Following the concerns raised by the GBV sub sector working group on the happenings in certain camps around MMC and JERE LGAs, Jireh Doo Foundation (JDF) an active member of the working group took the initiative to conduct Rapid Assessments on certain camps, to understand peculiar challenges, gaps and the way forward. This report is one of the findings on one of these assessments.
Appreciation and acknowledgements

The management of Jireh Doo Foundation (JDF) acknowledges the valuable effort of the organization’s Monitoring, Evaluation and Learning Team (MEAL) in coordinating this rapid needs assessment. These efforts are appreciated. The organization also sincerely appreciates, the support and cooperation of the leaders and camp members of Teachers Village MMC, and all participants and respondents to this rapid assessment. Your contributions are invaluable.

It is important to highlight that the findings and views contained in this report are those of the MEAL Team who have authored this report and do not necessarily represent the view of Jireh Doo Foundation.

Coverphoto: Children in participating in CFS activities.
Photo credit: JDF MEAL, 2018
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Background
Teachers Village was set up by the state government in January 2014 and was originally intended as accommodation for state teachers. The site was never used for its original purpose, and a year later became home to thousands of civilians fleeing the conflict in Borno State.

In October 2018, the camp population was 8,605 individuals. The maximum capacity of the camp is 10,000 individuals.

Due to a spike in mass displacement following armed clashes in late 2018, the camp has absorbed more than 20,000 newly arrived displaced people, bringing the total camp population to more than 31,000 individuals, over 300% capacity. More than 80 per cent are women and children. All are in dire need of humanitarian assistance, especially food, shelter, WASH, and protection-related services.

The spike in the camp population is stretching resources and overcrowding the camp, particularly in shelter and WASH sectors.

*UN OCHA 28 February 2019*

Overall Assessment objective
In conducting this rapid assessment, Jireh Doo Foundation (JDF) set out to achieve the overall objective *to improve the quality and effectiveness in the design, implementation and monitoring of GBV programmes in Borno State.*

Specific Objectives of the rapid assessment included:

- To understand availability of GBV services, gaps, service providers and their intervening capacity in Teachers Village Camp MMC.
- To provide Jireh Doo Foundation and other actors intervening on GBV issues within MMC especially in camps the needed information that will lead to improved design, implementation and monitoring of GBV services and programmes

Summary of Assessment
The assessment was carried out through focus group discussions. The focus group discussions were categorized into three (3) major groups, i.e. the men, women and children, the segregation was done in other to ensure that the gap in area of needs of everyone in the community are identified and prioritized accordingly.

From the assessment we were able to identify the different actors and the interventions they give in the community as shown in the table below.

<table>
<thead>
<tr>
<th>Humanitarian Actors Present In TVC</th>
<th>Interventions And Support They Provide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. IOM</td>
<td>Shelter</td>
</tr>
<tr>
<td>2. UNICEF/ALIMA/MDM</td>
<td>Health facilities and medical care</td>
</tr>
<tr>
<td>3. UNICEF</td>
<td>WASH/Nutrition</td>
</tr>
</tbody>
</table>
Basic human needs are those elements required for survival and normal mental and physical health, such as food, water, shelter, protection from environmental threat and love. From the table above, we can say that most of the fundamental human needs have been met even though not sufficient enough to satisfy them.

As part of the assessments the respondents were asked to identify other of their needs that have not been met and wish to be provided with support if resources permit. Different responses where gotten from the various group with regards to their collective needs.

<table>
<thead>
<tr>
<th>Focus Group</th>
<th>Needs Identify</th>
</tr>
</thead>
</table>
| Men         | • School for children  
              • Shelter for new arrivals  
              • WASH  
              • Health care facilities |
| Women       | • Clothes for ourselves and our children  
              • Beds especially for new arrivals  
              • Food |
| Children    | • Food and cooking items e.g. fire wood  
              • School and learning materials like books and pens. |

One need common to more than one Focus group is school. The respondents want schools to be built in the camp so their children could attend and learn how to read and write effectively. They said we used to have a school in the camp that was built and run by IRC but the school is no longer functioning since it has been occupied by new arrivals that were recently displaced from their communities, and as such the children no longer go to school to learn anymore.

Shelter is also a fundamental human need which the new arrivals are lacking. The new arrivals who were recently displaced from their community are scattered within the camp having no shelter to take refuge in. This in turn makes them vulnerable to harsh weather, sickness, disease and other forms of threat and violence.

Food which is a basic and vital human need is also not sufficient in TVC, considering the fact that the camp is extremely overpopulated. The respondents said the food they receive from agencies providing this food support is not sufficient and are pleading for more support in the food area. Along with the food, condiments provided are also grossly insufficient, as beneficiaries say a pack of maggi (condiment) is usually distributed among 4 households which translates to 25 cubes/HH, which would barely cater...
for a week’s cooking. In additions to this, a little salt and baobab leaf flour (kuka)is also distributed for soups.

**Awareness of Gender Base Violence (GBV)**

From our assessment we can say that TVC members are aware of GBV and have witness many forms of GBV in their community which is mostly channeled towards women and girls and the perpetrator are mostly drug addicts. Since the camp is very large with IDPs ranging over thirty thousand and minimal number of security agents’ women and girls are prone to face various forms of GBV.

The respondents were asked to mention the forms of GBV they have witnessed in the camp and how they manage GBV case in the community. The respondents said the common forms of GBV witnessed in the camp are physical and sexual harassment towards women and girls from young boys within and outside the camps, these include rape, forced sex, forced and early marriage, domestic violence, child molestation etc.

In a focus group discussion with the children in Teacher’s Village Camp, a child said “a small girl of 7 was raped by a man who lives in the same house with her, he was given minor punishments and then released”.

In order to understand structures put in place to take actions on victims of SGBV and the perpetrator to ensure the victim is protected from the perpetrator and the perpetrator is punished accordingly, members of TVC were asked who they report incidences of GBV and SGBV to, from their responses the men and women claimed they report cases of SGBV to community leaders, human right agencies and UNFP, while the adolescent boys and girls said they report to Police but reporting to the police costs money, so they prefer to report to their elder brothers who then take the law into their own hands.

The children in TVC also believed that women and girls were more exposed to rape and abuse behind the clinic in the camp, as according to them “masu shaye shaye suna zama a wurin” ‘the drug users often stay there’ and they are the perpetrators of SGBV in the camp. The children claimed they once had a teacher who stood up to the drug abusers, but they ganged up and beat him. They say, the only place they could report a SGBV case was to the police, and it is not free, so they seldom report any cases, because they have no money.

**Assessment Methodology**

The rapid assessment employed a tool for Focus Group Discussion prepared by JDF MEAL Team. Primary data collection took place Teacher’s Village Camp MMC. Three (3) Focus Group Discussions (FGDs) with separate groups of women, men and children were held. JDF MEAL team members with the appropriate skills and language for effective communication engaged in the facilitation of the Focus Group discussion. Data collected from the Focus Group Discussions was analysed by JDF MEAL team (Borno) and reviewed by National MEAL Coordinator of JDF.
Limitation of assessment
Due to the limitedness of time, the assessment was conducted within a relatively short period of time that may not have taken proper cognizance of the scope, complexity of the crisis and the sensitivity of the subject matter.

Assessment recommendations
- There is a need to scale up GBV intervention programmes in both locations to cater for the identified gaps in TVC, especially with needs such as Non Food Items, dignity/WASH kits, paying particular attention to new arrivals or other vulnerable populations who may not have access to services or service provision points.
- Help desks and or safe spaces should be provided within the camp, where survivors of GBV can go to receive need based support.
- Training, sensitisation and advocacy is required for law enforcement officers, to optimise their contributions to the fight against GBV.
- Training for life skills should be organised for women to enable them be self reliant.
- Food and condiment support should be provided in the camp.

Conclusion
Gender-based violence is widespread among women and girls in Borno state but more so in IDP camps than it is in host communities. This is as a result of the tough living conditions in some of the camps. Making a living in the camps is quite challenging, with most of the camps already over congested, a typical example being that of Teachers Village Camp which is more than 200% above its capacity. Along with all these challenges come GBV concerns. Rape, Sex for food, Physical violence, Emotional violence etc… Following the results of this assessment, it is obvious that there is a great gap in protection, especially as regards GBV. A swift multi-sectorial action is required.