 NFI items documented in HI South Sudan training reports; cholera-response activity confirmed in activity reports from October–November 2025.
- **Corroboration:** Findings confirmed independently by HI South Sudan programme staff and the PWDS co-facilitator.
- **Strength of evidence:** Strong–Medium — named organisations, a documented item count and corroboration from multiple sources.

- **Sources:** Key informant interviews; HI South Sudan training reports; activity reports, October–November 2025.

Case Study 3 — A water kiosk designed with a woman with a disability

Background

Somaliland is the only Phase 4 country where the WASH cluster is chaired by the Ministry of Water Resources. This leadership arrangement created a direct pathway for government engineers and officials to participate in the iWASH training alongside NGO staff.

The Hargeisa training in September 2025 brought together WASH actors from international and local NGOs and government institutions. Notably, it included an official from the Ministry of Water Resources.

The shift in thinking

The training helped reframe disability inclusion from a technical design specification applied at the end of a project to a question asked at the outset of service planning.

Previously, accessibility was often understood as providing an accessible toilet or adapting a facility. The training encouraged participants to begin instead by consulting people with disabilities directly about their needs and how they use services. This broadened the concept of accessibility: a service is not truly accessible if a person cannot reach it, does not know about it, or has not been asked what would work for them.

“Leave No One Behind moved from a slogan to an operational question: who in this community cannot access this service, and why? And have we actually asked them?”

What happened next

The Ministry of Water Resources subsequently applied this approach through the World Bank’s *Groundwater for Resilience* project, a major externally funded infrastructure programme in Somaliland.

Ministry staff consulted directly with a woman with a disability and used her mobility needs and preferences to inform the design and location of a new water kiosk. The kiosk was constructed accordingly, demonstrating the practical application of inclusive design principles within a government-led infrastructure project.

The example was later featured in a short film published through the World Bank project platform and on LinkedIn, providing independently accessible documentation of the change.

Significance

This case illustrates a potentially important pathway from training to system-level change: government-led WASH coordination enables ministry staff to participate in training, and those staff can then apply inclusive approaches within larger infrastructure programmes.

The example highlights the value of reaching government engineers and officials who influence service design, rather than focusing training solely on humanitarian NGO staff. It also demonstrates how inclusive approaches can be integrated into externally funded programmes when government actors have the knowledge and confidence to apply them.

HI Somaliland identified this as the furthest-reaching result associated with the Hargeisa training. However, the evidence is based on a single documented example, indicating potential influence rather than a proven wider shift in government practice.

Evidence

- **Training:** iWASH Hargeisa training, September 2025.
- **Documentation:** Short film published through the World Bank Groundwater for Resilience project platform and LinkedIn.
- **Corroboration:** Confirmed by HI Somaliland programme staff.
- **Strength of evidence:** Strong–Medium — named project and independently published documentation, with corroboration from programme staff.
- **Sources:** Key informant interviews; HI Somaliland programme documentation; World Bank Groundwater for Resilience project platform.

Case Study 4 — Disability focal points enter the Mogadishu clusters

Background

Before the training, Mogadishu's WASH and Protection clusters had no formal Disability Inclusion Focal Points (DIFPs). A Disability Inclusion Working Group (DIWG), established during an earlier phase, was linked to the Protection cluster, but no equivalent mechanism existed within WASH.

HI delivered the first iWASH training in Mogadishu from 16–18 September 2025. The cohort included WASH staff from national NGOs, INGOs and OPDs, among them senior managers, engineers and programme coordinators.

The shift in thinking and coordination practice

The training helped transform disability inclusion from a broad commitment into a defined responsibility within cluster coordination. Participants reported substantial increases in their knowledge and confidence, although self-ratings reflect perceived knowledge rather than objective learning. Every participating organisation developed a written action plan specifying concrete changes and timelines.

"The training came at exactly the right time — we now have a pathway to ensure that persons with disabilities are not overlooked in our cluster response planning."

Post-Training Developments

1. Disability Inclusion Focal Points established

Four DIFPs were identified from the training cohort — two based in Mogadishu and two in Hargeisa. In Mogadishu, OPD representatives acting as DIFPs through the DIWG are now formally linked to both the WASH and Protection clusters. They represent disability inclusion within cluster coordination and deliver regular awareness sessions during cluster meetings.

2. Organisational commitments translated into action plans

Participating organisations documented specific, time-bound commitments in the training reports, including:

- **Applying minimum inclusion actions in assessments and WASH works.** One organisation committed to applying minimum disability-inclusion actions in upcoming assessments and using the RECU (Reach, Enter, Circulate, and Use) accessibility model for WASH works in two districts within three months.
- **Making water management and hygiene information more inclusive.** Another organisation committed to including people with disabilities on water management committees and adapting Information, Education, and Communication (IEC) materials for people with different disabilities during hygiene sessions.
- **Setting an accessibility standard for new latrines.** A third organisation committed to ensuring that 15% of latrines constructed over the following year would meet universal accessibility standards.
- **Strengthening OPD advocacy.** A fourth organisation committed to establishing OPD advocacy groups to promote disability rights within WASH policy and practice.
- **Applying universal design to latrine construction.** An engineer committed to redesigning latrines using universal design principles to improve usability for people with physical, sensory, intellectual and cognitive impairments.

Significance

This case represents the first documented effort in the review to establish disability-inclusive WASH within Mogadishu's cluster coordination system. The introduction of OPD-linked focal points provides a mechanism for disability inclusion to remain visible in cluster discussions after the training has ended. The organisational action plans also create a bridge between training and implementation, translating learning into commitments on assessments, infrastructure, participation and advocacy.

The evidence suggests strong demand among Somali WASH actors, although limited training resources constrain wider uptake. The sustainability of the new focal-point arrangements and organisational commitments will require follow-up to assess whether they are maintained over time.

Evidence

- **Training:** iWASH training, Mogadishu, 16–18 September 2025.

- **Participants:** 18 participants (16 men, 2 women) from WASH organisations and OPDs.
- **Reported learning gain:** +138% in self-rated knowledge; reflects perceived knowledge and confidence rather than objective learning.
- **Participant feedback:** 80% rated the training “very useful”; 100% would recommend it; 40% felt the duration was insufficient given the volume of content.
- **Follow-up:** No RAAL Lab conducted during the training period; a formal tool review had not yet been scheduled.
- **Action plans:** All participating organisations documented named actions with timelines.
- **Strength of evidence:** Strong–Medium — documented organisational commitments and changes to cluster arrangements, supported by training records and project review documentation.
- **Sources:** iWASH Training Report (Mogadishu); Project Review Meeting Minutes LNOB4 (Somalia); SOM Interim Report (May 2025); iWASH Training Article (Somalia); Somalia monthly reports (September–November 2025).

Case Study 5 — From training room to cluster meetings in Hargeisa

Background

The Hargeisa iWASH training brought together WASH staff from national and international NGOs, OPDs and government. Participants started with relatively limited knowledge of disability inclusion, providing an important test of whether the training could build understanding among people with little previous exposure to the topic.

The Somaliland Disability Inclusion Task Force (SDITF), which had been established during an earlier phase, provided an existing coordination structure through which trained participants could continue to engage and share learning. Members of the task force were already moving towards greater self-facilitation, providing an important foundation for the changes that followed.

The shift in thinking

The training helped participants move from seeing disability inclusion as a general commitment to making it part of their day-to-day coordination and programme responsibilities. Each participating organisation developed structured commitments for applying the learning. Trained focal points then began using existing coordination structures to share disability inclusion messages with a wider group of WASH and humanitarian actors.

“At the beginning of the training, I did not know about disability inclusion; I have learned a lot and I will now make sure that the WASH services we provide reach everyone — including persons with disabilities.”

Post-Training Developments

1. Disability inclusion brought into cluster coordination

A Disability Inclusion Focal Point from the training cohort gave a formal presentation on disability inclusion within the Hargeisa Protection cluster. The presentation provided an opportunity to take learning from the iWASH training into an established coordination forum and raise disability inclusion with actors beyond the original training group.

2. Learning spread to Child Protection

The same focal point subsequently delivered a dedicated session for the Child Protection Area of Responsibility. This extended the discussion beyond WASH and provided an early example of disability inclusion learning reaching other parts of the humanitarian coordination system.

3. Government members began self-facilitating

By October 2025, government members of the SDITF were self-facilitating Module 6 of the Disability Reference Group (DRG) training package—Inclusive Project Cycle Management—during the task force's technical support meetings. This represents an important sign of local ownership: trained participants, rather than HI staff, were leading sessions for other stakeholders. However, this should be understood partly as a continuation of work already underway through the SDITF, rather than solely as an outcome of the iWASH training.

4. OPDs became more embedded in cluster coordination

OPDs in Hargeisa are now active within both the WASH and Protection clusters, with further disability inclusion presentations at cluster level confirmed. This provides a mechanism for OPD perspectives to remain part of coordination discussions beyond individual training events.

Significance

The Hargeisa experience shows how training can connect with existing coordination structures and create opportunities for participants to spread disability inclusion beyond the original training room.

The strongest evidence is not the percentage change in test scores, which requires clarification of the underlying data, but what participants did afterwards: developing organisational commitments, presenting on disability inclusion within coordination forums, and beginning to facilitate learning for others.

The involvement of government and OPDs is particularly significant. Government-led self-facilitation suggests that local ownership is possible within a relatively short period, while OPD participation in cluster structures provides a potential mechanism for sustaining disability inclusion in coordination.

At the same time, the pre-existing SDITF means that these developments cannot be attributed to the iWASH training alone. The training appears to have strengthened and connected with an existing enabling structure, rather than creating that structure from scratch.

Evidence

- **Training:** iWASH training, Hargeisa, September 2025.
- **Participants:** 14 participants (10 men, 4 women).
- **Learning:** Pre- and post-training assessment data indicate a substantial improvement in reported knowledge.
- **Cluster engagement:** Disability inclusion presentations in the Protection cluster and Child Protection Area of Responsibility are documented in Somalia monthly reports.
- **Self-facilitation:** Government members of the SDITF facilitated DRG Module 6 during technical support meetings from October 2025 onwards.
- **DIFP roles:** OPDs are formally linked to the WASH and Protection clusters.
- **Strength of evidence:** Strong–Medium **—** multiple documented examples of post-training application and continued engagement, although attribution is complicated by, rather than independent of, pre-existing SDITF structures**.**
- **Sources:** iWASH Training Report; Somalia monthly reports, September–November 2025; iWASH Training Article (Somalia); SOM Interim Report (May 2025); pre/post assessment data.

Case Study 6 — A district building control committee reactivated

Background

The Kyaka II iWASH training, held from 23–25 September 2025, convened 36 participants from humanitarian organisations, organisations of persons with disabilities (OPDs), refugee leadership structures and district authorities, including Kyegegwa District Local Government and the Kyegegwa District Union of Persons with Disabilities. It was the most diverse cohort in Uganda's Phase 4 rollout and the only training to include district authorities from the outset. A guest session from MSF West Africa provided cross-country peer learning — the only example of this in Uganda's Phase 4 implementation.

Approximately one month later, a Review, Adapt and Action Learning (RAAL) Lab was conducted, offering a structured opportunity to apply the training to district systems, processes and tools.

The shift in knowledge and advocacy

For the District Union, the training strengthened both technical knowledge and confidence to advocate for disability rights within district governance structures. Participants reported feeling better equipped to engage as rights-holders rather than petitioners, using recognised standards and guidance to support their case.

“The training gave us the language and the evidence to go back to our district structures and say: this is not optional. Accessibility is a right. The Building Control Committee is now functioning — that is a direct result of what we learned here.”

— District Union participant

Post-Training Developments

Five changes were documented following the training and RAAL Lab.

1. Reactivation of a dormant Building Control Committee

Following advocacy by the District Union, the previously inactive Kyegegwa District Building Control Committee was reactivated. The Union attributes this change to the capacity and support gained through iWASH and LNOB. The committee now plays a role in enforcing accessibility standards for construction across the district, including WASH infrastructure.

2. Strengthening of disability focal points within district government

Post-training advocacy also contributed to strengthened disability focal points within Kyegegwa District Local Government. This provides a more formal entry point for disability inclusion within district planning and decision-making processes.

3. Identification of three systemic gaps for follow-up

The RAAL Lab documented three key gaps in district practice:

- people with disabilities were informed about decisions after they were made, rather than consulted during decision-making;
- budgets for disability priorities were insufficient; and
- communication barriers affecting deaf and blind people were not adequately addressed.

Documenting these gaps provides a baseline for future monitoring and follow-up.

4. Harmonisation of eight WASH tools

During the RAAL Lab, WASH partners reviewed and harmonised eight tools. OPDs contributed practical, field-based insights that helped identify accessibility and inclusion gaps that might not have been detected through desk review alone.

5. Linking Global Disability Summit commitments to district action

In a presentation on 28 October 2025, the District Union demonstrated how Uganda’s commitments from the 2025 Global Disability Summit could be operationalised at district level. This helped connect district practice with national and international commitments and created a record to support future accountability.

Significance

This case provides one of the clearest examples in Uganda of change reaching district governance and accountability structures, rather than remaining at the level of individual knowledge or organisational practice.

The documented sequence is: **training and LNOB support → increased OPD capacity and advocacy → engagement with district government → reactivation of a dormant governance mechanism.**

The District Union explicitly links the training to the committee's reactivation, offering a credible account of how change occurred. While this does not constitute independent causal verification, it provides a plausible pathway of influence.

The case suggests that iWASH may have greater potential for sustained institutional change when technical training is paired with strengthened OPD capacity to participate in decision-making and hold duty-bearers to account.

Evidence

- Training: 36 participants (21 men, 15 women), Kyaka II, 23–25 September 2025.
- RAAL Lab: October 2025; 18 participants (8 men, 10 women), including the District Union, UNHCR, Office of the Prime Minister and WASH partners.
- Verification: Reactivation of the Building Control Committee documented in the RAAL Lab report and the District Union presentation of 28 October 2025.
- Level of change: Systems/governance — change to a district-level institutional mechanism, beyond individual behaviour or knowledge.
- Strength of evidence: Strong–Medium — the governance change is documented in multiple programme sources and supported by participant testimony, though attribution to the training is based primarily on the District Union's account.
- Sources: RAAL Lab reports (Kyaka II and Nakivale: WASH, Protection and gender-based violence); Kyaka II iWASH report; Kyegegwa District Union presentation (28 October 2025); Uganda monthly reports (October–November 2025); Uganda Interim Report (May 2025)

Case Study 7 — A new government-chaired working group in Wau

Background

Wau, in Western Bahr el Ghazal, is one of South Sudan's more remote and under-resourced humanitarian settings. The iWASH training, including RAAL elements on day three, was delivered from 19–21 August 2025, was the first disability-inclusive WASH training conducted in the state. It brought together 26 participants from 18 organisations, including

five international NGOs, eight national NGOs, three government bodies, one UN agency and one organisation of persons with disabilities (OPD).

The training was led by HI's Inclusive Humanitarian Action (IHA) team and co-facilitated by a woman with a physical impairment from PWDS, the locally sub-granted OPD partner. Securing participation required significant in-person mobilisation: only three of the invitees responded to the initial digital invitation, and individual office visits were needed to confirm attendance.

The shift in knowledge and practice

Participants' knowledge increased by **35%** on the matched pre/post test. Early indications of application were captured through a follow-up survey: eight of nine respondents reported using the Inter-Agency Standing Committee (IASC) Guidelines, eight had begun adapting their practice, and seven had carried out the required actions.

These findings are encouraging but should be interpreted with caution. Only nine of the 26 participants responded to the follow-up survey, and all data were self-reported. The results therefore suggest emerging application rather than verified behaviour change.

"The RAAL Lab gave us the space to pause, listen and adjust. It reminded us that effective WASH is not just about providing water and sanitation — it is about ensuring every person can benefit regardless of ability. And it is a human right."

Post-Training Developments

Five changes were documented in Wau following the training and subsequent support.

1. Establishment of a government-chaired Disability Inclusion Technical Working Group

A Disability Inclusion Technical Working Group (DITWG) was established in Wau, chaired by the State Ministry of Gender, Child and Social Welfare and co-chaired by the Union of Persons with Disabilities. Trained LNOB focal points also participate. This created a formal mechanism for coordinating disability inclusion across state-level actors.

2. OPD leadership in coordination

PWDS chaired a DITWG coordination meeting on 21 November 2025, marking a shift from OPD participation in humanitarian activities to a more formal leadership role in coordinating disability inclusion at state level.

3. Thirteen focal points trained across sectors

A Training of Trainers held from 18–20 November 2025 produced 13 disability inclusion focal points from INGOs, national NGOs and government institutions, including the Relief and Rehabilitation Commission (RRC). The RRC Director attended the training and called for the iWASH approach to be extended to education, indicating growing interest in disability-inclusive approaches beyond WASH.

4. Disability inclusion integrated into the cholera response

A Wau-based organisation that participated in the training subsequently led a cholera response that included distribution of hygiene kits to people with disabilities, drawing on iWASH must-do actions and disability-related data.

5. Formalised collaboration between HI and Malteser International

Malteser International signed a technical collaboration agreement with HI, providing a formal basis for continued cooperation on disability-inclusive WASH beyond the training period.

Significance

The establishment of a government-chaired and OPD-co-chaired DITWG represents a potentially durable mechanism for disability inclusion within state-level governance. Its structure reduces reliance on any single organisation or donor and provides a platform for sustained coordination.

The RRC Director's interest in extending the iWASH approach to education suggests that the learning may be beginning to influence thinking beyond the WASH sector. This should be viewed as an early indication of wider institutional uptake rather than evidence of established cross-sector change.

Overall, the case illustrates a promising pathway: t**raining → strengthened OPD and government capacity → formal coordination mechanism → wider institutional ownership**.

Evidence

- Training: 19–21 August 2025; 26 participants (19 men, 7 women), including one woman with a physical disability.
- Learning: gains are reported as cohort-level means rather than matched individual comparisons.
- Verification:
  - PWDS chairing of the DITWG confirmed in monthly reports.
  - Training of Trainers produced 13 focal points (11 men, 2 women, including three people with disabilities).
  - Tool review conducted on 29 September 2025.
  - Cholera response and Malteser collaboration agreement documented in activity records.
- Level of change: Systems/governance — establishment of a formal state-level coordination mechanism involving government and an OPD.
- Strength of evidence: Strong–Medium — multiple sources document the establishment and functioning of the working group. Attribution to the training is clearer for some activities than others, particularly where pre-existing structures or relationships may also have contributed.

- Sources: Wau RAAL Lab activity report; South Sudan monthly reports (September–November 2025); South Sudan Interim Report; Wau follow-up survey; project review minutes; MEAL interim report.

Case Study 8 — Objective evidence of learning in Yobe State, Nigeria

Background

Nigeria's second Phase 4 iWASH training cohort was conducted in Yobe State on 20–21 August 2025, reaching 44 participants in Damaturu. The training was co-facilitated by CBM and the Joint National Association of Persons with Disabilities (JONAPWD), following the delivery model piloted in Adamawa two months earlier.

Yobe is situated within the Lake Chad Basin crisis zone, where a chronic humanitarian emergency continues alongside an active WASH cluster response. For both Nigerian cohorts, an objective multiple-choice test (MCQ) was used instead of a self-rated scale. This allowed direct comparison between Adamawa and Yobe and reduced the risk of self-assessment bias.

The MCQ assessed knowledge of disability concepts, the IASC Guidelines, Washington Group Questions (WGQs), accessibility standards, and twin-track/must-do actions. Both cohorts improved by approximately 41% on the same test, providing the strongest like-for-like evidence of learning in Phase 4.

The shift in knowledge

The most significant pre-training knowledge gap in Yobe related to the WGQs. This domain also showed the greatest improvement, with scores increasing by 60% — the largest single-domain gain recorded in the Nigeria dataset. This indicates that the training effectively addressed a specific and substantive gap, although the assessment alone cannot confirm whether participants subsequently applied the WGQs correctly in practice.

"This training strengthened the capacity of local humanitarian actors to design and implement more accessible water, sanitation, and hygiene programmes. The OPD co-facilitation made the disability dimension tangible and real."

Post-Training Developments

1. Yobe achieved the highest post-test score in Nigeria

Yobe's average post-test score was **8.67/10**, compared with **8.29/10** in Adamawa. Baseline scores were similarly close (6.17 and 5.88 respectively), meaning both groups improved by almost the same margin. The small difference in post-test scores should not be interpreted as evidence of substantially different training effectiveness.

2. Fourteen disability inclusion focal points were designated

The Yobe cohort designated **14 disability inclusion focal points**, adding to **24** in Adamawa and bringing the total to **38** across the two Nigerian cohorts. This represents an important

foundation for continued disability-inclusive programming, although systematic follow-up mechanisms are not yet in place to assess subsequent action by focal points.

3. OPD co-facilitation demonstrated local delivery capacity

JONAPWD co-facilitated the Yobe training without the involvement of an international CBM/HI specialist. This builds on the Adamawa model and demonstrates that a Nigerian OPD can assume a substantive delivery role, reducing reliance on international technical specialists and increasing the potential for local replication.

4. A three-state coordination mechanism was established

The Disability Working Group agreed to develop State Focal Points across **Borno, Yobe and Adamawa**, creating a mechanism to link the two training cohorts and extend disability inclusion across the wider Lake Chad Basin crisis response.

What this suggests

Yobe provides the strongest objective evidence of learning in Phase 4. The use of a standardised MCQ offers a more reliable measure of knowledge gain than self-assessment and enables domain-level analysis. For example, WGQs showed the largest improvement in Yobe (+60%), while the accessibility definition was the weakest post-test item in Adamawa (scored 59.5%). Such detail can guide future training design and reinforcement.

However, objective testing demonstrates knowledge acquisition rather than behavioural change. Future phases should therefore retain standardised MCQs while incorporating follow-up mechanisms to assess whether participants apply the learning in practice.

The case also illustrates an encouraging shift towards localisation. JONAPWD's co-facilitation role suggests that delivery capacity can increasingly sit with local OPDs. Further monitoring is required to determine whether this leads to sustained, independent replication.

Evidence

- Training: 44 participants, Damaturu, Yobe State, 20–21 August 2025.
- Knowledge gain: Yobe scores increased from 6.17 to 8.67/10; Adamawa improved by a comparable 41% using the same test.
- Domain detail: WGQ domain increased by 60% in Yobe; accessibility definition was Adamawa's weakest post-test item (59.5%).
- Focal points: 14 designated in Yobe; 38 total across both cohorts.
- Localisation: JONAPWD co-facilitated without the international specialist listed in source records.
- Level of change: Strong evidence of knowledge gain and emerging localisation; limited evidence of sustained practice change.
- Strength of evidence: Strong for learning; moderate for application/localisation.

- Sources: Yobe iWASH training report; Adamawa iWASH training report; Nigeria monthly reports; MCQ assessment data; Disability Working Group records.