



# Dikwa Activity Update

# Contextual Analysis

The Humanitarian context in Borno State remains fluid and highly unpredictable. The month under review (March) witnessed increased numbers of attacks, abductions, criminalities, looting and mass displacements across the states and meeting up of illegal vehicles check points (IVCPs) along major routes connecting states and implementation areas.

Food access is anticipated to remain low as staple food prices are expected to remain high, driving Crises (IPC Phase 3) throughout the scenario period in the worst conflict affected areas like Dikwa.

The recent attacks in Marte and Dikwa LGAs of Borno State led to fatalities and massive displacements of the rural population – this has in turn resulted in a significant decline in the food security and livelihoods of the affected households.

These attacks are of concern as some populations have been displaced multiple times in a short thereby placing them in a severe situation of losing all they have and been traumatized as they do not feel safe. Without having the specific numbers many conflict affected households have relocated to neighbouring areas, while others to Maiduguri. Some the most vulnerable populations, including many elderly, women and children, have likely remain in their areas of origin, with lower than normal access to typical food and income sources and humanitarian assistance. (FEWS NET.

# Coordination with Stakeholders

- World Food Program (WFP) – Provides funding with technical support on FSL, GFD, CBT, Logistics, MEAL & Security).
- Development/Humanitarian Agencies – All the humanitarian workers from different agencies and sectors (FSL , Nutrition , protections etc.).
- Community Leaders – Traditional, Religious, Women, Youth Leaders etc. as gate keepers to the Community.
- Project Management Committee (PMCs) – Structures put in place to provide leadership in designing, implementation, monitoring and after project's sustainability.
- Civil Societies – CBOs etc.

# Plans

CARE set aside two Major Plans:

- Plan A: CARE technical staff from Maiduguri to support the activity if supported by UNHAS. Continue remote support via phone call and virtual meeting on a routine (daily) basis.
- Plan B: Engage the Community based staff who are originally and recruited from Dikwa with remote supervision from the senior technical staff in Maiduguri.

# Implementation

The activity commenced by engaging the community Members displaced from Dikwa to Maiduguri to understand their plans to stay in Maiduguri or return to Dikwa.

1. Community Based Staff – Through trainings and Virtual meetings.
2. Increased the number skills and non Skills Casual staff; Crowd Controllers.
3. Project Management Committees (PMCs) – These are community decision makers and intermediary between CARE and the Community .
4. Community Nutrition Mobilizers (CNMs) – These are community base people with Nutrition capacity during planning and implementations of Nutrition

# Testimony

## Photo Speak



# Cont....



# Lesson Learned

- Building Local Capacity in Dikwa – Though with consistent supervision this have proven to be effective in terms of activity implementation and monitoring at the field level.
- Consistent Engagement with the Community and Other Stakeholders – consultation and communication is key as it has informed the decisions being reached around the safe resumption of food distributions.
- Multiple transfers upfront.
- Consider CBT activities as opposed to the in-kind food support.

**Thank you**