

DUTCH RELIEF
ALLIANCE

WEATHERING THE STORM

Resilience and Recovery from the 2024
Floods in Borno State, Nigeria





MUAC Screening Session, Mashamari Stabilization Center IRC

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TABLE OF CONTENTS



Acronyms	4
About the Dutch Relief Alliance	5
Foreword	6
Project Background	7
Project Overview	9
Achievements Per Thematic Area	10
Impact Stories	12
Displaced Widow, Eight Children Pulled Back from the Brink	13
Emerging from the Shadows: Zainab's Menstrual Health Triumph	15
Hanne's Daughter Walks for the First Time	17
Furera and the Dignifying Power of Timely Intervention	19
Devastated by Floods, Refreshed by Clean Water	21
Rebuilding Better: Habiba Unlocks New Levels of Business Success	23
Agnes: A Flood Survivor with an Inspiring Story of Recovery	25
Surviving Adversity: Falmata's Dogged Fight for Her Family	27
Dignity in a Kit: How Kursiya Regained Her Esteem	29
Breaking Free: Binta's Exemplary Shift from Harmful Postpartum Myths	31
Khadija & Ali: A Shared Journey of Recovery	34
"I Can Start Again": Fatima's Unyielding Resolve	35
Photo Speaks	36
Learnings	37
Sustainability	39

ACRONYMS



ACJR	Acute Crisis Joint Response
BIA	Best Interest Assessment
CATAI	Centre for Advocacy Transparency and Accountability Initiative
CBI	Care Best Initiative
CHAD	Centre for Community Health and Development
CRUDAN	Crudan Rural Urban Development Association of Nigeria
DRA	Dutch Relief Alliance
EYN	Ekklesiyar Yan'uwa A Nigeria
FSL	Food Security and Livelihoods
GBV	Gender-Based Violence
GHIV Africa	Global Village Healthcare Initiative for Africa
HDP	Humanitarian Development Peacebuilding
IDP	Internally Displaced Person
IRC	International Rescue Committee
IYCF	Infant and Young Child Feeding
LABDI	Life at Best Development Initiative
LGA	Local Government Area
LHI	Life Helpers Initiative
MHM	Menstrual Hygiene Management
MMC	Maiduguri Metropolitan Council
MPCA	Multi-Purpose Cash Assistance
NEMA	National Emergency Management Agency
NFI	Non-Food Items
OCHA	Office for Coordination of Humanitarian Assistance
UMTH	University of Maiduguri Teaching Hospital
UN	United Nations
UNICEF	United Nations Children's Fund
WASH	Water Sanitation and Hygiene
ZOA	Zuid Oost Azie



Maiduguri residents depended on canoe services for intra-city commuting as the rains intensified
Photo Credit: Abdulkareem/ HumAngle

ABOUT THE DUTCH RELIEF ALLIANCE

The Dutch Relief Alliance (DRA) is a coalition of Dutch humanitarian organisations that work to provide humanitarian assistance to people and communities in the wake of international emergencies. By aligning their efforts, they respond to acute crises within 72 hours. Working in partnership with the Netherlands Ministry of Foreign Affairs, they strive to enhance the impact of the humanitarian efforts of international, national, and local NGOs.

Since 2015, the Dutch Relief Alliance has assisted over 4 million people across 22 crises worldwide, providing everything from shelter, protection, healthcare, and cash, to access to water, food, and psychosocial services.

In Nigeria, the consortium-based humanitarian flood response project of the Dutch Relief Alliance was coordinated and led by Plan International Nigeria, and included five other international NGOs, which are: CARE International, Terre des Hommes, ZOA, OXFAM Novib, and Stichting Vluchteling/International Rescue Committee (IRC).

The project was also supported by national NGOs, namely, LABDI, CHAD, CRUDAN, EYN, Life Helpers Initiative (LHI), CBI, GHIV Africa, and CATAL.

These organisations worked in Borno State to address the urgent humanitarian needs resulting from the flooding of 2024 exacerbated by the collapse of the Alau Dam in the state.

This had a negative impact on the lives of the affected people, and informed targeted interventions spanning different categories of need, including livelihood, WASH, Protection, Multipurpose cash, Non-Food Items, Nutrition, and Food Security.

FOREWORD

The extreme weather conditions of 2024 were devastating in Nigeria. At least, 31 out of 36 states experienced some form of flooding or the other.

While the entire northeast of the country was hit, Borno state's case was exceptional as more than 70 percent of the capital, Maiduguri, was flooded, exacerbated by the collapse of the Alau dam. The torrential rains forced the dam to burst, leading to the deaths of 37 persons, injuries to 58 persons, and the displacement of 414,000 persons.

For a region already battling harrowing insurgency for the past 15 years, it represented a fresh blow to the livelihood of the people, severely testing their resilience.

The Dutch Relief Alliance's funding to support the affected communities to rebuild their lives was both timely and life-saving.

Plan International, taking the lead, worked with five other international organizations, namely, CARE International, Terre des Hommes, ZOA, OXFAM Novib, and Stichting Vluchteling/IRC, and six national organisations, to deliver humanitarian support to more than 30,000 persons.

The results of this broad-based partnership are a testament to the power of synergy and strategic collaboration. On the evidence of the successes, I am convinced that, going forward, we can certainly achieve more working together to deliver sustainable and long-lasting impact on our communities.

We are proud to have led this successful intervention which has contributed to community resilience, children's safety, and protection of girls and women.

Before I conclude, I hasten to thank our donor, Dutch Relief Alliance, for the support, and confidence placed in us to deliver on this project. We are also grateful to the Borno state government for the support throughout the six-month period of this project.


I recommend these incredible stories of impact recorded during the intervention for your reading pleasure. We hope that our modest intervention will continue to contribute to durable solutions in the face of the nagging developmental challenges that confront us.



Kind regards

Charles Usie Emmamuzou

Country Director,
Plan International Nigeria



Maiduguri residents now depend on canoe service for intra-city commuting as the rains intensify.

PROJECT BACKGROUND

In 2024, heavy rainfall caused severe flooding across Nigeria, affecting 31 states and over one million individuals. Borno State, in the northeast, was among the hardest hit, with over 414,000 people severely impacted. Before the flood of September 10, 2024, northeast Nigeria was already facing an acute food crisis, and conflict involving non-state armed groups.

The floods in Borno State, triggered by heavy rainfall, and exacerbated by the breaking of the Alau Dam in Konduga Local Government Area (LGA), caused extensive damage to infrastructure, crops, and shelters, severely impacting livelihoods and displacing households. According to the National Emergency Management Agency (NEMA), fast-moving floodwaters submerged over 70% of Maiduguri city. The UN Office for the Coordination of Humanitarian Affairs (OCHA) estimates that over 400,000 people in Borno State were displaced, with 37 deaths and 58 injuries reported.

Displaced families were forced to relocate to both former and operational internally displaced persons' camps, which quickly reached full capacity and were unable to provide adequate safe drinking water, food, and basic non-food items (NFI).

Schools were also being used as temporary shelters, further disrupting children's education. To ensure early return to pre-flood state, and to stimulate resilience, government authorities began closing former IDP camps and relocating displaced populations from schools back to their communities, where water levels had receded.

Sadly, protection and Gender-Based Violence (GBV) risks spiked, particularly for women, adolescents, and children. Reports indicated an increasing number of separated and unaccompanied children in IDP camps. The lack of child-friendly spaces, combined with overcrowding and the destruction of schools, further exacerbated children's vulnerabilities.

The floods struck during the lean season, worsening an already dire food crisis. Occurring just before the harvest season, the floods devastated agricultural lands and central market networks, severely disrupting economic activities and livelihoods. Loss of agricultural land and harvests threatened displaced people and worsened food insecurity. This hindered communities' ability to recover from both the flooding and the food crisis.

In Borno State, major health facilities, including the University of Maiduguri Teaching Hospital (UMTH) and the State Specialist Hospital, were cut off. Other important community assets affected were the central market, post office, schools, and worship centres. This affected the socio-cultural life of the people and caused untold hardship associated with the non-accessibility to these assets during the period. Due to damaged shelters, many displaced individuals were sleeping outside, increasing their exposure to malaria-causing mosquitoes, and stagnant water, leading to hygiene-related infections, heightening the risk of epidemic in the community. Children were particularly vulnerable to respiratory tract infections caused by microorganisms and severe environmental conditions they were exposed to. Overcrowded IDP camps, along with the destruction of WASH infrastructure, further restricted access to sanitation, latrines, and safe drinking water which can also increase the spread of waterborne diseases.

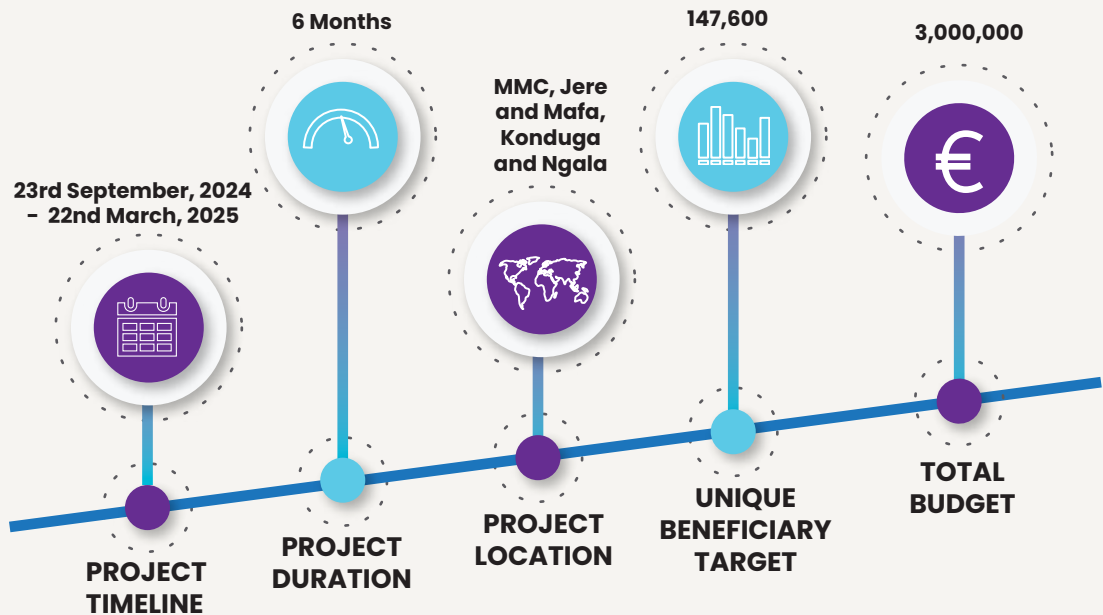
OCHA's Rapid Needs Assessment, along with evaluations conducted by joint response partners, identified several urgent priorities, including Health, WASH, food security and livelihoods (FSL), shelter/NFI, protection, and nutrition.

It was within this challenging context that international actors, in partnership with national organisations, secured the DRA funding to respond to the emergency. The six-month project commenced on September 22, 2024, and ran until March 22, 2025, with a clear target to assist 147,600 flood-affected individuals.

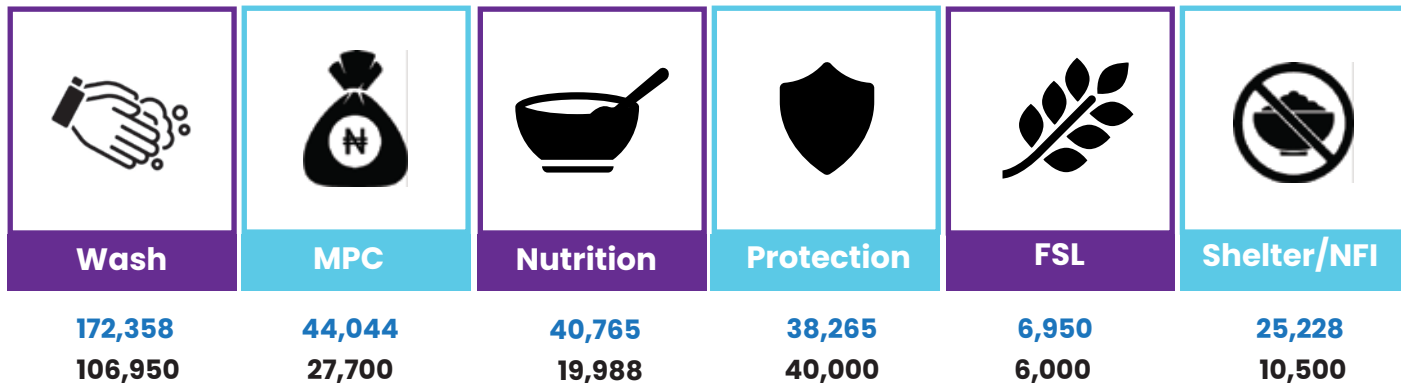


PROJECT OVERVIEW

Project Title: Dutch NGO's Joint Humanitarian Response for Floods in Nigeria



RESPONSE/SECTOR



LEGEND >>

REACH

TARGET

ACHIEVEMENTS PER THEMATIC AREA

FOOD SECURITY AND LIVELIHOOD



Number of people enabled to meet their basic food needs (6,000 person)

6,950 Individuals were enabled to meet their basic food needs, improving household food security and reducing the risk of hunger and malnutrition

Percentage achievement: **116%**

PROTECTION

Number of persons reached by the implementation of specific prevention measures (20,500 persons)

A total of **19,301** persons were reached through the implementation of specific prevention measures, enhancing protection and reducing risks within the community.

Percentage achievement: **94%**

Number of persons who receive an appropriate response: (3,100 persons)

1,765 individuals received an appropriate response tailored to their needs, ensuring timely support and access to essential services.

Percentage achievement: **172%**

Number of children that received support specified to their needs (22,800 persons)

13,580 children received specialized support aligned with their specific needs, contributing to their well-being, safety, and development.

Percentage achievement: **60%**

Number of unaccompanied and/or separated children who are reunited with their caregivers OR in appropriate protective care arrangements based on BIA (40 children)

44 unaccompanied and/or separated children were reunited with their caregivers or placed in appropriate protective care arrangements based on a Best Interest Assessment (BIA), ensuring their safety and well-being.

Percentage achievement: **110%**

MPC

Number of people benefitting from unconditional and unrestricted cash transfers in each month (27,700 Individuals)

A total of **44,044** Individuals benefited from a one off unconditional and unrestricted cash transfers enabling them to meet their essential needs with dignity and flexibility.

Percentage achievement: **159%**



WATER, SANITATION AND HYGIENE (WASH)

Number of people having regular access to soap to meet hygienic needs (15,300 persons)

24,431 persons have regular access to soap, ensuring improved personal hygiene and reducing the risk of hygiene-related diseases.

Percentage achievement: **160%**

Number of people having access to dignified, safe, clean and functional excreta disposal facilities (6,260 persons)

8,660 persons now have access to dignified, safe, clean, and functional excreta disposal facilities, enhancing sanitation and public health conditions.

Percentage achievement: **138%**

Number of people having access to sufficient and safe water for domestic use (70,090 persons)

The project provided **104,542** persons with sufficient and safe water for domestic use, improving overall household health and hygiene.

Percentage achievement: **149%**

Number of people reached with hygiene promotion/awareness raising activities (137,942 persons)

A total of **457,521** persons were reached through hygiene promotion and awareness-raising activities, fostering better hygiene practices and disease prevention.

Percentage achievement: **332%**

Number of health facilities rehabilitated (1)

One **(1)** health facilities was at Mashamari ward was rehabilitated, improving access to quality healthcare services and ensuring better medical support for the affected communities.

Percentage achievement: **100%**

NUTRITION

Number of children under 5 admitted for treatment of Severe or Moderate Acute Malnutrition (2,812 children)

8,770 children under 5 were admitted for treatment of Severe or Moderate Acute Malnutrition, ensuring timely medical and nutritional intervention to improve survival and recovery rates.

Percentage achievement: **312%**

Number of children screened for under nutrition (8,106 children)

31,995 children were screened for undernutrition, enabling early identification and referral for appropriate care and support.

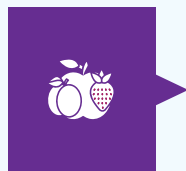
Percentage achievement: **394%**

SHELTER/NFI

Number of people provided with non-food items (other than hygiene/dignity kits) (10,500 persons)

A Total of **25,228** persons were provided with essential non-food items (excluding hygiene/dignity kits), enhancing their well-being and supporting their basic needs in crisis-affected areas.

Percentage achievement: **100%**





IMPACT STORIES

DISPLACED WIDOW, EIGHT CHILDREN PULLED BACK FROM THE BRINK

In the wake of the 2024 flood, many households in Gamboru-Ngala local government area were confronted with a new reality; the reality of losing everything but their lives. The flood sent shockwaves through communities as food and economic losses, displacements, and public health crisis drove an already alarming food and nutrition insecurity even higher.

Lare Jugudum, a 40-year-old mother of eight, was living in Dassabe—a small village outside Gamboru town—when flood water took over the entire village, forcing them to relocate into an internally displaced persons' camp.

This event brought back old feelings of trauma and despair following 15 years of insurgency and displacement in the northeast region of Nigeria. Just a year before, Lare had assumed the role of head of her household after her husband died of an illness, and now has to cater for eight children. She felt worse-off than her previous time in the camp.

Lare a recipient of food items by Care

“My worst nightmare was how to feed my children. Before the flood, we survived on our own with some farm work we did in Dassabe but we lost all our stored food,” she said.



Lare a recipient of food items by Care

“We lost our vegetable garden. We almost lost our hope in hard work and contentment. I believed things were going to return to normal in a while but over here, nothing really prepares you for this sort of events.”

Amid her despair, Lare heard from a community leader that CARE was supporting households affected by floods with food assistance, and that women with children, especially widows, were being prioritised. She presented herself for verification and received a token as part of the assistance. This food assistance ensured that vulnerable households received the minimum emergency flood response package as harmonised and coordinated by the Borno state government. Targeted households received 25kg of Rice and 10kg of Beans.

Lare received in-kind food assistance for herself and children. The impact of the food assistance was evident. It showed in her vigour, her smile, her children's joy, and the high-energy level of her youngest child who was three years old. The assistance significantly reduced their vulnerability and empowered them to rebuild their lives.

“Before receiving the food assistance, just the thought of whether any of the people in camp will have pity on us to give us a little of what they had, was a major heartache,” she said. “I hardly slept. My older children began engaging in cart-pushing at Gamboru market, but they earned only a little and it could not support us. The food we got was a lifeline. It was hard to think of any other thing when the children were hungry,” she added.

EMERGING FROM THE SHADOWS: Zainab's Menstrual Health Triumph

Zainab Adam was displaced by flooding, and temporarily lived at a camp for internally displaced persons. She faced significant challenges managing her menstrual health at the camp, notably, lacking both proper education on menstrual hygiene management and access to menstrual products. Eighteen-year-old Zainab, who is in secondary school, resorted to using unhygienic materials like clothes, foams, and sand during her periods.

She also struggled with feelings of shame and isolation, not knowing how to communicate her needs even to her mother. Zainab described the emotional burden, thus: "I cannot talk to my mother about how I feel because I don't know what she will say." This lack of support and knowledge left her feeling embarrassed and distanced from others, further contributing to her sense of vulnerability.

The stigma surrounding menstruation in the camp compounded these struggles, as many displaced girls and women faced judgment from family members, making them feel inferior and embarrassed. Without access to sanitary products and adequate education, these young women and girls were left to cope with their menstruation in ways that compromised both their physical and emotional well-being.

The project's intervention had a transformative and empowering impact on Zainab and her community.

After attending the Focus Group Discussion sessions organised by the IRC hygiene promotion team, Zainab gained crucial knowledge about proper Menstrual Hygiene Management (MHM). This knowledge not only enabled her to take better care of herself, but also significantly boosted her confidence. Zainab now feels empowered to speak openly with her mother about her menstrual needs, including requesting sanitary pads.

She learned about safe menstrual hygiene practices and how to request necessary supplies like sanitary pads. This new knowledge completely changed her approach to menstruation and communication.

“I can now talk to my mother when my menstrual period begins,” she said. “I am also able to ask her for sanitary pads unlike before when I couldn’t talk to her.”

Zainab is now dedicated to sharing her newfound knowledge with others, aiming to create a supportive environment for her peers. She stated, “I will tell my friends to speak to their mothers about their period”.

HANNE'S DAUGHTER WALKS FOR THE FIRST TIME

Hanne, recipient of Nutrition Support at Mashamari



Hanne, a 35-year-old mother of seven, narrowly escaped being swept away by the floodwater of September 2024 following the collapse of the Alo Dam in Maiduguri. These floods are part of a troubling trend in Borno, where climate change and environmental degradation are increasingly displacing communities and intensifying vulnerabilities across the state.

Despite the absence of her husband, who works in Niger Republic, a neighbouring country, she managed to move her children to safety, arriving at Gubio Internally Displaced Persons' camp, seeking refuge and assistance.

The situation was particularly distressing for Hanne, not only due to the trauma of the flood, but also because of the poor health of her youngest daughter, who was just 20 months old at the time.

Her daughter's health was severely affected by malnutrition, as she was unable to perform basic physical milestones such as crawling, standing, or walking. Hanne was deeply concerned for her child's well-being and feared for her future, especially since the resources and support needed to address these challenges were scarce.

The destruction of farmlands and markets contributed to the devastation of the local economies, delaying recovery and deepening the food insecurity that had already affected the region.

The Acute Crisis Joint Response (ACJR) Project implemented by the International Rescue Committee (IRC), along with five other organizations, was a timely targeted intervention.

The project worked to address the severe impacts of flooding and displacement in Borno State by providing critical support to affected communities.

The IRC's nutrition programme had a profoundly positive impact on Hanne Musa and her family, offering them crucial support after their traumatic experience with the flood.

Upon visiting the IRC nutrition facility on October 18, 2024, Hanne's daughter was enrolled in a programme aimed at improving developmental, behavioural, and safety outcomes for children at risk of malnutrition. Within two months of consistent care and nutrition support, Hanne's daughter showed remarkable improvement.



Waiting Area at Mashamari Clinic

By December 13, 2024, she had regained the ability to crawl and stand, with or without support. Hanne expressed her immense satisfaction with the programme, highlighting how essential the support had been for her family's recovery.

She began to feel hopeful as she witnessed her daughter's rapid improvement, from being unable to crawl or stand to achieving these milestones.

"I am so happy that my daughter can walk now. This programme is so important to us such that without it, many of us and our children will not be at the state where we are today," she said.

Her joy was so overwhelming that she even called IRC's toll-free line to express her gratitude, reflecting on her daughter's progress.

The success of the programme not only restored her daughter's health but also motivated Hanne to continue her tailoring apprenticeship, which she had started before the flood. She now hopes to use the skills she has learnt to start a business and provide for her family, demonstrating a renewed sense of hope and empowerment for her future.



FURERA AND THE DIGNIFYING POWER OF TIMELY INTERVENTION

Obtaining basic hygiene supplies was a major struggle for Furera in Maiduguri. The shops in her neighborhood, where she would typically purchase these items, were destroyed by the flood in September 2024, forcing her to travel to a distant market to buy what she needed. For a community already reeling from the effects of insurgency, such obstacles made the already difficult task of accessing hygiene essentials even harder.

The project supported Furera with Water, Sanitation, and Hygiene (WASH) and dignity kits which were timely for maintaining her basic hygiene, and promoted her dignity, particularly in settings where she was faced with barriers in accessing sanitary products such as soap, menstrual pads, clean water, and other hygiene essentials.

Furera was overwhelmed with the items she received during the distribution. The kit, packed with essential items like Vaseline, Dettol Soaps, Sanitary Pads, Toothpaste, Toothbrush, Underwear, and Hair Combs, enabled her to maintain good personal hygiene.

“A happy Furera said: "I now have enough materials to cater to my needs for the next three months or more. I am happy with the intervention by Plan International and CHAD International, being the first to remember us during these trying times, by bringing emergency water in trucks and also sharing dignity kits to women and girls.”



Furera, a recipient of dignity kits at MMC, Borno State

The intervention reached many women and adolescent girls in Sabongari, thereby improving their access to basic hygiene kits that dignify their femininity.

Furera now feels relieved from having to worry about buying her basic hygiene kits. Her story is just one example of the many lives changed through the intervention.

DEVASTATED BY FLOODS, REFRESHED BY CLEAN WATER

The September 2024 floods in Maiduguri struck with unparalleled ferocity, leaving behind a trail of destruction. For many, the immediate loss was not just of property, but of livelihoods, homes, and the critical infrastructures that supported daily life.

For Sabongari, Gwange II, Maiduguri, a community already vulnerable, the loss of access to safe drinking water posed an even greater threat, exacerbating health risks, hampering the ability to carry out daily tasks, and delaying recovery efforts.

Before the Dutch Relief Alliance (DRA) joint flood response, Bulama Goni and the residents of Sabongari grappled with severe challenges in accessing clean water. The situation was dire: the flood had destroyed most of the local water infrastructure, and what little remained was either inaccessible or inadequate to meet the community's needs.

In response, community members had to walk long distances to find available water sources, which often involved enduring the gruelling task of waiting in long queues for hours just to fetch enough water for their daily use.

For those who could afford it, there was the option of buying water from wheelbarrow vendors. However, this came at a steep price. The water was sold at an exorbitant cost, which further strained the already limited financial resources of families. This not only made it difficult for people to maintain basic hygiene and health, but also placed additional economic pressure on the community, particularly on the most vulnerable households.



Simple tasks like cooking, washing, and drinking became sources of constant stress, and the lack of clean water exacerbated the risks of waterborne diseases, further threatening the well-being of the people.

The joint flood response team, led by Plan International, stepped in to provide essential services like water trucking, WASH, and dignity kits to the community members.

The team, with CHAD International as an implementing partner, also conducted awareness sessions, educating residents on proper hygiene practices and the importance of storing clean water in narrow-neck containers to prevent contamination. These efforts sought to address the immediate water crisis and promote better health and sanitation in the aftermath of the floods.

Mala Goni, who is the Bulama (community leader) of Sabongari, Gwange II, stood as a beacon of resilience and leadership for his people during the trying period. Bulama Mala's life experienced a turnaround when water trucking services were delivered to his community. The water trucking service brought clean drinking water right to his doorstep, significantly reducing the risk of water-borne diseases.

The intervention not only improved Bulama Mala and members of his community's access to clean water and sanitation, but also empowered him and his community members with knowledge of proper hygiene practices. Bulama Mala proudly said, "The water trucking is life-saving. Since the flooding, no one has brought a single truck of water to us, but CHAD International and Plan International did the unexpected by supplying several water trucks to Sabongari and nearby communities."

He said, before now, "There were only two functional overhead water tanks in the community since the flooding. We had to spend hours in queues just to take turns to fetch water. But the emergency water trucking brought relief to us by providing clean water right to our community."





Habiba, a recipient of Multi Purpose cash by ZOA

REBUILDING BETTER: Habiba Unlocks New Levels of Business Success

Habiba Audu is a 34-year-old mother of four. She is among the 400,000 persons displaced by the devastating floods that swept through Maiduguri, Borno state in 2024.

The flood destroyed her small retail shop, her only source of income. Struggling to provide food, clothing, and education for her children, Habiba faced uncertainty and anxiety about the future, with no savings or financial assistance. Rebuilding her life seemed impossible.

Through the Acute Crisis Joint Response (ACJR) Project, implemented by ZOA in partnership with Life Helpers Initiatives (LHI) and Care Based Initiative (CBI), Habiba found hope to rebuild her life.

She was selected among 2,000 participants for the business capacity strengthening training of the project which sought to empower flood-affected community members with skills and financial tools to rebuild their lives. The training included: Small-Scale Business Management Training (Teaching participants fundamental business principles,

inventory management, and customer relations); Financial Literacy Training (Educating participants on budgeting, saving, and investment strategies), and Life Skills Training (Building resilience, decision-making, and communication skills).

The training sessions were conducted in Habiba's community, ensuring easy access and active participation. Her life changed significantly after participating in the training sessions.

She learned how to effectively manage a business, keep financial records, and attract customers. With her newly acquired skills, Habiba reopened her shop, expanding her inventory to include essential household items. Her strategic business approach attracted more customers, increasing her daily earnings by 50%. She proudly stated:

"The training taught me how to manage my business better and plan for the future. Now, my shop is thriving, and I can provide for my children again."



Habiba also benefited from the Multipurpose Cash Distribution (MPC) scheme managed by ZOA, which provided immediate financial relief. She used the funds to restock her shop and pay for her children's school fees, ensuring their education was not interrupted.

The Life Skills Training helped Habiba regain her confidence and resilience. She now actively participates in community decision-making and supports other women by sharing her business knowledge.

Habiba's success story is a testament to the transformative power of economic empowerment and community support. Her journey from despair to hope has inspired other women in her community to pursue financial independence.



AGNES: A Flood Survivor with an Inspiring Story of Recovery

Thirty-year-old Agnes Emmanuel, along with her only child, woke up to the rude shock of massive flooding on the night of September 11, 2024.

On that fateful night, Agnes was among thousands of other residents in the Fulatari community of Mafa Local Government Area (LGA) of Borno state, Nigeria who were displaced by the aftermath of the collapse of the Alau Dam following torrential rainfall. Some 70 percent of the entire city of Maiduguri was flooded, leaving many residents with no food, potable water, and shelter.

Agnes said managed to escape with other residents and moved to a temporary shelter provided by the state government.

“The flood lasted a few days before receding, and we all remained in the temporary camps, where we all received assistance from Government and Non-Governmental agencies,” she said. “The agencies supported us with prepared food, non-food items, and water sanitation and hygiene for the period of our stay on the temporary campsites.”

The single mother of one, who has now moved back into her house, said she received cash support of N100,000 from ZOA, a member of a six-member consortium of international organisations that supported relief efforts for survivors of the flood.

A total of 6, 235 others households received cash support to help them restart their lives and livelihood.

“

The donation “was a great relief to us as a family at that critical time,” Agnes said. “We used some of the money to purchase foodstuff and also assisted some orphans with N10,000.” She did not stop there as she further supported her “aunt who had health challenges with part of the money.”

”

Interestingly, Agnes was enrolled as a Community Nutrition Mobiliser by the Life Helpers Initiative (LHI), an implementing partner that worked with ZOA in our community during the project implementation.

According to her, the monthly stipends from the enrolment assisted her in reviving the cap knitting business that had stopped due to the impact of flooding.

“I employed the services of ten other persons to do the same work for me on a small sum of money, and that has multiplied income more than before,” she said.

A photograph of a woman and a young child. The woman is wearing a blue headscarf with a patterned band and a blue garment. She has a serious expression. The child is wearing a colorful striped shirt and is looking towards the camera with a slightly open mouth. The background is a plain, light-colored wall.

SURVIVING ADVERSITY: Falmata's Dogged Fight for Her Family

Thirty-three-year-old Falmata was one of the thousands displaced by the 2024 devastating floods in Maiduguri. She struggled to survive amidst scarce resources in Gubio Internally Displaced Persons' camp with a staggering 47, 000 persons.

For Falmata, this was a painful reminder of the displacement she first endured in 2019 due to the Boko Haram insurgency, a crisis that not only took away her home and livelihood but also left her husband partially paralysed from stroke arising from the severe shock of losing everything. With seven children to care for—one of whom has cerebral palsy—Falmata bore the full weight of responsibility for her family's survival.

Her five-year-old daughter, unable to talk, sit, or walk, faced even greater hardship in the aftermath of the floods. Beyond losing a comfortable shelter and access to quality food, Falmata struggled to maintain basic hygiene, unable to afford essential items like soap or detergent. The situation was particularly distressing as her special needs child frequently urinated on her clothes, leaving Falmata feeling helpless and stripped of dignity.

Through the Joint Humanitarian Response for Floods in Maiduguri, Falmata received a dignity kit from Terre Des Hommes containing soaps, detergents, and other hygiene essentials; items that had become a luxury in the camp. More than just hygiene support, she was also referred to the International Rescue Committee (IRC) for medical assistance for her daughter. Until then, she had relied solely on traditional medicine, believing her child's condition to be a spiritual affliction. The referral provided her with a much-needed path to proper healthcare, offering a glimmer of hope in what had felt like an endless tunnel of despair.



“

"I am so happy to have these hygiene items. Now I can wash my clothes, keep myself clean, and care for my family with dignity," she said. "I am also grateful for the referral for my child—I finally have hope that she will receive the care she needs. I will always thank Terre des Hommes for the child potty in the hygiene kit. I got it when I needed it the most, and it has made caring for my child so much easier."

”

Falmata's household was among 5,150 others supported with dignity kits, ensuring that hygiene was not a distant dream even during the crisis.



DIGNITY IN A KIT: How Kursiya Regained Her Esteem

Seventeen-year-old Kursiya Mohammed from Gwange Sabon Layi, Maiduguri, was among the over 400,000 people displaced by the devastating floods in September 2024. Forced into the overcrowded Gubio IDP camp, she and her family struggled to meet even their most basic needs.

Amidst this hardship, Kursiya faced an additional challenge—one that many often overlook. She became part of the 62% of women in Nigeria who, according to a 2024 UNICEF survey, lack the financial means to purchase menstrual materials. With no access to sanitary pads or proper menstrual care, she resorted to using old fabric scraps. However, limited access to clean water made it difficult to maintain the fabrics and her general personal hygiene, leading to recurring infections. Overwhelmed by discomfort and shame, Kursiya began isolating herself from friends and community activities, believing there was no alternative.

This changed with the distribution of dignity kits containing essential menstrual and hygiene products. More than just receiving supplies, Kursiya got access to the special menstrual hygiene management session that the humanitarian response tailored to adolescent girls in Gubio camp.

“I used to feel embarrassed and isolated every month, often missing social activities because I didn’t have the proper kits and knowledge. Now, with the provided reusable sanitary pad and soaps, I feel empowered and confident. It has helped my life,” Kursiya shared.”



Armed with the information and resources she needed, Kursiya has broken free from the cycle of shame that cultural taboos had placed on menstruation. Today, she embraces her period with confidence, proving that access to menstrual health products and education is not just a necessity but a right.



BREAKING FREE: Binta's Exemplary Shift From Harmful Postpartum Myths

Flooding in Ngala and the Maiduguri Metropolitan Councils (MMC) caused a humanitarian crisis, exacerbating vulnerabilities among the most at-risk groups, particularly young children under five years, pregnant and lactating women, and adolescent girls. The crisis disrupted food security, healthcare access, and overall well-being.

A major challenge in these communities is the prevalence of myths and misconceptions surrounding Infant and Young Child Feeding (IYCF) practices. One widely held belief is that colostrum—the nutrient-rich first milk—is harmful to newborns, often leading mothers to discard it. Additionally, a traditional postpartum practice involves exposing new mothers to peppered smoke therapy, which is believed to expedite placenta release and stop postpartum bleeding, despite its potential health risks. These cultural practices, combined with limited access to nutrition education, contribute to high rates of malnutrition and poor maternal and infant health outcomes in the communities.

To address these challenges, the Emergency Flood Response project, implemented by CARE International along with five other international NGOs, launched a series of targeted interventions.

The impact of these interventions was profound among the people in the communities. One of them is Bintu Goniye, a support group member. She shared her transformative experience following the birth of her baby, Falmata. According to their traditional beliefs, she was expected to undergo the peppered-smoke therapy to facilitate placenta release and control postpartum bleeding.

However, having learned about the benefits of early initiation of breastfeeding through the support group, Bintu requested her mother's assistance in placing her newborn on her breast within the first hour of birth.



Binta, an IYCF support group member
by Care International

To the family's amazement, the placenta was naturally released, and the bleeding stopped without the need for the risky traditional practice. The entire household was overjoyed and expressed their commitment to adopting and advocating for proper maternal and infant nutrition practices.

Bintu's story is just one among many demonstrating how the support group meetings had empowered women with crucial knowledge, leading to improved nutritional status for children aged 6 to 59 months, increased awareness of the importance of early initiation of breastfeeding, and enhanced maternal and child health. Encouraged by her experience, Bintu continues to spread awareness, urging other women in her community to participate in the support group programme and embrace safe, evidence-based IYCF practices.

Through these targeted interventions, the Emergency Flood Response project has made a tangible difference in the lives of vulnerable populations in Ngala and MMC, ensuring better health outcomes for mothers and their children, while challenging and transforming deep-rooted cultural misconceptions.

Heavy rainfall caused severe flooding across northern Nigeria, affecting 31 states and over one million individuals in 2024. Borno State, in the northeast, was among the hardest hit, with over 414,000 people severely impacted. Before the flash floods of September 10, 2024, northeast Nigeria was already facing an acute food crisis and ongoing conflict with non-state armed groups.

The floods in Borno State, triggered by heavy rainfall and exacerbated by the breaking of the Alau Dam in Konduga Local Government Area (LGA), caused extensive damage to infrastructure, crops, and shelters, severely impacting livelihoods and displacing households. According to the National Emergency Management Agency (NEMA), fast-moving floodwaters submerged over 70% of Maiduguri city. The UN Office for the Coordination of Humanitarian Affairs (OCHA) estimates that over 400,000 people in Borno State were displaced, with 37 deaths and 58 injuries reported.

Displaced families were forced to relocate to both former and operational Internally Displaced Persons (IDP) camps, which quickly reached full capacity and were unable to provide adequate safe drinking water, food, and basic non-food items (NFI).

Schools are also being used as temporary shelters, further disrupting children's education. To ensure early return to pre-flood state and to stimulate resilience, government authorities began closing former IDP camps and relocating displaced populations from schools back to their communities, where water levels were receding.

Protection and Gender-Based Violence (GBV) risks spiked, particularly for women, adolescents, and children. Reports indicated an increasing number of separated and unaccompanied children in IDP camps. The lack of child-friendly spaces, combined with overcrowding and the destruction of schools, further exacerbated children's vulnerabilities.

The floods struck during the lean season, worsening an already dire food crisis. The floods, occurring just before the harvest season, devastated agricultural lands and central market networks, severely disrupting economic activities and livelihoods. Loss of agricultural land and harvests threatened displaced people and worsened food insecurity. This hindered communities' ability to recover from both the flooding and the ongoing food crisis.

In Borno State, major health facilities, including the University of Maiduguri Teaching Hospital (UMTH) and the State Specialist Hospital, were cut off. Other important community assets affected

were the central market, post office, schools, and worship centres. This affected the socio-cultural life of the people and caused untold hardship associated with the non-accessibility to these assets during the period. Due to damaged shelters, many displaced individuals were sleeping outside, increasing their exposure to mosquitoes causing malaria and stagnant water leading to hygiene-related infections, heightening the risk of epidemic in the community. Children were particularly vulnerable to respiratory tract infections caused by microorganisms and severe environmental conditions they were exposed to. Overcrowded IDP camps, along with the destruction of WASH infrastructure, further restricted access to sanitation, latrines, and safe drinking water which can also increase the spread of waterborne diseases.

OCHA's Rapid Needs Assessment, along with evaluations conducted by joint response partners, has identified several urgent priorities, including Health, WASH, food security and livelihoods (FSL), shelter/NFI, protection, and nutrition.

Under these circumstances, international actors, in partnership with national organisations, secured the DRA funding to respond to the emergency. The six-month project commenced on September 22, 2024, and ran until March 22, 2025, aiming to assist 147,600 flood-affected individuals.

KHADIJA & ALI: A Shared Journey of Recovery

Khadija had always navigated life's challenges with resilience, despite her physical disability. Then the flood came in 2024 in Gozari community, Maiduguri, Borno state, overturning everything. While others fled, she struggled—her limited mobility turning an already terrifying escape into a desperate fight for safety. When the waters finally receded, she was left with few belongings and an uncertain future.

Muhammad Ali, another resident who worked hard to support his family, was also impacted by the floods. He ran a small provision shop that kept them afloat until the flood swept everything away—his shop, his home, his stability. With no savings to fall back on, he faced the immense challenge of rebuilding from scratch.

Hope arrived through Oxfam's cash assistance of N100,000. Khadija and Ali received crucial support that allowed them to buy food, clothing, and regain a sense of control over their recovery. **"When I received the cash, I felt relief. Finally, I could buy what my family needed the most," Khadija shared.**

While this assistance eased her immediate struggles, long-term challenges remained. She dreams of independence—of starting a small business and building a future where she is self-sufficient.

The financial support was a lifeline for Ali too, enabling him to buy food for his family when they needed it most. **"At one point, we had nothing to eat. This support came at the right time,"** he said.

The assistance helped him through the worst of the crisis, but his path to recovery is ongoing. Without his shop, he lacks a steady income, making it difficult to secure his children's education and future. He remains hopeful that with additional support, he can rebuild his livelihood and restore stability for his family. His story underscores the importance of not just immediate relief, but long-term investment in sustainable recovery.





"I CAN START AGAIN": Fatima's Unyielding Resolve

Fatima Adamu relied on her small tailoring business to provide for her family. Though financial struggles were constant, she managed to afford food and other necessities in her community of residence, Konduga, Borno state. Life was stable—until the flood of 2024 changed everything.

The waters took her home, belongings, and the tools she needed for her work. With no savings left, every day became a challenge. Then, help arrived through the flood response project. In partnership with CATAI, Oxfam provided essential relief items, including blankets, a mat, a kit bag, kitchen utensils, and a solar lamp to Fatima. These basic necessities brought comfort, warmth, and the ability to cook hot meals again—small yet significant steps toward rebuilding her life.

Yet, one key piece remained missing—her business. Without financial support to replace her sewing machine and materials, restarting her livelihood remains difficult.

Falmata, a recipient of NFI by Oxfam

“My sewing machine was my source of income, and without it, I feel stuck,” she explained. But Fatima refuses to give up. “I know if I get the right support, I can start again, provide for my family, and regain what I lost.”

Her determination reflects the resilience of many affected by the floods. With the right support, she and others like her can rebuild, not just surviving the disaster, but reclaiming their futures with strength and hope.

PHOTO SPEAKS



Distribution of NFI



Rehabilitation of Borehole at Shuwari



Rehabilitation of Borehole by IRC



Joint Activities

LEARNINGS

01

ENHANCED COLLABORATION AND QUALITY IMPLEMENTATION

Our collaborative approach with partners significantly improved the quality of project implementation. Organisations were strategically assigned thematic response sectors based on their technical expertise, experience, and strengths. This ensured optimal programme quality and the application of best practices tailored to the local context.

02

INNOVATIVE AND HOLISTIC PROGRAMMING

The project adopted an innovative, holistic approach to provide a safe, inclusive, and effective response to the flood emergency. It integrated key interventions, including protection services, WASH facilities, hygiene promotion, food security and livelihoods, nutrition, Multipurpose Cash Assistance (MPC), and shelter/non-food items (NFI), ensuring a comprehensive response to the needs of affected communities.

03

HYGIENE PROMOTION CAMPAIGN

A Hygiene Promotion campaign was introduced in Gubio camp, which proved to be an effective approach to communicating hygiene education to children. By incorporating quizzes and small prizes, the campaign engaged children in a fun and interactive way, reinforcing key hygiene messages. It did not only increase participation, but also enhanced retention and application of good hygiene practices. A positive behavioural change was recorded overall. This highlights the value of interactive learning in promoting behaviour change, making this approach a promising method for future hygiene promotion.

04

ENGAGEMENT OF NATIONAL PARTNERS

The involvement of national partners with deep contextual knowledge and strong community engagement significantly enhanced the acceptance and effectiveness of the flood response. Their familiarity with the affected communities facilitated smoother implementation, while ensuring active community participation throughout the project.



05

PARTNERSHIP

Additionally, partnering with established local organisations improved service delivery, increased community trust, and strengthened long-term capacity for infrastructure maintenance and sustainability.

06

ESTABLISHMENT OF COMMUNITY-BASED MONITORING SYSTEMS

The establishment of community-based monitoring systems not only tracked project progress but also provided valuable insights into emerging challenges and successes, allowing for timely adjustments and improved programme effectiveness

07

PEER-TO-PEER LEARNING AND COORDINATION

Regular peer-to-peer review meetings with partners served as a platform for coordination, experience sharing, and the adoption of best practices for project implementation. Feedback and findings gathered from these meetings were instrumental in improving the quality of project implementation, and ensuring adaptive learning throughout the response.

08

EMPOWERING CAREGIVERS AND COMMUNITY MEMBERS

The Family MUAC (Mid-Upper Arm Circumference) approach empowered caregivers and community members by equipping them with the skills to measure and monitor child nutrition. This approach led to earlier identification and referral of malnourished children for treatment, thus improving child health outcomes.

09

SIMPLIFIED NUTRITION APPROACHES

The use of a simplified Severe Acute Malnutrition (SAM) approach, which provided double nutrition rations, proved valuable during periods of uncertainty and delays in commodity delivery. This ensured that children continued to receive necessary nutritional support even during disruptions.



SUSTAINABILITY

The project adopted a community-led approach, ensuring ownership through technical support from the Borno State Government, particularly the Ministry of Water Resources, in the response design and implementation. Additionally, access to project locations was facilitated through collaboration with the Borno State Agency for Coordination of Sustainable Development and Humanitarian Response (BACSDAHR), reinforcing long-term local ownership and resilience-building efforts, and seamless implementation of the project.

Sustainability path

The project took a long-term, strategic approach to sustainability by fostering partnerships with the Borno State Government and local organisations. These collaborations sought to build local capacity and ensure the continuity of the project's benefits well beyond its implementation period. By working closely with government stakeholders and local organizations, the project strengthened the skills of Primary Health Care (PHC) staff, equipping them with the necessary tools to respond to emergencies and better serve the community.

A key element of sustainability was integrating response services into existing local structures and aligning them with local priorities. This approach ensured that the project's interventions remained relevant and well accepted by the community. Through these efforts, the project enhanced local ownership, fostered trust among stakeholders, and built a strong foundation for the scaling and continuation of services after the project's conclusion.

Local community structures, including the mother-to-mother and father-to-father support groups, artisans as well as community volunteers (CVs) and incentive workers, were strengthened to take on critical roles in maintaining the project's outcomes.

2

Training of Artisans:

Artisans were equipped with tools to rehabilitate boreholes, ensuring ongoing maintenance after the project.

1

Collaborating with Government Agencies:

The project partnered with entities such as the Rural Water Supply and Sanitation Agency (RUWASSA) and the Ministry of Water Resources (MoWR) to enhance community capacity through training programmes designed to manage and maintain water and sanitation facilities.

3

Solar Charging Point:

One of the significant components of the sustainability path of the project was the installation of a solar charging point in the Fulatari community. This solar charging station was designed to meet the energy needs of the community in a way that is both environmentally sustainable and economically viable. As part of the meeting, the group leaders were tasked with electing and delegating 20 committee members who would be responsible for overseeing the solar charging point. This committee will ensure that the equipment is well-maintained, and that the benefits of the solar power are distributed fairly among the community members.

4

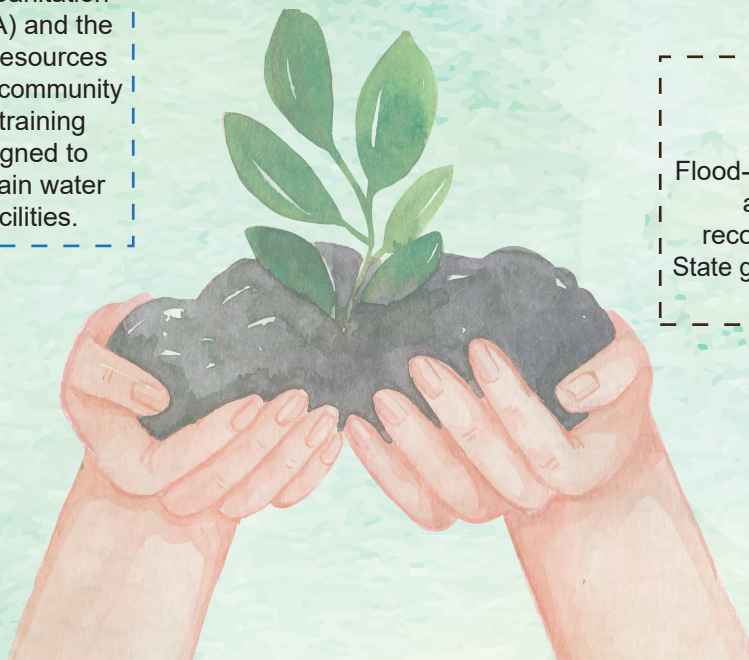
Community-driven Decision-making:

Active community engagement led to the addition of new water collection points and the upgrade of borehole systems to solar-powered solutions, reflecting the community's needs and preferences, to offer a long-lasting sanitation solution.

5

Constructing Resilient Household Latrines:

Flood-resistant latrines were designed and constructed, based on recommendations from the Borno State government, to offer a long-lasting sanitation solution.



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