



2024 ANNUAL REPORT



Strengthening Local Leadership and Impact

MESSAGE FROM THE COUNTRY DIRECTOR

Strengthening Local Leadership and Impact



It is my pleasure to present CARE Nigeria's 2024 Annual Report.

Over the past year, CARE Nigeria has deepened its footprint and impact through strategic partnerships and meaningful engagement in national development and humanitarian response. Our programs reached nearly 483,883 people across nine states, reflecting our commitment to addressing the challenges of vulnerable communities. In pursuit of our mission, we collaborated with a wide range of stakeholders—government at all levels, development partners, civil society organizations, the private sector, academia, and research institutions. Central to all our work is our steadfast commitment to locally led development, empowering local partners to take ownership and lead efforts toward our shared goals.

Following months of dialogue and consultation with key stakeholders—both internal and external—we proudly launched our six-year strategy (2024–2030), titled **“Leading Locally and Connecting Globally.”** Grounded in CARE’s global vision and adapted to the Nigerian context, the strategy is built around

four core pillars:

- Humanitarian Preparedness and Response
- Food Security and Livelihoods
- Gender Justice
- Right to Health and Nutrition

These are underpinned by three cross-cutting themes: Women and Girls, Governance, and Climate Justice. The strategy outlines our programmatic and geographic priorities, along with our financial ambition, with a focus on the Triple Nexus approach—integrating humanitarian, development, and peacebuilding interventions.

In 2024, CARE Nigeria embraced a renewed role as a convenor. A key highlight was the National Savings Groups Conference held in April, which brought together over 500 participants from Nigeria and the wider sub-region. The conference fostered policy discussions around credit access for vulnerable groups—particularly women—and produced actionable recommendations for improving financial inclusion. CARE Nigeria also actively supported the discourse on the “repeal and reenact” the Violence Against Persons Prohibition (VAPP) Act, raising public awareness and facilitating engagement by women-led organizations and key influencers, including the Governors’ Wives Forum, to ensure women’s voices shaped the legislative process.

Our humanitarian response remained robust in 2024. When catastrophic floods struck parts of Borno State in September, CARE Nigeria responded swiftly, reaching 81,502 people with gender responsive life-saving assistance, including food, health, psychosocial and protection.

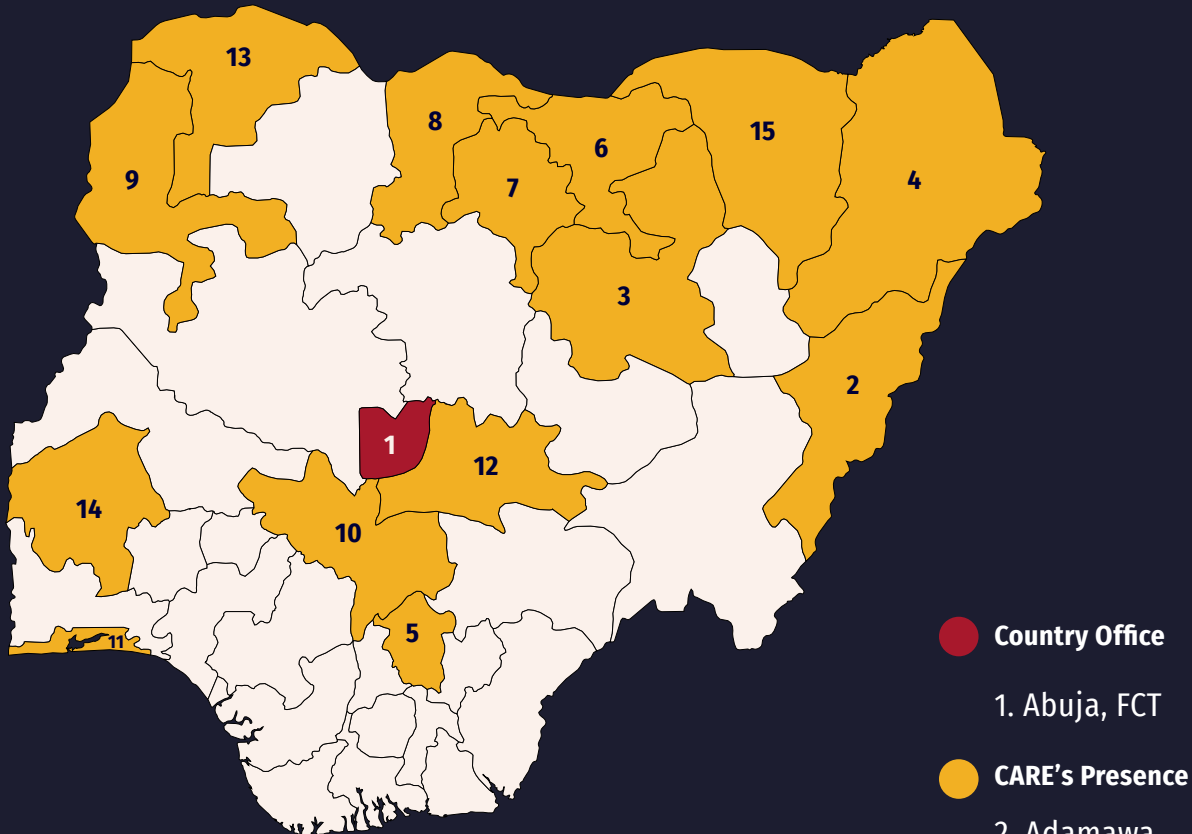
To broaden our impact, we expanded operations to the Northwest region, demonstrating our commitment to underserved areas. We also strengthened our Health and Nutrition programming with the recruitment of a sector lead—underscoring our dedication to delivering high-quality, context-appropriate health interventions that meet the complex needs of the most vulnerable.

Looking ahead, CARE Nigeria will continue to diversify and grow our funding portfolio, expand our presence, and deepen our impact across the country. We remain committed to building and strengthening partnerships—old and new—as we work collectively toward a just, inclusive, and resilient Nigeria.

A handwritten signature in orange ink that reads "Hussaini Abdu".

Hussaini Abdu, PhD
Country Director

Geographic Operational Areas in Nigeria



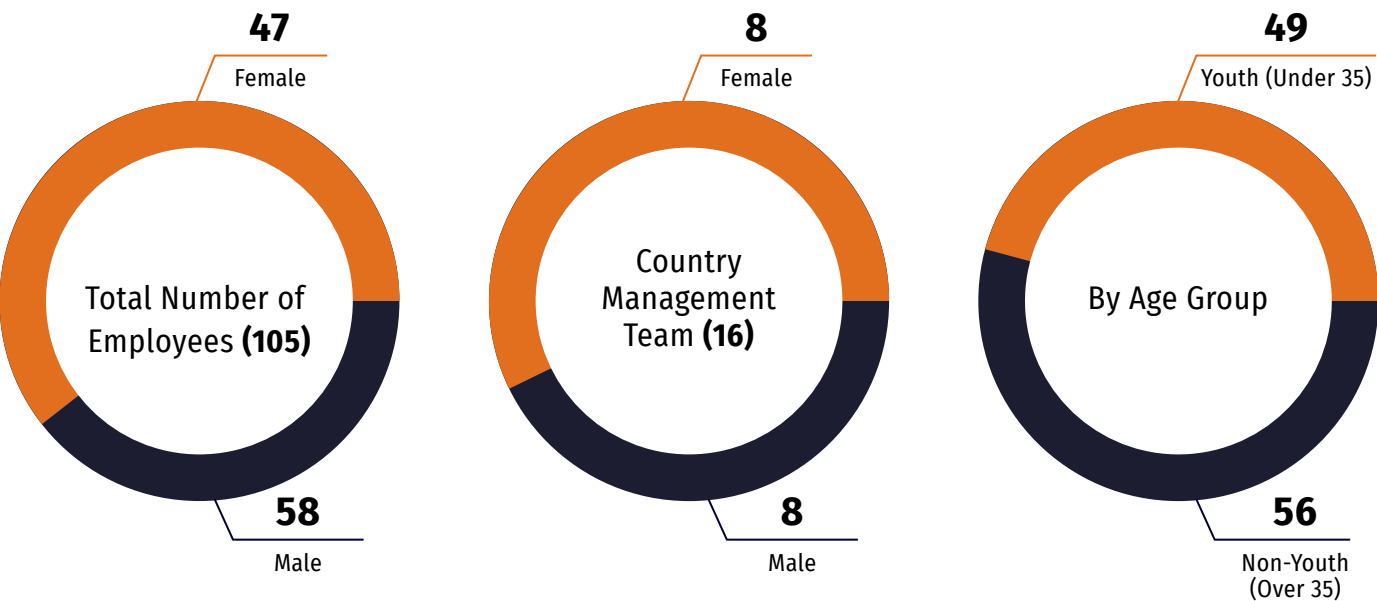
Working Locally and Connecting Globally at CARE Nigeria

In line with CARE's localization agenda, CARE is working with local women led organizations to build their capacities.

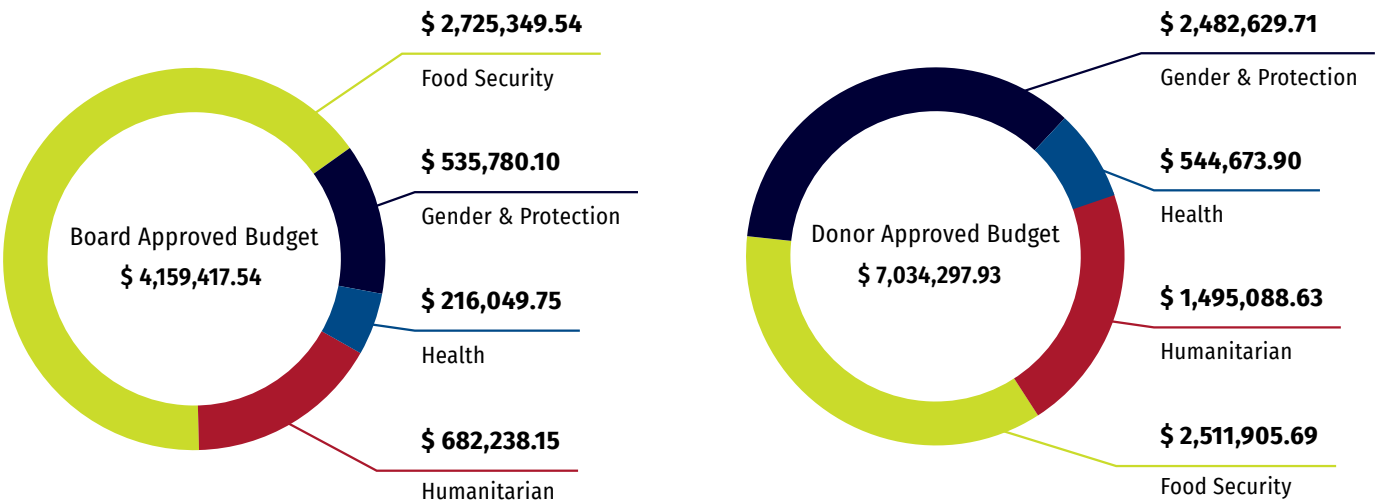
CARE Nigeria is also piloting the Community of CARE and launched the CARE Nigeria Advisory Committee, a pool of national experts and supporters with the key mandate to advise CARE Nigeria and its partners on matters that will strengthen and enhance the quality, scale and impact of our development and humanitarian programs in service to communities and families that are disproportionately impacted by extreme poverty and social injustice.

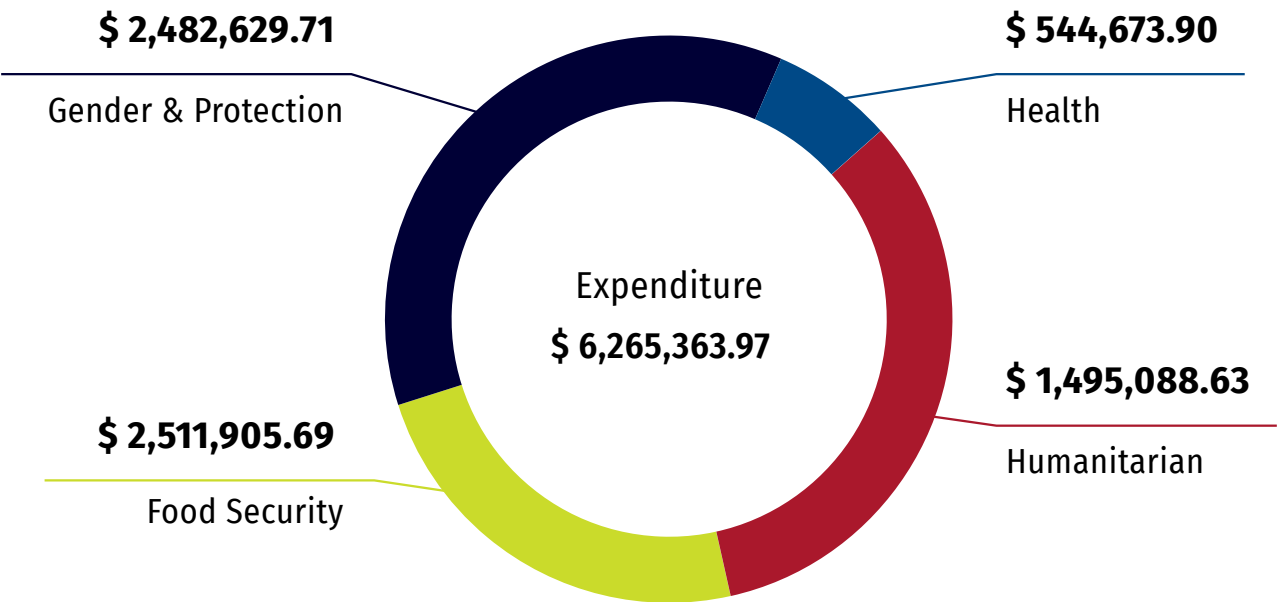
Members shall contribute and share an expert knowledge and understanding of the Nigerian development and humanitarian sectors, policy environment, and funding landscape.

Human Resource



Country Office Financial Statement





Total Reach by Sector/Thematic Area

483,883

TOTAL REACH
WITHOUT DOUBLE
COUNTING



Humanitarian Preparednes
and Response

369,492



Gender Justice (Protection &
Gender Based Violence)

390,327



Food Nutrition and Livelihoods
(including WASH reach of 19,388)

407,159



Health and Nutrition

58,712



Sectoral Updates





HUMANITARIAN PREPAREDNESS AND RESPONSE

In 2024, CARE Nigeria's humanitarian preparedness and response reached 369,492 individuals (Female 226,944, Male 142,548) with lifesaving integrated humanitarian assistance. CARE responded to the needs of communities impacted by flooding, conflict, and disease in the states of Adamawa, Yobe, Jigawa, Borno, and Bauchi through a multisectoral approach. Following the September 9th, 2024, flooding resulting from the collapse of the Alau dam, CARE quickly mobilized funding and reached 81,502 individuals in temporary camps and flood-affected communities with food security and nutrition, prevention and response to violence against women and girls, protection, and WASH interventions. A key achievement for the sector was improving the capacity of state actors to provide safe, timely, and quality humanitarian assistance in a fragile context.



DONORS:

- Bill and Melinda Gates Foundation
- Dutch Relief Alliance
- CARE USA
- Central Emergency Response (CERF) Bureau of Humanitarian Assistance



GENDER JUSTICE AND PROTECTION

Our gender and protection projects directly reached **390,327** (163,938 women, 82,697 girls, 99,472 men, and 44,220 boys).

CARE Nigeria worked with, and strengthened Women Rights Organizations (WROs) and Women-Led Organizations (WLOs), to enhance their abilities to implement interventions that create access to protection services in hard-to-reach areas; ensure safe and confidential referrals and spaces for GBV survivors; strengthen local response systems through capacity building of volunteers; provide livelihood support to vulnerable women and girls and improved systems for accountability and protection.

IMPLEMENTATION APPROACHES

- Localization-Working with WROs/WLOs
- Women and Girls Safe Spaces (WGSS)
- Social Analysis and Action (SAA)
- Women Lead in Emergencies (WLIE)
- Rapid Gender Analysis
- Advocacy
- Village Savings Loans Association (VSLA)

91%

of Women's rights groups say with support from CARE, coordination of advocacy for improved GBV prevention and response has improved.

43%

Increase in access to healthcare for young mothers.

87%

Women & girls increase in confidence regarding reproductive health and leadership skills.

97%

Participants are highly satisfied with quality of cash voucher programming.

DONORS:

- The Foreign Commonwealth and Development Office
- Netherlands Ministry of Foreign Affairs
- The World Food Program (WFP)
- Bill & Melinda Gates Foundation
- Private donors
- US Department of State

Women and Girls Safe Spaces (WGSS)

In 2024, 22,945 women and adolescent girls accessed CARE-run CARE women and girls' safe. During the reporting period, 7 WGSS were established in Yobe state, 2 in Adamawa state, and another 7 in Borno state. The WGSS provided an entry point for women and girls to access lifesaving GBV information and specialized services, such as GBV case management services, psychosocial support services, and livelihood training.

Challenging Harmful Social Norms: Social Analysis and Action (SAA)

The [Social Analysis and Action \(SAA\)](#) approach was used in all our key projects to identify harmful social and gender norms that limit opportunities for women and girls and lead to plans to address these. In 2024, **60** CARE staff and partners and **84** community-based facilitators were trained on the SAA approach to stimulate staff and facilitators' reflection on their own biases and beliefs that could influence their work and enhance their comfort with talking about sensitive issues. A total of **12,589** community members participated in community SAA dialogues facilitated by trained staff, leading to a 15% reduction in harmful gender norms and increased male involvement in caregiving and household decision-making. The assessment also indicated that engaging Men and Boys led to 87% of men and boys acknowledging that restrictive masculinity reinforced GBV.

Amplifying Women's Voices through Women Lead in Emergencies Approach (WLIE)

The WLIE approach has made significant strides in transforming the community by empowering women and young girls to address critical issues and foster collaboration. Together with our partners, CARE formed 20 WLIE groups in the Potiskum and Jere LGAs in NE Nigeria. The WLIE groups led several activities as part of the humanitarian response and engaged with key stakeholders, including security service providers, religious leaders, and local government representatives to address issues of violence against women. Activities included, raising awareness, promoting leadership for girls in schools, and encouraging women's participation in decision-making platforms in the communities.

WLIE groups partnered with other actors to provide essential services, including with the World Food Programme (WFP), by leading in identifying safe and accessible food distribution points in Yobe state for the flood-affected communities. They also worked with child protection organizations in Potiskum and Jere LGAs, to create safer environments for children and adolescent girls, including, reducing child hawking, advocating for and promoting girls' education and leadership opportunities, putting a stop to several child marriages.

With the support of Queen Amina (the wife of the Emir of Fika), and Emirate councils WLIE groups developed and presented their advocacy action plans to stakeholders in their local government areas and states, fostering partnerships with government agencies, NGOs, and CSOs to address GBV and SRHR issues and women's participation in decision-making.

Read more about WLIE successes in:

- <https://independent.ng/yobe-wlie-holds-conference-to-advance-course-of-women-in-emergency/>
- <https://dailytrust.com/women-group-adopts-local-approach-to-combat-gbv-in-yobe/>
- https://youtu.be/Hv3_kYQFwTQ?si=lix_5K_RSsg-5VW
- [Success Stories Harvesting — WLIE](#)



Gender and Protection Risk Assessment

Following the September 2024 flooding, CARE conducted a Gender & Protection risk analysis to understand the impact of the crisis in Borno state. Findings indicated that because men and boys make most household decisions with little female participation in community decision-making, the unique needs of women during the response were not being considered. Women were also found to be at increased risk as initial housing provided at camp sites did not have separate sleeping and bathroom facilities for men and women.

Gender, Equity, Diversity, and Inclusion

To cultivate a healthy and respectful workplace where staff are accountable to and respect differences, CARE Nigeria conducted an organizational Gender Audit which confirmed the Country Office's commitment to Gender Equality and inclusion. Training was also undertaken for staff on Reflections on Equity, Diversity and Inclusion (REDI) for staff. The training and reflective sessions provided an opportunity for staff across the field offices to build a space that creates accountable actions towards each other.

Rapid Gender Analysis (RGA) and Gender Marker

Results from the Rapid Gender Analysis (RGA) conducted in the newly launched [RESILAC Nigeria Gender Analysis Report](#) have informed programing for women and girls in implementing sites. CARE continues to assess the level and commitment to Gender and Governance in the CO by applying the Gender and Governance markers in newly designed and ongoing programs.

Women's Economic Empowerment

CARE Nigeria trained 2,240 women and girls in skill-building programs of their choice, such as local spaghetti preparation, leading to sustainable income generation. The trained women and girls earned NGN 75,000 (\$50) on average per month. The women and girls started their micro businesses of approximately NGN 150,000 (\$100) per individual for investment capital. Additionally, the Village Savings and Loan Associations (VSLA) groups contributed ₦3,810,700 (\$880) on average per group in savings, enabling women to access loans for business expansion. 15 VSLA groups were successfully registered as cooperatives, unlocking access to government grants and financial institutions.



Systems Strengthening for GBV

i. Police Gender Reporting Desks (GRD)

CARE established the proven framework, Police Gender Reporting Help Desk to ensure confidential reporting, timely response, and referral for GBV services such as counseling, justice, and medical interventions. A total of 121 GBV cases were appropriately addressed through the GRD, resulting in 12 legal convictions across the BAY states. Additionally, 3,955 people received information on legal rights and justice systems, and survivor legal aid.

ii. Strengthening health response through Mobile Health Units and health workers' capacity building

To ensure increased capacity of health facilities and provision of dignified health services, 220 health workers were trained in emergency obstetric care, GBV response, and clinical care for sexual assault survivors. In addition, 12 mobile health response units were set up and deployed, reaching 27,193 people with uninterrupted access to life-saving sexual reproductive health (SRH) services. During the September floods, the mobile health teams delivered urgent health and protection needs for communities affected by floods.

iii. Adolescent Mothers at All Cost (AMAL)

The AMAL Initiative was implemented in crisis affected communities to support adolescent mothers in conflict-affected areas by providing sexual and reproductive health (SRH) education, life skills training, and peer interaction through Young Mothers' Clubs (YMC). These sessions empower young mothers to make informed health and life decisions, increasing their confidence in accessing healthcare, advocating for their rights, and enhancing family communication. Participants reported improved self-esteem and better utilization of SRH services. By engaging community leaders and healthcare providers, the initiative has reduced stigma, fostered a supportive environment and promoted community-wide awareness and change around adolescent reproductive health.

iv. Engaging men and boys as allies for Gender Equality

Engaging men and boys in dialogues to reflect on equal opportunities and violence against women and girls (VAWG) helped challenge traditional masculinity, and encouraged men to adopt accountable, non-violent behaviours within their relationships and communities. A recent assessment showed that the EMB approach has made 40% of male participants adopt more equitable attitudes towards women. 15% of community members who once tolerated GBV say they no longer do.

Advocacy - Supporting the Implementation of Policies and Laws

To mark the International Day of the Girl Child, CARE and its partners convened a public awareness forum at the national level to present and discuss an analysis of the bill to repeal and reenact the VAPP Law. CARE also supported WLOs and the forum of Governors' wives to convene stakeholders and further disseminate and promote discussions. In Yobe state, 30 judges and magistrates, 50 traditional leaders, and 30 civil society organizations were trained to ensure efficiency and sustained advocacy towards the implementation of the VAPP and Child Protection laws in the state.

Additional learning from community-led advocacy actions can be found in the learning briefs: [LB Adolescent Girl Voice and leadership](#) and [LB Adolescent Girl Voice and leadership](#).





Gender Social Norms Research

In 2024, CARE conducted research on gender social norms to understand their impact on the health and livelihood of adolescent girls and young women in three states (Lagos, Enugu, and Kano) in Nigeria. Findings indicate strong norms and sanctions relating to women's childbearing roles and perceptions of promiscuity, which restrict women and girls from discussing sexual reproductive health with their partners. Although Intimate Partner Violence (IPV) is being rejected widely, it remained a common occurrence in areas where norms that define female submission, sexual discipline, dressing, and childbirth create scenarios where IPV can be tolerated. Norms impeding girls' education have shifted significantly. However, community acceptance of this is still low as norms that place less value on girls' education in comparison to marriage still hold strong in some areas. The recent economic crunch is contributing to positive norms.

[Find the full report here.](#)



FOOD SECURITY AND LIVELIHOODS (FSL)

In 2024, **CARE's** Food and Nutrition Security and Livelihoods programming **reached 407,159 individuals (Female 244,296 Male 162,863)** across nine projects in 8 states. The sector focused on addressing immediate issues of hunger, malnutrition, and poverty, as well as building resilience.

DONOR:

- Netherlands Ministry of Foreign Affairs
- Arthur Blank Foundation
- The World Food Program (WFP)
- Private donors
- ICRAF
- European Union
- Bureau of Humanitarian Assistance
- PULA
- Guinness

Cash Voucher Assistance (CVA)

During the reporting year, our CVA interventions benefited 38,000 households (approximately 190,303 individuals) in Damaturu and Potiskum LGAs in Yobe State and Ngala LGA in Borno State, allowing them to access essential nutritious food supplies. Once registered, participants receive cards that allow them to purchase food at designated retail outlets within their communities or IDP camps, offering them the flexibility to choose the items that best meet their individual dietary needs and preferences. This approach not only supports local businesses but also encourages community engagement, allowing families to select the essential food items they require for their well-being.

Food and Nutrition Policy Advocacy

The project supported the Kebbi State to review and approve the Nutrition Policy. In collaboration with key government ministries, departments, and agencies (MDAs), along with development partners, the Civil Society/Scaling Up Nutrition in Nigeria (CS-SUNN), and academic representatives, the state was supported to develop its first comprehensive Multisectoral Plan of Action for Food and Nutrition.

Strengthening of State Councils on Nutrition

To ensure sustainability, strengthened nutrition governance and enhanced coordination in the implementation of food and nutrition policy. CARE and GAIN led efforts for the inauguration and operationalization of the Bauchi State Council on Nutrition, which is the highest decision body on nutrition governance in the state. Subsequently, CARE and GAIN will support Kebbi, Jigawa, and Nasarawa States to inaugurate State Councils to drive coordination of the policy-mandated nutrition committees (state and local government). This will also aid in obtaining data to be used in decision-making in budgetary allocation for nutrition decisions.

Farmer Field and Business School Approach

In 2024, CARE scaled up the FFBS Approach across four states (Bauchi, Jigawa, Kebbi, and Nasarawa) to include FFBS producer groups engaged in Orange-flesh sweet potato (OFSP), Vegetable, Soya bean, and Poultry Value Chains (comprising 3,543 Households for OFSP and 2,675 households for Vegetables). In addition, 166 lead farmers were trained in production technology for Vegetable and OFSP which have stepped down to 666 participants.

Improved Agricultural Practices and Livelihood Approaches

- Farmer Field and Business Schools
- Market Based System Development
- Cash Based Transfers/ Voucher Assistance
- Policy Advocacy
- Climate Smart Agriculture
- Village Savings and Loans Associations (VSLAs) / Financial Inclusion
- Private Sector Partnership
- Homestead gardens

CARE AND GAIN HAVE SIGNED MOUs WITH AGRICULTURE DEVELOPMENT PROGRAMS IN FOUR STATES AND WITH FOUR COLLABORATING UNIVERSITIES TO SCALE UP THE FFBS APPROACH IN IMPLEMENTATION AND CURRICULUM.

Village Savings and Loans Associations (VSLAs)

Village Savings and Loans Associations (VSLAs) are community-based, self-managed savings groups designed to provide members, primarily women, with a secure and accessible method for saving and borrowing money. A total of 108 VSLAs were established across 2 projects.

In 2022, the Savings Group Implementers Platform was instituted to build a coordination framework among implementers of Savings Group (SG) and Village Savings and Loan Association (VSLA) across Nigeria. In collaboration with the platform which comprises 18 organizations, including government ministries, departments, and agencies (MDAs), multilateral institutions, and peer development organizations, CARE organized the National Savings Group Conference to advocate for favorable conditions and an enabling environment for poor and vulnerable women to access credit. With over 500 participants, the conference culminated in a call to action, including:

- Advocating for an apex institution to coordinate and regulate Savings Groups in Nigeria
- Broader research on the impacts and loopholes surrounding Savings Groups in Nigeria
- Work with Subnational level to institutionalize savings groups at the state level.

Financial Service Limitation Assessment

An assessment conducted by CARE showed:

- Unwillingness of financial institutions to go to the last mile or engage poorer communities.
- Low financial literacy among poor rural women, that alienate them from accessing formal financial services.
- Lack of reliable market and financial information, making rural women susceptible to fraud.
- Non-bank financial services like mobile money remain underutilized in rural regions because of poor agent networks.
- Weak governance and poor coordination among VSLAs limit their bargaining power and financial access, with only 49% registered.
- Cultural and religious norms constrain women's financial autonomy.
- Formal regulations, such as strict 'Know Your Customer (KYC)' rules and complex documentation pose significant barriers for low-income rural women.

Private Sector Partnership

CASCADE engaged Contec Global Agro Limited in facilitating access to bio-based solutions for women smallholder farmers to address the impact of climate change and shift farmer attention from the use of chemical inputs. It trained 223 participants on the use of biobased solutions. To support vegetable production, CASCADE contracted the East West Seed to provide training across the 4 States, with 820 participants trained in good agronomic practices for vegetable production.

To address malnutrition using OFSP, CASCADE worked with the Esomchi Foundation to support smallholder farmers with skills in production technology. 166 Lead Farmers were trained, vine multipliers were trained, 621 Bakeries/processors were trained on use of OFSP puree etc. The Esomchi Foundation engaged 34 Extension Workers to provide technical backstopping for women smallholder farmers and support access to extension information and services.

For poultry value chains, CASCADE engaged Amo Farms Sieberer Hatchery Limited to facilitate access to Noiler Poultry chickens. CASCADE is strengthening women's engagement in the Noiler Value chain because of its adaptive features to climatic conditions and ability to free range and feed on household junk. CASCADE trained 89 Mother Units across 4 States on integrated poultry management practices in preparation for brooding of Day-Old Old chicks to pullets for small holder farmers to off take for consumption and egg productions.



RIGHT TO HEALTH AND NUTRITION SECTOR

To promote positive nutritional outcomes, CARE Nigeria worked with national and international organizations and partners to implement integrated nutrition interventions across seven states (Borno, Adamawa, Yobe, Jigawa, Bauchi, Nasarawa, and Kebbi).

To strengthen systems for improved health and nutrition, community health volunteers and lead Nutrition mothers were trained to conduct basic community-based nutrition assessments, using mid-upper arm circumference (MUAC) tapes, for early detection and subsequent referrals of malnutrition. Health facilities were also provided with equipment weighing scales, height boards and MUAC tapes, for Growth, Monitoring and Promotion, (GMP). Iron and folic acid (IFA), deworming, and malaria drugs were also distributed to the facilities for pregnant and lactating women and children under 5 to prevent and treat anemia.

Households also received cash vouchers specifically designed to enable them to purchase nutrient-rich food items and counselling and nutrition education to support social behaviour change. Participants were also supported to establish home gardens to ensure accessibility and availability of nutrient-dense vegetables. Further, frequent cooking demonstrations that utilize locally available and easily accessible vegetables increase the knowledge of households to prepare nutrient-dense foods. We have also promoted WASH to ensure safe food storage and consumption.

CASCADE Biological Solutions to Agricultural Production

Through the CASCADE project, CARE partnered with Contec Global Agro Limited (CGAL), an organization, recognized for establishing Nigeria's first Scientific and Industrial Laboratories Technology certified lab, which has received ISO 9001 PCMB Certification. This laboratory is dedicated to agro-research and focuses on screening unique native microorganisms that benefit agriculture. The partnership has trained 172 individuals, including government extension workers, women in agriculture, input suppliers, and lead farmers, on bio-based solutions. In addition, 450 smallholder farmers were supported to access innovative products through collaborations with academic institutions, such as Abubakar Tafawa Balewa University, Federal University Dutse, Nasarawa State University, and Kebbi State University of Science and Technology. These innovative approaches have contributed to increased yields, healthier diets, and strengthened cohesion among smallholder farmers.

LDS anaemia project household 360-degree impact Approach

The Household 360-degree impact approach is a combined strategy that comprehensively tackles iron deficiency anaemia through a combination of health, agriculture and other interventions. This includes health prevention and treatment interventions, including screening, treatment, supplements, food-based activities, such as home gardening and cooking demonstration. By empowering caregivers with knowledge and skills, this approach has led to significant improvements in household health, including increased iron-rich food consumption, improved cooking practices, and enhanced maternal, infant, and young child nutrition.

BHA Project - Prepaid Card Initiative for Enhanced Financial Inclusion

CARE developed and utilized the prepaid card solution to enhance cash transfer processes. In highly insecure and volatile regions where we work, this initiative aims to improve efficiency and security while promoting financial inclusion for vulnerable communities. The scalable nature of these cards allows adoption across all CARE projects involving cash assistance. The prepaid card initiative not only streamlines cash transfers but also sets a standard for financial inclusion, providing beneficiaries with the autonomy and security to improve their livelihoods. Expected future benefits include:

- **Improved Cash Delivery:** Faster and more accountable cash transfers.
- **Broader Adoption:** A model for CARE and other humanitarian organizations to modernize cash assistance.
- **Enhanced Financial Literacy:** Increased use of digital financial tools may foster long-term economic stability among beneficiaries.





Impact Stories



BHA Nutrition Project Participant

Malama Fatima Ahmed

Malama Fatima Ahmed, is a mother of four children, one of whom is under the age of five. She resides in Babangida Community with her family as a full-time housewife with no personal income, and her husband's income is not sufficient to cater for the family's basic needs. This led to the family's inability to access proper nutrition, which caused their youngest child to be moderately malnourished. CARE International, with funding from BHA, supported Fatima's household by providing her with nutrition education, which enlightened her on the importance of consuming nutritious foods and trained her on how to prepare tom brown, a highly nutritious porridge made of nutrient-dense grains. The knowledge and skills she gained from the training ensured her household had access to nutritious meals and a balanced diet, which cured her child of malnutrition.

This is what she had to say about the project.

"Thanks to the training I received from Care International, I am now confident in my ability to prepare nutritious meals for my family, including the delicious tom brown. I have also gained knowledge of personal and environmental hygiene, which has helped me ensure the health and well-being of my family. I am grateful to CARE for providing us with the necessary knowledge to embrace a healthier lifestyle. Since adopting this child-feeding method, we have seen significant improvements in the physical growth of our children, and there has been a remarkable reduction in the number of children being admitted to health centers in our community. However, I am proud to have taken this step towards a healthier life, and I urge other mothers to do the same. Thank you, Care International, for empowering me to become a more confident caregiver for my family."



Food, Hope, Vigor, Smiles

Lare Jugudum

Lare Jugudum, a single mother of 8, lived in Dassabe, a village outside Gamboru town, and was forced to relocate to an IDP camp (ISS camp) after the flooding event of 2024, which displaced and rendered many persons homeless. Lare, who had lost her husband, was now confronted with catering for 8 children alone in the camp.

In her words, “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, we lost our vegetable orchard, and 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 prepares you for this sort of event even though it happened before.”

Lare heard from a community leader that CARE was targeting households affected by the flood to support with food assistance, particularly women with children and widows. She availed herself for verification and received a token for assistance. This food assistance was provided with funding from DRA and ensured that vulnerable households received the minimum emergency flood response package as harmonized and coordinated by the Borno state government. Targeted households received 25 kg of Rice and 10 kg of Beans.

“Before receiving the food assistance, just the thought of whether any of the people in camp will pity for us enough to give us a little of what they had was a major heartache. 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. Since receiving the food, their feeding improved, and I was able to join other women who went to Dassabe to beg and put up shelters. I am happy because we will return tomorrow, and I still have some rice left. We are hopeful again; we are invigorated, and you can see it in my smile.”

Reducing Anemia Project



Hadiza's Story

"At the time when CARE Nigeria targeted me as one of their project participants, I was 7 months pregnant, and I had been told at the hospital that I had a shortage of blood (anemia), which was causing me weakness, fatigue, headache, and shortness of breath. I was asked to buy some drugs that would enable me to deliver safely. The drugs were expensive, and we had no money. The money my husband made from selling firewood could hardly provide us with one meal a day. I was referred by the PHC staff to CARE, who registered me and provided the drugs free of charge. I received drugs every two weeks, and the clinic conducted tests at each visit to monitor my progress. At the time of my delivery, I was told that my PCV level, which was 25% at the beginning, was now at 37%. I successfully delivered my baby twins without any difficulty. My husband and I want to express our appreciation to CARE Nigeria and Primary Health Care Center for coming to my aid when I needed help the most."



Farida's Story

"My husband is a farmer, and so each year, we have grains of food, but the challenge I always faced was lack of money to purchase vegetables to include in my meals, and if I had to, then bought on credit, so I avoided buying vegetables. When CARE introduced home gardening in this community, I became interested and spoke to my husband about using our backyard to grow vegetables. He agreed and helped set up the garden. We were given vegetables (Okra, Cabbage, Lettuce, Cucumber and Amaranthus) seeds, garden tools, and trained on how to manage home gardens and to include at least one vegetable in the household meal. After the growth of the garden, I had access to vegetables, which I now include in meals for my husband and my 3 children. Now, anytime I want to prepare a meal, all I need is to go to my backyard and harvest some vegetables. I also enjoyed free drugs each time I visited the hospital for my antenatal care up until I delivered my baby safely in August 2024."

Explore more of our impact stories — [The Changing World of the Uwar Daki](#) reflects how girls and communities are reshaping power, tradition, and patriarchy. Or follow [Aisha's Journey](#) from a voiceless teen to a champion of change in Nigeria.

2024 In Photos







Note of Appreciation to Our Partners and Donors

Donors



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DIAGEO



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Donor

Partners

International Partners

- Global Alliance for Improved Nutrition (GAIN)
- Nigeria International NGOs Forum (NIF)
- Action Against Hunger (ACF)
- Save the Children

National Partners

- Life Helpers Initiative
- NEEM Foundation
- Ekklisiyar Yan'uma A Nigeria (EYN)
- Trauma Healing and Support Initiative (THSI)
- African Youth for Peace, Development and Empowerment Foundation (AFYDEV)
- Forward in Action for Education, Poverty, and Malnutrition (FAE-PaM)
- Development Exchange Centre (DEC)
- Novel Alliance for Development Aid (NADA)
- Rehabilitation Empowerment and Better Health Initiative (REBHI)

CARE Member Partners

- CARE USA
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- CARE France
- CARE Canada



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