OVERVIEW

CARE supported drought and conflict-affected communities in the Sahel region of West Africa—in Mali, Chad, Niger, Cameroon—during the previous food crisis in 2011-2012. At the beginning of 2013, CARE scaled up its response when conflict in northern Mali led to nearly half a million people displaced both inside Mali and in neighbouring countries.

This year, more than 20 million people are food insecure across the region; one in eight inhabitants suffers from food insecurity; and 4.8 million children are expected to suffer from acute malnutrition. The region also hosts approximately 724,000 refugees and 495,000 internally displaced persons (IDPs).

CARE is scaling up its efforts once again to come to the aid of those most in need.

FOCUS ON MALI

HOW WE RESPONDED IN 2013:

CARE brought relief to thousands of families displaced by conflict and affected by food insecurity, and supported already overstretched host communities in the regions of Séguo, Mopti and Timbuktu—three of the five worst affected regions.

Food distribution: more than 30,000 tonnes of food brought relief to 300,000 people. Food distribution targeted pregnant women and mothers with children under five.

Cash assistance: 40,000 people received cash assistance. With support from the European Union, CARE distributed over 600,000 Euros to more than 3,000 displaced families and 400 host families so they could cover essential needs such as: food, medication, housing costs and school supplies. Nearly 20,000 people received much needed cash assistance—approximately $900,000—thanks to CARE’s partnership with the Word Food Programme (WFP). CARE is one of WFP’s biggest partners in Mali.

Seeds and tools distribution: CARE distributed tools and seeds to 250 women so that they can set up vegetable gardens and grow nutritious food. This enabled the women to provide food for their families, and where possible earn an extra income to cover other essential needs.

Food for work: 2,000 internally displaced people and host community members benefitted from a food for work programme supported by WFP. Internally displaced people and host communities established vegetable gardens and helped with construction work in exchange for food.

“My husband died during the unfortunate events in the north of the country. I came to Séguo after to take refuge here with my nine children. The cash assistance from CARE enabled me to look after the children and escape the dishonour of begging,” 50-year-old Badji who fled Timbuktu, Mali, at the beginning of 2013.
HOW WE ARE HELPING IN 2014:
The situation: more than 800,000 people need immediate food assistance, and across the country three million people are at risk of not having enough food to eat. Humanitarian organisations, including CARE, call for a rapid response, warning that the “lean” season—when food stocks run low before the next harvest—will start early this year.

CARE is continuing to bring relief to vulnerable families. Nearly 60,000 people received food and 2,000 families benefitted from much needed cash assistance since the beginning of 2014.

This year, CARE is planning to help 185,000 people in need of immediate humanitarian assistance. CARE is distributing 18,600 tonnes of food to nearly 25,000 families in Timbuktu and Mopti regions. CARE is also providing cash assistance of US$ 1,746,500 to 17,500 to internally displaced people and host community members in the Mopti region.

HOW WE ARE HELPING IN 2014:
The situation: 21% of the population are affected by food insecurity. In some areas of the country, it is predicted that half of the population will exhaust their food stocks by April if food relief is not provided in time.

CARE’s response to the on-going food crisis in Chad is focused on the Wadi Fira region, which is affected the most by the current food crisis. It is estimated that more than half of the population in the region is suffering from food insecurity.

CARE is scaling up its efforts, planning further cash assistance and food security activities targeting nearly 150,000 people.

CARE aims to ensure that cash assistance and other initiatives such as distribution of livestock cover vulnerable community members’ immediate needs as well as enable them to better respond to future shocks. CARE will also invest in improving early warning mechanisms, enhancing the leadership of women in mitigating food insecurity and providing income generating and economic development opportunities for women through village saving loans activities.

Conflicts in CAR: the conflict has exacerbated an already vulnerable and volatile situation in Chad.

“Resources are already overstretched and scarce. Both refugees and returnees need urgent assistance upon arrival to cover basic needs: food, water, shelter, sanitation. Often, the local communities are the first to provide assistance to the refugees and returnees. They are already in a difficult situation, not having enough food for their own needs,” said Bonaventure Wakana, CARE Country Director in Chad.
At the beginning of the year, CARE has already responded to the water, hygiene, sanitation needs of returnees finding shelter in Goré, Doyaba and Sido in the south of Chad. We have also continued our on-going activities in areas of reproductive health, child protection, water and sanitation in the south of the country to help refugees, returnees and host communities.

CARE plans to come to the aid of 30,000 people, including refugees, returnees and host communities, providing access to water and sanitation, hygiene, reproductive health services, child protection as well as livelihoods activities.

FOCUS ON NIGER

HOW WE RESPONDED IN 2013:

Refugees: CARE has been responding to the needs of Malian refugees and host communities on the Niger-Mali border, providing access to nutrition services, water and sanitation, emergency household kits, and cash assistance. We distributed cash assistance—over 183,000 Euros—to about 2,000 refugee or returnee households; we build 54 rural latrines; and conducted malnutrition screening for over 2,600 children under five.

Food insecurity: CARE has helped thousands of people in affected communities—in Tahoua, Maradi and Diffa regions—by distributing food, cash, and other essential non-food, emergency items.

More than 6,500 families received much needed food, and over 2,300 children under two benefitted from blanket feeding distribution—distribution of food to prevent malnutrition. 600 families affected also by last year’s flooding received non-food, emergency items.

Cash distribution: more than 860,000 Euros for approximately 5,000 families, including families who were affected by last year’s floods. 900 vulnerable families benefitted from a cash for work programme and over 2,800 women received cash vouchers so that they can buy seeds and tools.

Since December 2013, more than 70,000 refugees and Chadian returnees fleeing CAR conflict have sought refuge in Chad. The numbers are projected to increase to up to 200,000 people over the next months.

Early warning mechanisms support: CARE supported the reinforcement of 11 municipality-level and 45 community-level early warning and emergency response systems in Maradi and Diffa regions by providing training and equipment so that communities are better prepared to face future shocks.

HOW WE ARE HELPING IN 2014:

The situation: out of a population of about 17 million people, more than four million people are food insecure and over seven million are at risk of not having enough food to eat.

By May, CARE plans to reach over 1,100 families affected by food insecurity in Tahoua region with cash assistance, and is planning additional activities for 2014.
FOCUS ON CAMEROON

HOW WE RESPONDED IN 2013:

There is an essential link between access to water and food security. Our efforts in 2013 focused on providing access to water, rehabilitating water points and supporting six municipalities to maintain their water equipment. Thus, affected communities in the northern regions could cope better with food shortages by being able to sustain agricultural activities despite the arid areas and the lack of rain.

HOW WE ARE HELPING IN 2014:

The situation: 1.7 million people are food insecure whilst recurring natural disasters (droughts, floods, locusts) have pushed many households and communities into chronic vulnerability. More than 33% of children under five already suffer from chronic malnutrition and there is a high risk of this evolving into acute malnutrition during this period of food crisis.

Conflict in northern Nigeria and CAR continues to displace refugees to Cameroon, putting additional pressure on already vulnerable communities. Poor access to water and sanitation are also making the current situation worse.

CARE continues to provide access to water and rehabilitate water systems in the Far North region so that communities can continue agricultural activities and cope better with food insecurity.

Early warning mechanisms support: CARE provides training to and supports six municipalities in North and Far North regions to improve early warning and emergency response systems.

Building communities’ resilience: CARE plans to support 12 local women groups with economic development initiatives such as Village and Saving Loans Activities, empowering and equipping women to be able to generate additional income and support their families and communities during reoccurring food shortages.

We will provide training in activities and techniques helping adaptation to climate and environmental changes, and so that the women’s income generating activities can result in more sustainable food production, better food storage, conservation and transformation.

“Our teams in the Sahel region work to respond to both urgent and long-term needs:

- contributing to the stabilisation of food security and nutrition;
- investing in improving early warning mechanisms;
- enhancing the leadership of women in mitigating food insecurity; and
- providing income generating and economic development opportunities for women.

Our longer-term, resilience building programmes in the region show that women and communities that benefitted from economic development projects have been coping better with food insecurity, and were also able to better support internally displaced people seeking refuge in their communities.

Families who received food, cash or livestock in the last year are also better equipped now when having to face rising food insecurity.”